INTRODUCTION

• Patterns of healthy fruit and vegetable consumption start in childhood and track to adulthood (Mikkilä et al., 2004).
• Increasing fruit and vegetable intake in preschool and kindergarten aged children to five servings a day may reduce the probability of chronic disease and obesity (Gerberding & Marks, 2004; Van Duyn & Pivonka, 2000).
• Parents, as gatekeepers of their child’s nutrition, seem to be an important factor in modifying dietary behavior.
• Increasing availability and accessibility of fruits and vegetables in the home has been associated with increased intake (Patrick & Nicklas, 2005). This may represent a modifiable aspect of the home environment.
• A health report card targeting parents may be a simple and sustainable way to disseminate health information.

Hypothesis: Preschooler’s and kindergartener’s fruit and vegetable consumption will increase after parents receive a personalized health report targeting these behaviors.

MEASURE

• The National Cancer Institute (NCI) Fruit and Vegetable Scanner
  • 100% juice, fruit, lettuce salad, white potatoes (not French fries), beans, tomato sauce, vegetable soup, other vegetables
  • Analyzed serving and portion size

RESULTS

• Repeated measures ANOVA were conducted comparing fruit, vegetable, and fruit and vegetable consumption before and after the intervention.
• A significant difference between fruit intake pre- (M=0.86, SD=.6) and post- (M=1.08, SD=.83) intervention was observed; F(60)=4.165, p<.05; d=0.30.
• A significant difference between vegetable intake pre- (M=0.78, SD=0.55) and post- (M=1.11, SD=.073) intervention was observed; F(57)=13.14, p<.01; d=0.46.
• A significant difference between fruit and vegetable intake pre- (M=1.89, SD=1.03) and post- (M=2.49, SD=1.14) intervention was observed; F(56)=15.35, p<.001; d=0.51.
• Follow up tests examining potential covariates (age and gender) revealed no interaction effects with any of the aforementioned variables.

CONCLUSION

• A parent health report targeting fruit and vegetable consumption may be a feasible way to increase intake in preschoolers and kindergarteners.
• Combined fruit and vegetable consumption appeared to increase by approximately 1.4 servings.

IMPLICATIONS

• A parent health report card may be a simple and cost-effective way of increasing fruit and vegetable consumption.
• Adding a control group to future interventions will increase confidence in the validity of these findings.
• Future studies may also want to target juice intake as this has also been associated with childhood obesity (Dennison, Rockwell & Baker, 1997).

REFERENCES