Mutual Experiences of Japanese Parents and Their Children When Late School-Age Children Engage in Meal-Related Family Routines: A Qualitative Analysis of Parent and Child Dyads

Saeko Ando¹, Tae Kawahara², Nagisa Yasui², Maiko Yasuzato², Marie Tabayashi², Yui Masui², Akemi Yamazaki²*

¹Department of Nursing, Faculty of Nursing and Rehabilitation, Konan Women’s University, Kobe, Japan
²Division of Health Sciences, Graduate School of Medicine at Osaka University, Osaka, Japan
Email: *akemiyamazaki@sahs.med.osaka-u.ac.jp

Abstract

**Purpose:** The objective of the present study was to identify the type of experiences that parents and their children have with each other when late-school age children take on roles in family routines related to daily meals. **Methods:** A grounded theory approach was used. The participants were children in the 4th, 5th, and 6th grades of elementary school and their main caregivers. First, 10 parent and child dyads were interviewed using a semi-structured schedule. Next, online group interviews were conducted for 17 parent and child dyads to deductively confirm the categories. **Results:** The average age of the subjects was 41.9 years for parents and 10.4 years for children in parent-child interviews, and 41.1 years for parents and 9.6 years for children in group interviews. Six categories emerged with nineteen subcategories. **Conclusions:** Experiences mutually nurtured by parents and their children included experiences in which children used negotiation and conversation skills to consensually engage in family routines related to meals. It also included experiences that socialized the children in family life and fostered good communication. The six categories will be useful for healthcare professionals and school authorities in providing health guidance that addresses health functions of late school-age children and their families.

**Keywords**

Family Meals, Late School Age Children, Family Role, Family Communication
1. Introduction

Coordination of roles of daily routines within a family is an important family issue for the health of each individual family member and the family as a whole [1]. Late school-age children have greater interest in food and learn to make their own food choices [2] [3]. Thus, late school-age years onwards is the right time for children to help at their own pace with family routines related to meals and participate in sharing roles within the family. Since role structures in families impact family functioning [4], sharing roles of family routines related to daily meals by all family members increases the cohesiveness and adaptability of child-rearing families and contributes to the health of children and their families.

There have been many previous studies on children helping with meal preparation as part of family routines related to meals, which have reported the physical and emotional impacts on children. Children who have participated in cooking lessons enjoy cooking and are eager to help with cooking at home [4]. The frequency of children cooking was related to the children’s self-efficacy for cooking and food preparation techniques [5]. Children cooking with their parents increased the intake of healthy foods [6], and the more the children participated in the cooking, the more fruits and vegetables they consumed [7]. Qualitative studies that included focus group interviews showed that children become aware of the difficulties and ease of cooking when they participate in the cooking process [8], learn the dangers of using knives and fire [8] [9], and pay attention to foods that may cause food poisoning [9]. In other cases, children participated in cooking at home to help their families, for their future lives [9] [10], and to learn about their traditional cuisine [10]. From a parental perspective, parents’ reasons for involving children in the preparation of daily meals were for developing a child’s sense of responsibility, self-control, self-esteem, and independence, and children were more involved in daily meal preparations when they were curious [9].

Studies on meal-related family routines in late school-age children have not all been about meal preparation as described above [5] [7] [8] [9] [10], but there are also studies that included routines such as setting up the table, cleaning up after meals, and washing the dishes [4] [11]. Involving children in grocery shopping, menu planning, and food selection has been shown to increase the weekly consumption of fruits and vegetables [12]. In addition, the frequency of having family meals increases when the frequency of children preparing meals increases [5]. Family meal frequency was also related to family functioning [13], family communication, and level of family satisfaction [14]. A longitudinal study of family meal frequency and family cohesion targeting children from school-age through adolescence showed that family meal frequency was a predictor of increasing family cohesion [15].

As noted by the above-mentioned previous studies, helping out at home at the children’s own pace, especially with meal preparations, has already been shown
to positively impact eating behaviors and the emotional health of children, as well as emotional relationships in families. However, family routines related to meals that surely need to be done every day and at every meal are not limited to cooking. In addition, unlike sharing household chores between spouses within a family, the fact that growing children take on roles in meal-related family routines means that there might be a complex and delicate mutual interaction between parents and their children. In fact, although parents welcome their children’s help in the kitchen, there are studies that report time constraints [9] and inconvenience due to disruption of personal routines [8]. School nurses are expected to provide health guidance that fosters cooperation and communication regarding the overall diet for the health of children [16], and they also have a role in supporting how to involve children in meal preparation at home [17]. In other words, demonstrating the types of mutual experiences that arise between parents and their children when late school-age children take on participatory roles in the family in all kinds of family routines related to meals may help with the health of late school-age children and their families.

The objective of the present study was to identify the types of experiences that parents and their children have with each other when late school-age children take on roles in family routines related to daily meals.

2. Methods

2.1. Study Design

A grounded theory approach was used. First, data were collected using in-depth, semi-structured dyadic interviews of parent and children pairs at their home. Next, online group interviews were conducted. Since each family has diverse experiences, such diversity can be accommodated by using at least two methods of qualitative data collection [18]. In this sense, this study design used triangulation by parent-child dyad semi-structured interviews and group interviews. By using triangulation, it is possible to confirm whether qualitative data obtained from one population can be generalized to a different population and different methods and to evaluate transferability. Furthermore, we believe that collecting data from individual parent-child dyads and groups will lead to the acquisition of multiple perspectives and validations [19].

2.2. Definition

Family routines related to daily meals in children are defined as shopping, cooking, table preparation, cleaning up, and dishwashing, and other things that parents consider mealtime contributions. In addition, since family roles change daily, helping with meals involves not only the habitual roles in the family, but also those that have been experienced in their daily lives.

2.3. Sampling and Recruitment

The participants were Japanese children in the 4th, 5th, and 6th grades of ele-
mentary school and their parents. The exclusion criteria for children were disease that prevents them from eating food by mouth, and those who do not read or write Japanese in the 4th, 5th, or 6th grade of elementary school. The exclusion criterion for parents was difficulty communicating in Japanese.

In the first phase, an individual interview was conducted for each parent-child dyad for about 1 hour with recruitment based on snowball sampling. In the second phase, a group interview for around 1 hour was conducted online. The group interviews were carried out as part of the open lectures for the public (HANDAI Lab @EXPOCITY) organized by Osaka University’s Co-creation Bureau for households with children, which have taken place since 2019. These open lectures are conducted once every 2 to 3 months in a room in EXPOCITY, one of Japan’s biggest large-scale mixed-use complexes near Osaka University’s Suita Campus. Emphasis is placed on situations where parents and their children casually stop by on their days off and have frank conversations with the researchers. In 2020, they were conducted online to prevent the spread of COVID-19 infection.

The number of samples in the group interview was set to about 16, since the recommended size for focus group interviews is 6 to 8, and the number of groups per data collection is reported to be 4 or 5 [20] [21]. Parent-child dyad participants for the group interviews were recruited through public relations recruitment using the HANDAI Lab @EXPOCITY application website. Applicants who wished to participate accessed the application website and were asked to provide the names of the parents and their children, the grades of the children, email addresses, phone numbers, family structure, and the degree of the children’s contributions to regular meals. The parent-child dyads with the following characteristics and family structures that did not participate in the first-phase individual interviews were selected: “participation of fathers”, “an only child”, “single-parent households”, and “children who do not usually contribute/help with meal time”. After the start of public relations recruitment, since 19 dyads of parents and children that included those who met the selection criterion applied, the public relations recruitment was terminated. Two dyads refused to continue, including parents and children of single-parent households, and group interviews were conducted with 17 groups of parents and children.

2.4. Data Collection Method

After obtaining the consent form, parents were asked to complete the attribute sheet. In the attribute sheet, helping with meals referred to “1) Shopping, 2) Cooking, 3) Table preparation, 4) Cleaning up, 5) Dishwashing, 6) Others, 7) Not done”. With approval, the interviews were recorded digitally, and the taking of notes was started. In the first phase, for the parent-child individual interviews, considering the age of the child, the first 30 minutes consisted of an interview with only the parent. For the parent interview, the child was asked to wait anywhere. Of the 10 parent-child dyads, 3 children waited in the same room as the
A parent interview, and the other children waited in a separate room. Then, for the next 30 minutes, the child was interviewed in the presence of the parent. One of the reasons for asking parents to attend the children’s interview is that it is assumed that the child who is in the stage of concrete operations may have difficulty in abstract thinking [22]. Therefore, parents were present for interviewer’s commentary and as spokespersons for the children.

In the second phase, for the parent-child online group interview, participants were contacted based on the e-mail address provided at the time of application, and the schedule for receiving the research explanations in advance in order to explain the research and conduct the on-line testing of ZOOM was set. Two or more researchers participated in the on-line testing, and on the day of the group interview, researchers who were acquainted with the parent-child dyads through the on-line testing were in charge of the interviews. In the on-line testing, the research content was explained, and signed consent and assent forms were obtained online from each participating parent and child. At the same time, the contents of the attribute sheet were verbally confirmed and recorded in writing by the researcher.

After that, the meeting by ZOOM was set according to the date and time of the group interview, and the created URL, meeting ID, and password were sent by e-mail to the parents and children who agreed to participate. From the viewpoint of protecting the personal information of the participants, a pseudonym was requested in advance. In the group interview, 4 to 5 dyads of parents and children were set as one group, 4 groups were created, and two researchers (1 facilitator and 1 supporter) were assigned to each group. The degree to which participants feel comfortable about expressing their thoughts, perspectives, or opinions affects credibility [21]. Therefore, all four facilitators had experience working as pediatric nurses and were in charge of interviews for school-age children and adolescents. The groups were arranged so that each group had at least one father and the male-female ratio of children was even. In the first 5 minutes, all 17 parent-child dyads were introduced in the ZOOM main room. Group interviews were then started in the ZOOM breakout room session, and recording and taking of notes were started. After the group interview, all 17 groups of parent-children dyads gathered in the main room again, provided a summary for 5 minutes, and then ended.

2.5. Data Analysis

Analysis was conducted using the constant comparative method of the grounded theory approach [23]. The reason for using this method is that the grounded theory approach is effective in analyzing the process of social interaction in which humans interact directly, and it is appropriate for clarifying parent-child interactions. As a data analysis method, parent-child data were integrated using a method of one specific approach in the context of a multiple family member interview [24]. The data of parents and their children collected during the 10
parent-child individual interviews in the first phase were analyzed separately to compare the similarities and differences between parents and their children. As a result, categories unique to parents, categories unique to children, and inclusive categories common to both parents and children emerged. In order to identify mutual experiences of parents and children that emerge when late school-age children participate in family routines related to daily meals, the present study focused on categories common to both parents and their children. The analysis of the parent-child individual interviews for the 10 dyads was shared among the researchers, and it was ensured that there were no differences between the groups during the group interview process.

In the second phase, the verbatim transcripts, notes, and videos of the group interviews were used to analyze the facial expressions of parents and their children in response to comments of other parents and their children. Finally, the data from the parent-child group interviews were used to confirm the results obtained from the analysis of the parent-child individual interviews and to evaluate transferability. When discrepancies were found between the categories from the parent-child individual interviews and the group interviews, the process was periodically reviewed among the research collaborators.

2.6. Human Subject Protection

Approval to conduct the study was obtained from the committee on Human Research at Osaka University (No. 19357). Prior to both interviews, the researcher explained the outline of the research and ethical considerations, and signed consent and assent forms were obtained from each participating parent and child. For the online group interview, on the day of the online testing, consent and assent were obtained online; consent was obtained to confirm the identity and record the state at the time of the research explanation. Once the parent’s consent and the child’s assent were obtained, the consent form was signed by the researcher, and the PDF of the assent form was prepared to be signed online and saved as data. In addition, participants were requested to use a pseudonym on the day of the interview.

3. Results

The demographic characteristics of the study participants are listed in Table 1. The mean interview time was 77.1 (SD = ±11.3) minutes for individual interviews and 33.0 (±4.1) minutes for each group. Six mutual experiences of parents and their children were identified when children assumed roles in family routines related to daily meals. Hereinafter, the sub-category is indicated by <>, the parents of participants are A to J, and the children are a to j. Narrative data are shown in parallel from interviews with parents and children.

3.1. Sharing the Children’s Eagerness

Through their words and actions, children expressed their eagerness (interest,
Table 1. Demographic information of the parent-child dyads.

|                         | Individual interview (n = 10) | Group interview (n = 17) |
|-------------------------|-------------------------------|-------------------------|
| Number of subjects      | 10 dyads                      | 17 dyads                |
| Age (y) (Parent)        | 41.9 ± 3.2                    | 41.1 ± 4.2              |
| Age (y) (Child)         | 10.4 ± 0.5                    | 9.6 ± 0.7               |
| Relationship to child   | mother 9 both parents 1       | mother 12 father 5      |
| Child sex               | female 5 male 5               | female 4 male 13        |

Types of helping with meals that children experience in their daily life

|                          | Individual interview | Group interview |
|--------------------------|----------------------|-----------------|
| Shopping                 | 7                    | 8               |
| Cooking                  | 9                    | 13              |
| Table preparation        | 9                    | 9               |
| Cleaning up              | 6                    | 13              |
| Dishwashing              | 3                    | 6               |
| Other things             | 1                    | 2               |
| None                     | 0                    | 1               |

curiosity, and willingness) to somehow contribute to daily family meals, and parents and their children *shared the children’s eagerness.*

By children expressing their interest in foods through words and actions, parents and their children *match the children’s interests*.

A: "I actually like cooking quite a lot, so we started by cooking together."

a: “I like making things.”

In addition, children become intrigued with helping out, and parents and children *share the children’s curiosity*.

H: “My child was watching and had a strong desire to ‘do it’. So, it was more me being compelled to make a move.”

Parents and their children *gauged the timing of when children become motivated*. Some of the mentioned timings that motivated children were instances when they wanted to eat a certain dish or when they wanted someone to eat what they had prepared; however, there were also times that they were not motivated.

G: “For instance, YouTube. Umm… My child loves video streaming, so when he is completely engrossed, it does not even occur to him to help with meals.”

g: “I will do it if I am told to, but I am not in the mood.”

3.2. Negotiating Whether or Not to Help

Parents varied the way they approached their children according to the children’s level of independence, and the children in turn interpreted the meaning of their parents’ approaches. In other words, parents and their children were daily *negotiating* with each other *whether or not the children would help.*
At times, children already had their own roles in the family. In such cases, both parents and their children agreed that would be a role in the family that would be performed by the children.

G: “I do not tell my child to clear the table. I do not say anything, unless it is a dire situation, like my child being glued to the TV, dazed doing nothing.”

Interviewer: “Why do you clean up?”
G: “It’s a rule.”

There were also instances when the children would sense the need and do it out of consideration for their parents. Instances where children cared for their parents included situations where parents were not feeling well, etc. Parents were grateful for their children taking independent actions, and the children’s caring gesture resulted in agreement between parents and their children.

e: “Every once in a while, when my mom is tired from work and is sleeping, I might do it (meal preparation or washing up) to make things a little easier for my mom.”

E: “On days that I am not feeling well, having pushed myself too hard at work, my child would tell me that he will take care of the rest.”

At times, children negotiate with parents about their requests. Parents intentionally steer children to help (requests, instructions, warnings, setting rules), and in turn, children consider whether or not to help out in response to the given directives.

H: “When I need help, I tell all my children, ‘set the plates’ or ‘take out the chopsticks’.”

h: “If I hear ‘dinner is ready’ and I am told to ‘clean up the desk’ I might clean the eraser shavings off the desk if I am studying. Maybe set out the plates or chopsticks. I might also plate the food. I help out if I am told to.”

On the other hand, when parents understand the eagerness of children, parents and their children mutually understood the children’s option to

3.3. Looking for a Mutual Compromise

When parents steered the children to get involved in daily meal-related family routines or when children made eager requests, parents and their children try to find a mutual compromise instead of one-sided solutions.

When parents steered the children, they did so without forcing them, and parents and their children mutually understood the children’s option to
refuse>.

H: “I think that having a relationship where they can say no may have been a good thing.”

Interviewer: “How do you feel when your mother asks you to ‘help’?”

H: “Well, there are times that I think ‘I can’t right now’.”

Both parents and their children mutually <**assess their negotiating counterpart**>, and they try to find a way to help out that is acceptable to both sides.

Interviewer: “I see. So, what happens then if you say to your mother, ‘I can’t right now?’”

H: “She will probably ask my younger brother or older sister.”

H: “Oh well, when my child says he cannot do something, that means he cannot do it… (omitted)… In such cases, I look for someone else who could do it, like my younger child, or I just do it myself.”

Furthermore, through <**exchanging convenient conditions**>, parents and their children communicate their own requests, try to find areas of compromise through discussions, and create an environment where they can help out after reaching an agreement.

Interviewer: “Do you prepare or clean up the dinner table with your child?”

G: “Not on her own. When I start nagging at her, she might reluctantly start cleaning up.”

Interviewer: “Say you were doing your homework at the table and your mother called and asked you, would you clean up?”

G: “Well… I would tell her ‘Let me finish what I’m doing’ and then I would clean up.”

### 3.4. Detecting Different Perceptions towards Danger

Dangerous tools are used in the kitchen such as fire, knives, glass, and dry ice. Parents are concerned about risk management of their children. Parents and their children each detected different perceptions towards danger since children had limited experience using these tools.

<**Parents were more worried**> when they felt that their children lacked a sense of danger.

B: “b wanted to run amuck so I took away the knife as I felt b was not yet ready.”

In contrast, when children actually have a strong sense of danger, parents and their children <**share the intense fear of the children**>.

E: “My child is in 5th grade so I think she is ready to use knives because I’ve been able to use them (since I was in elementary school). I think she can do it. My child does not want to. She told me she made (an egg omelet) for the first time.”

E: “Oh, I’m scared.”

E: “Scared. Still the same.”

When parents deem that their children have a limited sense of danger, they prohibit the use of fire and knives. In such cases, parents and their children had
a common understanding of what is prohibited by parents>, and children asked for permission prior to engaging in these actions.

D: “My older daughter is in middle school so I tell her ‘you can use it even if I am not around’. I tell my youngest one, ‘always use it when I am around’.”

D: “I shouldn’t use fire.”

D: “That’s right. She always asks ‘can I cook (this on the gas stove)?’”

3.5. Finding an Appropriate Personal Distance

Parents and their children look for an appropriate personal distance both physically and emotionally. Parents themselves keep an appropriate personal distance with their children out of respect for their children’s independence, but also out of concern about dangers. While children want to be together with their parents and feel safe, children themselves keep an appropriate personal distance with their parents because of feelings such as wanting to gain confidence in cooking or feeling annoyed with their parents. Parents and their children understood each other’s intentions and established an appropriate physical and emotional distance.

Parents and their children were allowing children to do what they wanted to do together>. The reasons given were wanting to be with parents, interest in food, and gaining a sense of security by performing the actions with parents out of fear of the dangers. Parents performed the actions together with their children out of consideration for the children’s feelings.

E: “(When we cook) we do it together. It’s not that I never allow my child to do it alone. (I actually) want my child to do it alone. (My child) refuses to do it alone.”

E: “I am okay if my mom is around but I am scared of doing it alone.”

On the other hand, as they grew older, there were children who felt they wanted to do it alone. The reasons given were confidence in helping out with chores and irritation of doing things with parents. Parents and their children respected each other’s feelings of wanting independence>

H: “My child does not really like to do things together… (omitted). So, I have reached a point where I trust my child, I leave it up to my child because I think it’s okay to make mistakes.”

Children also begin to engage in more separate activities as they grow older and parents and their children experience being apart as they grow older>, even for family routines related to daily meals.

Interviewer: “Do you go (grocery shopping) less frequently together?”

J: “The frequency has decreased as (my child) grew older. That’s just the thing. When my child was younger, I always used to take her with me, but now that she is in elementary school, it’s less often.”

3.6. Subsequent Family Communication

After the children had participated in family routines related to daily meals, parents and their children were considerate of one another, created opportuni-
ties to exchange each other’s views, and experienced subsequent family communication.

Through trivial conversations, parents and their children communicated while performing daily meal-related family routines.

D: “Communication is difficult during busy weekdays… (omitted)… On weekends, we get together as a family and prepare meals while we communicate with one another.”

Among the routines, cooking involves the family eating what the children have prepared. The children get their families to see how their creations have turned out, and they share comments with each other about the food created by the children. This experience became the drive for children wanting to feed someone again next time.

J: First of all, we all gather (at the table) and give our comments on ‘how wonderful’ it turned out. Then, we ask if there are any secret ingredients and try to guess what they are.

J: “I wanted to make curry rice for my grandmother. Because I thought it turned out really well.”

Also, there is less burden on parents related to family routines of daily meals when children help out, and parents feel grateful to their children. Parents and their children shared their gratitude for their children.

J: “My child cooks. I am grateful.”

J: “Cooking is fun and I also learned that it makes everyone happy.”

4. Discussion

Children’s self-initiative to participate in cooking activities is influenced by their interest in food and their desire to contribute to the family [9] [10], as well as sharing the children’s eagerness, as suggested in this study. The family functions to meet the emotional needs of children [25], and parents and their children mutually experienced the sharing of emotional needs, such as the children’s interests and curiosities, when children participated in family routines within a family. According to previous studies, parents believed that child involvement in meal preparation was important for development; however, they noted that involvement was limited by time scarcity and concern regarding child safety in the kitchen [8] [9]. The present study identified negotiating whether or not to help as a mutual experience for parents and their children. Family flexibility tends to be functional, fluidly changing roles within the family when needed [26] [27], so situations where parents steered their children, or negotiations with one another such as parents accepting and entrusting children’s independent mindsets, contribute to flexibly changing roles within the family. In addition, the present study newly showed that parents and their children used negotiating skills looking for a mutual compromise when children took on roles in family routines related to meals. The school-age years are a time when children acquire social problem-solving skills through mutual interactions with family and friends [28] [29].
Families with flexible adaptability have been shown to actively include children and engage in negotiations [26]. Thus, having a common understanding by both parents and their children of a child’s option to refuse, and children also telling parents when they could help meant that children had negotiating rights within the family and led to participation with mutual consent. Furthermore, parents and their children realized that they detected different perceptions towards danger. It is recommended that the use of fire and sharp objects be introduced gradually depending on the age and abilities while keeping an eye on the child [9]. Educating children about safety in stages from a young age and ironing out differences in understanding of dangers between parents and their children are important for engaging children in the family to help with meal preparations. School-age children are at a stage where they develop emotional and behavioral autonomy [28]. Thus, for family growth, it is important to establish an appropriate personal distance where parents are available only when the children need them while ensuring the children’s safety. The present study showed aspects of late school-age children participating in roles of meal-related family routines. Parents and their children in the present study were trying to find an appropriate personal distance with each other as children wanted to do things either together with parents or alone. Good communication practices within a family, such as frankly expressing one’s thoughts and feelings and respecting and caring for one another, are related to family cohesion and adaptability [30] [31]. In addition, the more the parents involved the children in cooking, the higher the frequency of eating together and the more time they spent together as a family [5]. Involving the family in leisure activities such as family meals and meal preparations promoted communication in the family [32]. The present study also observed that children participating in family routines related to meals generated conversations within the family, and parents and their children experienced subsequent family communication. As noted above, gathering together at the table surrounding the food prepared by the children while giving feedback and sharing gratitude provided an opportunity to promote good family communication.

Although one dyad of “parents and children who do not usually help with meals” participated in the group interview, the participants of this study were generally parent-child dyads in which either one was highly interested in helping with meals. In the group interview, parents and children from single-parent households refused to participate. Therefore, there is a limitation of generalizing the results of the present study towards all parenting families of late school-age children. Despite the above limitations, the six categories of mutual experiences of late school-age children and their parents pertaining to roles in family routines related to daily meals identified in the present study will be useful for healthcare professionals and school authorities when providing health guidance that addresses health functions of late school-age children and their families (especially related to food).
5. Conclusion
Six categories reflected the rich mutual experiences that make families raising school-age children function on a daily basis. In other words, they led to family communication by sharing the children’s eagerness, looking for mutual compromises on whether to help out with family routines, and trying to find an appropriate personal distance. We believe that, through this experience, children earn the right to negotiate in the family, leading to participation with mutual consent. Furthermore, transferring roles related to implementing meal preparation from parents to children included experiences that socialized the children in the family and fostered good communication.

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Conflicts of Interest
No potential conflict of interest was reported by the authors.

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