# **Chapter 58**

# The role of parents in child feeding





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#### **ABSTRACT**

The practice of healthy habits regarding food ranges from counseling, educational processes, support, and motivation by parents. The study aims to identify the role of parents in infant feeding. Food is the fundamental tool for the proper development and maintenance of the human body. Building healthy eating habits is assertive to avoid irreversible damage to health, and parents' habits tend to be copied by children in their daily practices. Most parents have difficulty identifying eating problems in their family members. The bad eating habits acquired in childhood will be repeated in adulthood. Given this situation, it is necessary to have more efforts by our managers, with the implementation of educational programs aimed at the family and school, through public policies, or expansion of intersectoral actions that have a positive impact on the determinants of health and nutrition.

**Keywords:** Childhood, Family, Nutrition.

## 1 INTRODUCTION

Brazil has a tangle of legislation that originates in the legislative scenario of the National Congress, which are acts that meet social and economic demands and aim to ensure the processes linked to the various areas of the country. The legislation encompasses the concepts of fundamental rights of citizens and their proper realization in procedures applied in the (public and private) areas that may guarantee their restoration, proper recovery, and government stability. (Chamber of Deputies, 2023).

In the current Brazilian scenario, the country's public policies have been treated with great emphasis on the application of efficient and coordinated organizational models under the responsibility of the three governmental spheres (federal, state and municipal), renewing and formulating purposes of health universality and well -Star collective.

On the subject, Chiavenato (2000, p. 1) describes: "Public administration deals with the planning, organization, direction and control of all activities differentiated by the division of labor that occur within an organization".

In Brazil, from the promulgation of Law 1.920/1953, the Ministry of Health (MS) was created, aiming to suppress all the mishaps that are related to the health problems of individuals. (BRAZIL, 1953).

In the walk of history, in 1990, Law 8,080, known as the "Unified Health System Law (SUS)", was approved in the country, presenting from its texts, coping models to promote protection and health recovery, the organization and operation of the corresponding services. (BRAZIL, 1990a).

The concept of public health meets the incessant search for the health protection of individuals and reduces the risk of getting sick. The idea of being healthy goes beyond not being affected by some kind of disease, as it transcends other aspects, such as: congenital, genetic, social, environmental and psychological, which relate to the life history of each individual. (Carrapato et al., 2017). Nutritional attention in SUS promotes healthy food practices, for the prevention and care of diseases and diseases related to food and nutrition. (BRAZIL, 2023).

The National Policy on Food and Nutrition (PNAN), was approved in 1999, ensuring health rights and healthy eating. The Ministry of Health (MS), traced the following guidelines at PNAN:

- a) organization of nutritional care;
- b) Promotion of healthy and adequate eating;
- c) Nutritional and food surveillance;
- d) management of food and nutrition actions;
- e) participation and social control;
- f) qualification of the workforce;
- g) Research and innovation and knowledge in food and nutrition;
- h) Food control and regulation. (BRAZIL, 2023).

It is noteworthy that public health management is responsible for all the management of projects and activities in hospitals and all public health institutions in the country. It covers spending control, monitoring and process organization and people management, resources and all inputs linked to this area. (SANTOS, 2020).

It is noteworthy that it is the total responsibility of the State to promote the human right of providing the proper food for our children, applying public policies of nutrition, and creating intersectoral dialogues for the full implementation and effectiveness of their social actions. (Treméa et al., 2020; FERNANDES, 2020).

It is up to parents, with their eating and nutritional behavior, to influence the food behavior of children, especially in childhood. Childhood is the phase of nutritional and food experimentation, learning in this phase can determine healthy habits regarding adult feeding. (SILVA et al., 2021).

Moreover, it is shown that there are numerous options for the practice of healthy habits food, ranging from counseling, application of educational processes, support and motivation on the part of managers and health professionals in the application of measures that go back to the elimination or reduction of malnutrition and childhood obesity.

The study aims to identify the role of parents in children's diet.

#### 2 DEVELOPMENT

Food and nutrition are phenomena that evolves the history of man in parallel. Initially, extraction was performed, consuming what was collected in nature, such as fruits, leaves, roots and tubers. The consumption of wild animal meat and fish happens with the process of hunting and fishing. At the same time, the evolution and fixation of man on earth, and technological evolutions, begins planting, harvesting, storage, refrigeration and the distribution of food. (Montanari, 2003).

Food is the fundamental tool for the good development and maintenance of the human body. Building healthy eating habits is the most assertive means to avoid irreversible damage to man's health at all stages of the life cycle. Many factors contribute to the construction of healthy habits throughout life such as body image, sociocultural values, social coexistence, financial situation, fresh foods, media, etc. (Conceição et al., 2022).

According to Dutra; Malagoli (2019), healthy eating habits are cultivated from childhood, influenced by positive dietary experiences, observation of parents and family food customs, food in the school environment, and food consumed in the social environment, among others. Foods (fruits, vegetables, seeds and spices) are capable of promoting health, preventing diseases, and treating diseases and disabilities (vitamins) of food origin. Each food has its properties, stimulating different effects on our bodies.

The decrease or absence of these properties present in food consumed may cause a deficiency in the immune system, causing non -transmitted chronic diseases (NCD) such as anemia, hyperlipidemia, avitaminosis (pelgra, beriberi, xerophthalmia, among others), malnutrition, etc. When associated with a lack of physical activity, it can trigger obesity, diabetes and hypertension. (Conceição et al., 2022).

In the infant phase, especially in the first 180 days of the child's life, it is recommended to be exclusive breast milk. Mother's milk has unique properties, including nutrients, immunomodulators and protectors, meeting all food, immunological, growth, and digestive, among others necessary in the initial life. (Alcântara; ALMEIDA, 2020).

The author, also informs, that after the lactation period begins the food introduction, with pasty, shaved (apple), or dent (banana) foods. There are 3 to 5 meals daily between 6 to 11 months, between popes and milk. Between 8 and 9 months the child is part of family eating habits, avoiding excessive fat and sodium consumption. In this period, the child learns the first habits, food, meal times and the rhythm of swallowing. (Alcântara; ALMEIDA, 2020; LOPES, 2021).

According to the food guide to the Brazilian population (2019), food groups are four names, natura/minimally processed, culinary ingredients, processed foods and ultra-processed foods. (BRAZIL, 2019). As follows:

a) fresh/minimally processed - foods have taken directly from the environment such as eggs, leaves, fruits, vegetables, etc. In this category, foods that undergo a minimum processing process, such as beans (drying), milk (pasteurization), rice (polishing), coffee (grinding), oil (extraction), and meat (cooling), between others.

- b) culinary ingredients include spices and ingredients taken from foods to prepare other foods. Herbs such as rosemary, parsley, green onion, and coriander, are some examples.
- c) Processed foods foods produced by industries, receiving the addition of salt or sugar. Here are canning vegetables, canned fruits, cheeses, etc.
- d) Ultra-processed foods foods that go through various steps in the industry such as processing, refinement and adding components. Examples we can cite, are frozen pizza, instant noodles, snacks, sodas and cookies.

In the lessons brought by Abreu (2010), the family is considered to be the first refuge and the main lifestyle integration agent to be copied by its members, through their daily practices. The vast majority of parents have difficulty identifying food problems in family members. It is quite true that in the 21st century, with the advent of the internet, the unbridled rush of everyday life, and the lack of time, where individuals have been gaining more space in the job market, add up to the statistics of changes in daily habits by individuals.

Bad eating habits acquired during childhood will surely be repeated in adulthood. As an earlier result, changes in these habits begin health promotion and risk decrease DCNT persisted in adulthood. (Mahmod et al. 2021).

Parents have different behaviors regarding their children's food, regardless of their sociocultural characteristics. The most common is authoritarian (parental food control) associated with control, restriction, and pressure on food consumption. The democratic or negligent is the food behavior without control of the quality and the amount of food ingested by children, parents do not require responsibility or dietary discipline. Abreu (2010) draws attention that both behaviors can result in negative consequences for children.

There is also the behavior of food surveillance or discreet control. Parents exert partial control of food ingested by their children. And indulgent behavior, where parents have little interactivity with their children. Food is the answer to a basic need without emotional foundations. (DANTAS; SILVA, 2019).

The idea is to offer food, between fruits and vegetables, so that children eat, recognizing the stimuli to start, maintain and finish meals. We should be careful to avoid parental modeling using food such as punishment, emotional control or emotional blackmail by parents or family. (ABREU, 2010; DANTAS; SILVA, 2019).

Food behavior begins in childhood developing, throughout life, influenced by the social and cultural environment, as well as genetic and environmental factors. Exclusive breastfeeding, the introduction of varied foods and the socioeconomic conditions of families influence this path. (DANTAS; SILVA, 2019).

When parents expose children to inadequate food (ultra-processed foods) or without any consumption of vegetables, fruits, vegetables, vegetables, etc., it is to take them to the path of malnutrition or obesity, and consequently, to the involvement of numerous illnesses. For Leão et al. (2022) This situation is the total responsibility of parents, who, in this case, is classified as "neglect".

Development and its applications in scientific knowledge:

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The right to life, health and access to good nutrition is an elementary condition for all individuals. Regarding the rights guaranteed to our children and adolescents, in our Federal Constitution of 1988, in its art. 227, establishes:

Constitution of the Federative Republic of Brazil of 1988.

Chapter VII

Of the family, the child, the adolescent and the elderly

Art. 227. It is the duty of the family, society and the State to assure children and adolescents, with absolute priority, the right to life, health, food, education, leisure, professionalization, culture, dignity, Respect, freedom and family and community life, besides putting them safe from all forms of neglect, discrimination, exploitation, violence, cruelty and oppression. (BRAZIL, 1988).

The Brazilian Civil Code, in its articles 1556, IV and art. 1,634, I, establish:

# Law No. 10,406, of January 10, 2002

Establishes the Civil Code.

Chapter IX

Of the effectiveness of marriage

Art. 1,566. They are the duties of both spouses:

[...].

IV- support, custody and education of children; [...]. (BRAZIL, 2002).

### And, in art. 1634, I:

Subtitle II

Kinship

[...].

Art. 1,634. It is up to both parents, whatever their marital situation, the full exercise family power, which consists of, their children:

[...].

I- direct creation and education; [...]. (Wording given by Law No. 13,058 of 2014). (BRAZIL, 2014a).

The Statute of the Child and Adolescent, called (ECA), created in 1990, in its articles 3, 4, 7, and 22, also associates responsibility with its parents and tutors and the state, by establishing that:

Law 8,609, of July 13, 1990

Provides for the Statute of Children and Adolescents and makes other arrangements

[...].

Art. 3° The child and adolescent enjoy all the fundamental rights inherent to the person, without prejudice to the full protection of this law, ensuring, by law or other means, all opportunities and facilities, to them To provide physical, mental, moral, spiritual and social development, in conditions of freedom and equality.

Art. 4th is the duty of the family, the community, society in general and the public power to ensure, with absolute priority, the realization of rights related to life, health, food, education, sport, leisure, professionalization, to Culture, dignity, respect, freedom and family and community life (BRASIL, 1990b).

[...].

Art. 7° Children and adolescents are entitled to protection for life and health, through the realization of public social policies that allow birth and healthy and harmonious development, under conditions of existence. (BRAZIL, 1990b).

[...]

Art. 22. Parents are responsible for the duty of support, custody and education of the minor children, and in their interest, the obligation to comply with and enforce judicial determinations. (BRAZIL, 1990b).

And yet, the Brazilian Penal Code establishes a crime of mistreatment in the following terms:

Presidency Civil House Deputy Chief for Legal Affairs Decree-Law No. 2,848, of December 7, 1940 Chapter III Life and health verification Mistreatment

Art. 136- To expose to danger to the life or health of a person under their authority, guard or vigilance, to end education, teaching, treatment or custody, either depriving it with diet or indispensable care, or subjecting it to excessive or inadequate work, either abusing means of correction or discipline: (Brazil, 1940).

We know that parents have a strong influence on their children's food intake. Therefore, if they have and practice bad eating habits in the early years of their children's lives, they reduce the quality of life and future of children. The consequence of this disaster is undoubtedly the substantial increase in malnutrition, childhood obesity and the DCNT that plagues the whole world. (LOPES, 2021).

According to Shikasho (2022), parents are the true influencers and are responsible for most of their children's food practices. It is also true its conduct made in food choices (healthy or not) and also in its quantity and quality, are factors that increase and interfere with food behavior. (SILVA et al, 2016).

From this it becomes elemental that there is an effective commitment and awareness of parents and family to changes in eating habits, without harming the physical and mental health of children, ensuring the maximum maintenance of their full life.

Bad eating habits acquired and applied by individuals have taken their health to extremes. (Souza et al., 2021). It is quite true that the formation of a child's food choices is directly related to the family routine. After all, parents are the first references to contact with food, where they learn the habits practiced by adults.

For Vieira et al. (2019), numerous factors interfere in a very particular way with increasing childhood obesity, which covers the excess consumption of industrialized products, the sedentary life of the general population, the lack of knowledge by their responsible and even the Coexistence of our children in destructive environments and serious problems of social, economic and psychological orders.

Children and adolescents children of parents with disorders such as anxiety and stress tend to learn that foods are a form of comfort and comfort in food consumption, especially greasy and rich in sugar. Over time, they are more at risk for developing obesity, insulin resistance, and liver steatosis, among other problems. (Nicodemos et al. 2021).

The consumption of processed foods has been increasingly used in the daily food menu of individuals. (OLIVEIRA et al., 2021). This change has been associated with the strong connotation given by social media, negatively influencing its consumption, and directly affecting the health of the entire population, and especially our children.

Development and its applications in scientific knowledge: The role of parents in child feeding We certainly visualize the parental influence on the eating habits of your children. Adopt healthy habits in choosing food and performing family meals at least once to twice a day helps to model the food habits of children and families. A moment of emotional, food, and social interaction, protection, and welcome, is important in the lives of children. (Mahmod et al. 2021).

#### **3 FINAL CONSIDERATIONS**

If we stop to think how much food influences our lives, just open our cabinets and check how available of industrialized products are available. Children expect food to give you gifts, media influence food purchases by parents. However, within the packaging (product) the danger lives. The amount of sugar, sodium, fats, dyes, are set aside, in the eyes of their parents. Eating patterns follow a global mark towards the daily consumption of ultra-processed foods, increasingly rich in carbohydrates, calories, oils and sugars, leading our children to childhood obesity.

It is quite true that in the 21st century, with the advent of the internet, the unbridled rush of everyday life, and the lack of time, where individuals have been gaining more space in the job market, add up to the statistics of changes in daily habits by individuals. The food that was previously performed and celebrated in a family, today it comes down to going to fast food, casters, snacks stuffed with sauces and spices, or through tele delivery systems, among others.

Fresh or minimally processed foods should increasingly compose the foods to be offered to children. Family meals are a way of protecting children's health. At least one to twice a day, family meals bring parents and children closer, protect and welcome foods that promote health and prevent disease.

Micronutrient intake inadequacy prevalences are high and reflect the low quality of the Brazilian diet. We cannot fail to report yet that the lack of exercise only increases the statistics of the incidence of obesity.

Given this situation, it is necessary to have more efforts on the part of our managers, with the implementation of family-oriented educational programs, through public policies, or expansion of intersectoral actions that have repercussions a positive way on the determinants of Health and nutrition, showing its causes and effects, supported by the dissemination of health care, through policies that return to the practice of healthy eating patterns and the regular practice of physical activity.

#### REFERENCES

ABREU, J. C. Obesidade infantil: abordagem em contexto familiar. 2010. Monografia (Especialista em Nutrição) - Faculdade de Ciências da Nutrição e Alimentação, Universidade do Porto, Porto, Portugal, 2010. Obesidade infantil: abordagem em contexto familiar. Disponível em: https://repositorio-aberto.up.pt/bitstream/10216/54610/3/136640\_1002TCD02.pdf. Acesso em: 27 jul. 2022.

ALCÂNTARA, K. R.; ALMEIDA, S. G. Alimentos ultraprocessados com altos teores de açúcar nos hábitos alimentares de lactentes. 2020. Trabalho de Conclusão de Curso (Graduação em Nutrição) — Faculdade de Ciências da Educação e Saúde, Centro Universitário de Brasília, Brasília, DF, Brasil, 2020.

BRASIL. Decreto-Lei 2848, de 07 de dezembro de 1940. Código penal. Diário Oficial da União, Brasília, DF, seção 1, p. 23911, 31 dez. 1940.

BRASIL. Ministério da Saúde. Lei nº 1.920, de 25 de julho de 1953. Cria o Ministério da Saúde e outras providências. Diário Oficial da União, Brasília, DF, seção 1, p. 13193, 29 jul. 1953.

BRASIL. [Constituição (1988)]. Constituição da República Federativa do Brasil: promulgada em 5 de outubro de 1988. Disponível em: http://www.planalto.gov.br/ccivil\_03/Constituicao1988. Acesso em: 1 set. 2022.

BRASIL. Lei nº 8.080, de 19 de setembro de 1990. Dispõe sobre as condições para a promoção, proteção e recuperação da saúde, a organização e o funcionamento dos serviços correspondentes, e dá outras providências. Diário Oficial da União, Brasília, DF, seção 1, p. 18055, 20 set. 1990a.

BRASIL. Lei n° 8.069, de 13 de jul. de 1990. Dispõe sobre o Estatuto da Criança do Adolescente, e dá outras providências. Diário Oficial da União, Brasília, DF, seção 1, n. 135, p. 13.563, 16 jul. 1990b.

BRASIL. Lei 10.406, de 10 de janeiro de 2002. Institui o código civil brasileiro, Diário Oficial da União, Brasília,DF, seção 1, p. 1, 11 jan. 2002.

BRASIL Lei n° 13.058, de 22 de dezembro de 2014. Altera os arts. 1.583, 1.584, 1.585 e 1.634 da Lei n° 10.406, de 10 de janeiro de 2002 (Código Civil), para estabelecer o significado da expressão "guarda compartilhada" e dispor sobre sua aplicação. Diário Oficial da União, Brasília, DF, seção 1, p. 2, 23 dez. 2014.

Brasil. Ministério da Saúde. Guia alimentar para a população brasileira. 2. ed., 1. reimpr. Brasília : Ministério da Saúde, 2019.

BRASIL Lei n° 13.058, de 22 de dezembro de 2014. Altera os arts. 1.583, 1.584, 1.585 e 1.634 da Lei n° 10.406, de 10 de janeiro de 2002 (Código Civil), para estabelecer o significado da expressão "guarda compartilhada" e dispor sobre sua aplicação. Diário Oficial da União, Brasília, DF, seção 1, p. 2, 23 dez. 2014a.

BRASIL. Ministério da Saúde. Guia alimentar para a população brasileira. 2. ed. Brasília: Ministério da Saúde, 2014b. Disponível em:

https://bvsms.saude.gov.br/bvs/publicacoes/guia\_alimentar\_populacao\_brasileira\_2ed.pdf. Acesso em: 6 dez. 2022.

BRASIL. Ministério da Saúde. Diretrizes da PNAN: politíca nacional de alimentação e nutrição. aps.saude, Brasília, 2023. Disponível em: https://aps.saude.gov.br/politicas/pnan/diretrizes

- CONCEIÇÃO, E. M. S. M.; SILVA, J. P.; AGRIPINO, J. L. S.; PFINGSTAG, K. F. F.; FERREIRA, M. D.; LIMA, R. K. DA C. Hábitos alimentares saudáveis na educação infantil. Revista Ibero-Americana De Humanidades, Ciências E Educação, v. 8, n. 1, p. 1781–1800, 2022. Disponível em: https://periodicorease.pro.br/rease/article/view/4098. Acesso em: 7 jan. 2023.
- DANTAS, R. R.; SILVA, G. A. P. O papel do ambiente obesogênico e dos estilos de vida parentais no comportamento alimentar infantil. Revista Paulista de Pediatria, v. 37, p. 363-371, 2019. Disponível em: https://www.scielo.br/j/rpp/a/dg3NhhpRT7NMrMxdnW737vM/?format=pdf&lang=pt. Acesso em: 7 jan. 2023.
- DUTRA, G.; MALAGOLI, L. A construção de um hábito alimentar saudável desde a educação infantil. Revista gepesvida, v. 1, n. 9, p. 115-129, 2019.
- CÂMARA DE DEPUTADOS. O que é legislação. câmara.leg, Brasília, 2023. Disponível em: https://www2.camara.leg.br/atividade-legislativa/comissoes/comissoes-mistas/cpcms/normativas/oqueelegislacao.html#:~:text=Em%20resumo%2C%20a%20legisla%C3%A7%C3%A3o%20de,para%20assegurar%20estabilidade%20governamental%20e. Acesso em: 5 jan. 2023.
- CARRAPATO, P.; CORREIA, P.; GARCIA, B. Determinante da saúde no Brasil: a procura da equidade na saúde. Saúde Soc., v. 26, n. 3, p. 676-689, 2017. Disponível em: https://www.scielosp.org/pdf/sausoc/2017.v26n3/676-689/pt. Acesso em: 7 jan. 2023.
- CHIAVENATO, I. Introdução à teoria da administração. 6. ed. Rio de Janeiro: Campus, 2000.
- FERNANDES, R. A. U. O direito humano a alimentação adequada e saudável e a política da assistência social: reflexões sobre a integração entre os sistemas a partir da percepção dos/as trabalhadores/as do SUAS. Oikos: Família e Sociedade em Debate, v. 31, n. 2, p. 241-263, 2020. Disponível em: https://periodicos.ufv.br/oikos/article/view/9851/5857. Acesso em: 7 jan. 2023.
- LEÃO, J. I. S.; QUEIROZ, M. F. M.; FREITAS, F. M. N. O.; FERREIRA, J. C. S. Formação de hábitos alimentares na primeira infância. Pesquisa, Sociedade e Desenvolvimento, v. 11, n. 7, pág. e47711730438-e47711730438, 2022.
- LOPES, L. S. Formação de hábitos alimentares na primeira infância. 2021. Trabalho de Conclusão de Curso (Graduação em Nutrição) Faculdade de Ciências da Educação e Saúde, Centro Universitário de Brasília, Brasília, DF, Brasil, 2021.
- MAHMO, L.; FLORES-BRRANTES, P.; MORENO L. A.; MANJOS, Y.; GONZALEZ-GIL, E. M. The influence of parental dietary behaviors and practices on children's eating habits. Nutrients, v. 30, n. 13, p. 1138, 2021. Disponível em: https://www.mdpi.com/2072-6643/13/4/1138. Acesso em: 7 jan. 2023.
- MONTANARI, M. História da alimentação. 9. ed. São Paulo: Estação Liberdade, 2003.
- NICODEMOS, M.; SPREGHINI M. R.; MANCO, M.; SFORZA, R. W.; MORINO, G. Childhood Obesity and covid-19 lockdown: remarks on eating habits of patients enrolled in a food-education program. Nutrientes, v. 13, n. 2, p. 383, 2021. Disponível em: https://www.mdpi.com/2072-6643/13/2/383. Acesso em: 7 jan. 2023.
- VIEIRA, M. L. R.; OLIVEIRA, J. C. S.; MELLO, A. P. Q. Aspectos sociais na formação dos hábitos alimentares de crianças. Revista Eletrônica Acervo Saúde, n. 33, p. e809-e809, 2019.
- SANTOS, L. S. Dilemas morais da gestão pública brasileira no enfrentamento da pandemia do novo coronavírus. Revista de Administração Pública, v. 54, n. 4, p. 909-922, 2020. Disponível em:

https://www.scielo.br/j/rap/a/QDkMz3Q5s8bYWrvT8wM656k/?format=pdf&lang=pt. Acesso em: 7 jan. 2023.

SHIKASHO, M. N. Estilo alimentar parental e percepção das mães sobre o estado nutricional de seus filhos. 2022. Trabalho de Conclusão de Curo (Graduação em Nutrição) — Universidade Federal de São Paulo, São Paulo, SP, Brasil, 2022.

SILVA, G. A. P.; COSTA, K. A. O.; GIUGLIANI, E. R. J. Infant feeding: beyond the nutritional aspects. J. pediatr, n. 92, v. 3 suppl. 1, p. 52-57, 2016. Disponível em: https://www.scielo.br/j/jped/a/H8MdrRDbRRBRLMnNG85Q99Q/?format=pdf&lang=pt. Acesso em: 7 jan. 2023.

SILVA, C. R. E.; BARBOSA, K. R. B.; SANTANA, T. N. G.; GRATÃO, L. H. A.; GOIS, B. P. Influência dos pais sobre o hábito alimentar na infância: Revisão Integrativa. Enciclopédia Biosfera, v. 18, n. 37, p. 286-299, 2021.

SOUZA, J. J.; CORDEIRO, K.; GROSSI-MILANI, R.; GREINERT, B. R. M. Vínculos familiares e obesidade na adolescência: um estudo de caso. ENCICLOPÉDIA BIOSFERA, v. 18, n. 38, p. 85-95, 2021.

TREMÉA, E.; SCHAURICH, A. C. S.; SILVA, E. K. S. O direito humano à alimentação adequada e à segurança alimentar e nutricional no contexto das políticas alimentares brasileiras. Revista Quero Saber, v. 1, n. 2, p. 13-33, 2020. Disponível em: https://deposita.ibict.br/handle/deposita/200. Acesso em: 7 jan. 2023.

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