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How involved are parents in their child's early years setting's food decisions and practices?



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ABSTRACT

As childhood obesity and poor nutrition rates in England continue to rise, parents and childcare practitioners have key partnership roles in ensuring young children have healthy balanced diets. Yet little is known about parents' understanding and involvement in their childcare settings' food decisions and practices, and how this might be strengthened. Semi-structured interviews were carried out with a purposive sample of 59 parents with one or more children attending early years settings in England. Framework analysis was used to explore the interviews. Epstein's model of parental partnerships was adapted as a reflective lens for the findings, and their implication for early years' policy and practice. Parents reported a lack of two-way communication on food, and of opportunities for active, meaningful engagement around food and healthy eating outside of one-to-one discussions of their child's specific needs and requirements. Some parents reported a lack of trust in the food related information provided by their childcare setting. As young children spend more time in formal childcare, it is increasingly important that trusting collaborative relationships are built between parents and childcare practitioners to ensure that children have the best start in life. This study adds to the limited literature on parental involvement in early years settings. Findings suggest that more policy work and development is needed in the early years sector, particularly in ensuring clear and accessible guidelines on food in early years settings are readily available, and that practitioners and parents have more clarity about their mutual roles and responsibilities in this.

1. Introduction

Good food and nutrition in early years are key to ensuring health in later years (Nyaradi et al., 2013; Tickell, 2011). However as with an increasing number of countries globally (Agha & Agha, 2017), poor nutrition among young children is a serious public health problem in England where, for example, more than one in five children entering the first year of school are living with either overweight or obesity (Public Health England, 2021). Most young children now spend a considerable amount of time in some form of formal early years childcare settings (EYS) such as nurseries or childminders (Department for Education, 2019), with many consuming most of their daily nutritional requirements within the setting. Parents and EYS have a key collaborative role in ensuring a healthy start for children (Action for Children, 2017a, 2017b; Buttivant & Knai, 2012; Moore et al., 2005; Tickell, 2011). It is therefore important to create environments which enable partnerships between parents (or other carers) and early years childcare professionals, focused on good food and nutrition, to support healthy early life (Luecking et al., 2020; Mistry et al., 2012).

In England, parental involvement (included in learning, development and healthy food choices) is a core aim in the Early Years Foundation Stage (EYFS) Framework, to which all registered EYS are mandated (Department for Education, 2017). Related guidance for EYS on involving parents accompany the Framework, ranging from providing one-to-one daily communication updates with parents via a key worker; organizing practitioner/parent/family workshops; promoting parents as volunteers for learning activities; and inviting parents as governors or steering group members (Early Years Alliance, a,b; Gov.UK, 2021; PACEY). This is further underpinned by UK policies to support partnership through integrated working between local authorities, health services and EYS (National Children's Bureau, 2015). Moreover, parental involvement as 'partners', working with practitioners in early years settings to support learning and development, is acknowledged in the EYS literature (Department for Education, 2017, 2019; Hryniewicz & Luff, 2020; Tickell, 2011; Wheeler & Connor, 2009), and considered particularly important for promoting healthy eating (Wolfenden et al., 2015, 2020).

However, the evidence on effectiveness of parental involvement

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mainly stems from studies in school contexts (four years and older). It indicates that involving parents leads to better learning, attainment, and health outcomes (Derrick-Lewis, 2001; Goodall & Montgomery, 2014; Luecking et al., 2020; World Health Organisation, 2020). Thus there is a need to strengthen the limited evidence available on parents' experience of 'being involved' 'participating' or 'engaged' in their child's food and nutrition in EYS, or of their perception of their roles and responsibility in this (Briley et al., 1999; Lloyd-Williams et al., 2011; Moore et al., 2005). Existing studies report that barriers and tensions exist on both sides, with parents feeling patronized by EYS staff 'educating' them, or viewing EYS staff as 'too busy' to engage in conversations on food; and EYS staff being unsure of how to communicate about good nutrition without offending parents, and viewing parents as an obstacle to healthy eating by continuing to supply their child with unhealthy snacks and food options (Dev et al., 2017; Drake, 1991; Lebron et al., 2020; McSweeney et al., 2016; Moore et al., 2005).

1.1. Theory

There is no one clear definition of parental involvement in the context of early years childcare and education, as it incorporates several behaviours and practices. Though many of the existing theories and models of parental involvement relate to mainstream school settings and educational outcomes (Driessen et al., 2005; Smit et al., 2007; Vincent, 1996), we draw upon two theoretical models with particular relevance to our study and age group of interest.

The first is Goodall and Montgomery's model of parental involvement and engagement which offers insight into relationships between parents and schools. The model describes this as a continuum, from parents as passive receivers of information to active 'partners' in their child's learning (Goodall & Montgomery, 2014). Thus, in order to visualize variation across levels of involvement and satisfaction with food and nutrition at their child's EYS, an adaptation of Goodall and Montgomery's model is used to assist in the analysis of the findings, particularly on the level of reported agency in decisions about food, and collaboration or partnership relationship between the parent and EYS

The second model of interest is Epstein's model of 'parent-school partnership' across the school, family, and wider community. This focuses on all aspects of children's learning and education and identifies six different types of parental involvement: parenting, volunteering, communicating, learning at home, decision-making within the setting, and collaborating with the local community (Epstein, 2010). Developed to assist educators to develop school and family partnership programmes, this model has relevance for EYS (0-5 years) especially as the rhetoric of 'parents as partners in early years learning and development' is present in recent policy literature in the UK (Tickell, 2011), and because the early years' sector is supported to encourage greater parental involvement through practitioner training as well as with materials and guidance for parents (Early Years Alliance a,b; Early Years Nutrition Partnership; Wheeler & Connor, 2009). Whilst much of this is focused on the child's educational development, the importance of physical, as well as social and emotional development is recognized. The Epstein model is applied to assist in reflecting upon the findings of our study and formulating policy and practice implications in the Discussion section.

This paper reports the views and experiences of parents on food provision and practices in their child's early years setting, exploring the nature of, barriers to, and their involvement in this.

2. Methods

The research forms part of a larger study of food provision in early years settings, including a stakeholder analysis, which is reported separately (Warren et al., 2022). Semi-structured interviews were carried out with 59 parents and carers of children in EYS in England. EYS are defined here as nurseries or childminders caring for children under five years and

registered with the Office for Standards in Education, Children's Services and Skills (Ofsted) Early Years Register. The interview set out to explore parents' drivers for choice of EYS, including the extent to which food practices and healthy eating played a part, how involved, or engaged parents were able or wanted to be in this, and how satisfied they were with the food and food practices within their EYS.

Social researchers at Kantar Public, abiding by Market Research Society Code of Conduct and data protection legislation, were commissioned to recruit participants and conduct interviews. The reason for outsourcing the recruitment and interviewing was related to the COVID-19 pandemic in England, including accompanying lockdown restrictions, necessitating additional support, which Kantar Public provided by carrying out one-to-one telephone interviews with a sample of parents of children in early years settings across England. Kantar Public had the experience, resources, and capacity to recruit and carry out the interviews within the allocated timeframe, as much of the preliminary work had been undertaken. The authors worked closely with Kantar Public by providing the selection criteria, drafting the structured topic guides, and preparing interviewer briefing notes. Participants were purposefully selected to include a range of geographical areas in England and socio-economic indicators. All had one or more child currently attending an EYS for at least part of the week. Informed consent for participation was obtained by Kantar Public prior to interview, which included consent for sharing of interview audiotapes and transcriptions with the authors. Interviews were conducted between the 15th of May to the June 10, 2020 and lasted between 20 and 52 min. Participants were provided with a small payment as compensation for their time and contribution.

Interviews were coded and analyzed thematically using the Framework approach (Gale et al., 2013; Richie & Spencer, 2002). Following transcription, the authors thoroughly familiarized themselves with the data by reading and re-reading the transcripts, in conjunction with accompanying audio recordings, and by making annotations about initial thoughts. This stage was important as the authors were not present at interviews, though there was extensive liaison, at all stages of fieldwork, between the authors and the Kantar team, clarifying any misunderstandings in transcriptions, and making corrections where indicated. Five transcripts were randomly selected and independently open-coded by the three authors. The authors then met to discuss and agree a set of categories and codes, as an initial coding framework, which could be applied to subsequent transcripts. This initial framework was subsequently applied to a further two transcripts and, following further meetings and refinement, a coding framework comprising four categories and their refined codes and descriptors were agreed. This framework was then applied to all subsequent transcripts and charted onto framework matrices, whereby the coded data for each case (or participant) was summarized on a matrix using NVivo Version 12 (QSR, 2018), enabling identification and refinement of key themes. The data were interpreted through identifying links between sub-groups and codes.

3. Results

3.1. Participant characteristics

Of the 59 parents and carers interviewed, the majority (n=45) were female; aged between 30 and 39 years (n=35); employed full time (n=34); living as a couple with their children in the same residence (n=46); and had children receiving care in a nursery EYS (n=53). Participants were interviewed in all regions in England, but a large proportion were from Greater London (n=22). There was a mix of parents living in suburban (n=28) urban (n=22) and rural (n=9) areas and a good spread of parents living in most and least deprived areas in England (Table 1).

Table 1 Characteristics of interviewees.

		Number of individuals
Gender	male	14
	female	45
Age group (years)	20–29	14
	30–39	35
	40–49	9
	over 50	1
Employment	employed full time	34
	employed part time	3
	employed but currently furloughed	6
	homemaker/family support/unpaid	10
	carer	
	student	3
	unassigned	3
Relationship to child	parent	58
	grandparent	1
Age of child in EYS	under 1	1
Age of Child III E13	1 to under 2	10
	2 to under 3	20
	3 to under 4	20
	4 to under 5	3
	more than one child in EYS	4
	unassigned	1
Type of EVC ^a	•	53
Type of EYS ^a	nursery childminder	53 5

	nursery and childminder	1
Dietary requirements	food intolerance (e.g., lactose)	2
of child	food aversion	1
	cultural (e.g., Halal)	4
	food allergies (e.g., dairy)	6
	none	46
Household type	couple with children living in same residence	46
	co-parenting with another adult living in separate residences	4
	single parent living with child/ren	7
	grandparent living in same residence	1
	unassigned	1
Regions parents lived	Greater London	22
(England)	East Midlands	1
(England)	West Midlands	4
	North East	1
	North West	8
	South East	8
Urban/suburban/rural	South West	6
	Yorkshire and Humber	4
	East of England	5
	urban	28
	suburban	22
	rural	9
Area of deprivation (IMD) ^b	10 (least deprived)	8
	9	9
	8	5
	7	6
	6	6
	5	6
	4	7
	3	2
	2	6

^a Early Years Setting.

3.2. Parents' reported levels of involvement and engagement

A large proportion of parents reported low or minimal levels of involvement and engagement. Fig. 1, adapted from Goodall and Montgomery's model of parental involvement and engagement (Goodall & Montgomery, 2014), maps parental reported involvement and satisfaction with the food and nutrition in their child's EYS. The shaded circles are a visual representation of the numbers of parents mapped as twelve clusters on the continuums, the largest equivalent to nine parents, the

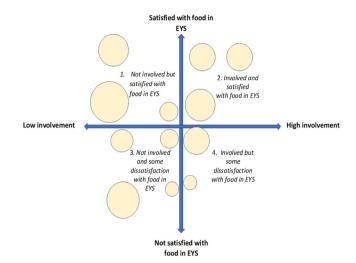


Fig. 1. Parental perception of their involvement/satisfaction in food and nutrition in EYS.

Source: adapted from Goodall and Montgomery (Goodall & Montgomery, 2014)

smallest equivalent to two. The figure illustrates sizeable clusters at the margins in each of the quadrants, particularly where parents reported not being involved very much, but either satisfied or dissatisfied with the food provision and practice in their EYS. Though similar in numbers, parents in the 'not involved and some dissatisfaction with food in EYS,' comprised the larger narrative, with varying nuanced responses, in comparison to those expressing being 'not involved but satisfied with food in EYS.'

Thematic analysis provides further insight into the range of reported involvement and satisfaction with EYS food. These themes are organized under two overarching categories: communication with the EYS and food quality and practices.

3.3. Communication with the EYS

Most parents spoke about engaging with their child's EYS about healthy eating on a one-to-one level, and conversations were limited to identifying and addressing individual food-related issues or concerns. Those with children in nurseries reported having one-to-one meetings with the 'key worker' assigned to their child, to discuss their child's food related needs and progress. However much of the individual engagement was reported as informal or ad hoc. For some interviewees, this was a concern. Others said that their EYS' open-door policy was an opportunity to work together with the nursery to address their child's nutritional needs, as reported by one parent:

"... some days it was so hard to get anything in [my child] apart from a yogurt, that's all he would eat. When I went there and spoke to [the nursery manager] she really did put my mind at ease. She said, 'we'll just try loads of different things and the stuff that he does start trying and eating we can just give it to him more and more and more, then slowly adding other things for him" (Parent 9)

There was also variation in descriptions of how and what information was communicated by the EYS at the end of the session or day. Some said they were only provided with verbal feedback, whilst others described written notes via a 'paper slip' or a mobile App. Several said that they were simply provided with basic information, others reporting more specific information, such as details of specific foods that were eaten or not eaten by their child that day. One parent described how they had to resort to getting information directly from their own children, as communication with their EYS was a challenge:

^b Index of Multiple Deprivation.

"... that's the one thing I'm annoyed about, I find that, by the time I get there, [the nursery staff are] just very dismissive ... and they just want you to just, leave [and say] 'Oh, she was okay today.' You know, and that would be it ... So, that is an actual problem I am having at the moment, so I find out from [my daughter] that, you know, what she's eaten throughout the day" (Parent 11)

Many parents expressed a need and desire for communication to be more two-way and for there to be more synergy between the EYS and home food practices, for example, one informing the other. Those that reported satisfaction with their level of involvement described clear, two-way communication channels between the childcare provider and themselves around their child's food and nutritional needs, and circumstances where parental feedback and participation was actively encouraged. Many said that it was important to have good information about their child's food intake so they can plan ahead, making dietary adjustments as necessary, on a daily basis.

Parental trust in the EYS was evident for parents where communication channels were reported as good. However, several participants expressed a lack of trust in the information provided and communicated by their EYS. This often related to the type and amount of food consumed. For example, one parent expressed doubt that her childminder was providing the correct nutrition, perhaps due to the extra expense this might entail, so was cutting corners to save money:

"I'm assuming that [my childminder's] giving [my child] at least two or three [portions of fruit and vegetables], but she might not ... I think that she buys sort of cheap food because she's got lots of kids to feed ... Fruit and vegetables are expensive and she's ... she's not charging us for it, for food, so she's probably just giving [my child] toast and sausage rolls and pizza and bread" (Parent 6)

Other parents also questioned the accuracy of the information provided, particularly in cases where they found difficulty believing that their child had eaten food types that they would refuse at home. This was rationalized by some as being 'too much' to expect that every child is accurately monitored in a busy nursery environment. Others expressed distrust in what the EYS says it does, and what is actually happening, for example EYS stating that they 'do not provide sugary snacks' when the child is telling a different story.

Parents sometimes expressed fear of offending the EYS, with one reporting that her childminder "does not like constructive criticism" (Parent 32). Some said that they resorted to indirect tactics, as a way of influencing the EYS to change their practice and provide different foods for their children, such as by offering to share 'healthy' recipes.

Whilst there was lots of evidence about individual and joint (parent/practitioner) decision-making for the food that their own child or children would receive, there was little indication of parents being involved in any consultation or collective decision-making in relation to food and healthy eating practices with their EYS. In many instances there was little expectation that they would or should be. It was, for some, considered 'not my job to be.'

3.4. Food quality and practices

Parents were knowledgeable of healthy eating, primarily within the principles of variety and balance. Many spoke of the importance of including 'five a day' when referencing fruit and vegetables, and for limiting foods that were high in salt or sugar. However, it was the quality of the food, including where and how it was prepared and served by their EYS, and the value attributed to the social aspects of eating, which were highlighted as important by most of the parents interviewed.

Parents spoke of choosing EYS that were able to prepare and cook foods 'in house' using fresh ingredients to be 'more like food at home,' citing better nutritional value and less likelihood for mixing foods (e.g.,

halal/non halal) as reasons.

Others felt that they had little choice in food decisions as practices reflected the nursery's resources (e.g., no in-house kitchen). Some parents spoke positively about the benefits to their child afforded by the providers' routine structures for meal and snack times, often mirroring those at home, and of the social aspects of eating together, encouraging independence and the development of social and communication skills. However, others had concerns about menus that lacked variety and did not address the needs of all their children, particularly those whose children were described as 'fussy eaters' or those with cultural preferences. Comments such as food being 'quite anglicized' or 'a bit bland' are illustrative.

Some parents reported that their EYS was reluctant to exposing children to new foods and therefore opted for the 'safe or conservative option,' rationalizing that this may have been to save wasting food as "they [the EYS] know what their kids will eat" (Parent 53). For others there was an expectation that the EYS would improve their child's eating behavior, and that practices of children being able to leave food, particularly if the food was not familiar, was not helping. For example, one parent expressed frustration that his son was still a fussy eater and explained:

"He still leaves it [his food]. We are actually debating whether to move him away because he's becoming [like his older brother who is a fussy eater]maybe [the EYS] needs to look to accommodate all children as opposed to a percentage" (Parent 16).

Another parent, who was concerned that the nursery was providing unhealthy options, decided to opt to pay an extra twelve pounds a day for the EYS's 'healthy option' rather than her 'picky' child have the standard fayre of what they perceived as "largely processed and canned foods" (Parent 50). This parent said that they had had a lot of food related issues with their child as well as themselves, and were keen to maintain a healthy regime, even if it meant "holding back something from myself" through the increased costs.

Concern about portion size and control were key for some parents. Multiple parents reported that portions were too small, and their children "come home starving" despite having had "three meals a day and two snacks" at the nursery (Parent 56), or that they were told that their child ate a 'big' portion but not understanding "how much is big?" (Parent 40). Others were concerned about knowing and comparing home to nursery portion size, to avoid their child overeating, especially if children are offered more than one portion per meal and the difficulty of interpreting what 'having thirds' means, particularly for planning food at home:

"In terms of portions I don't actually know what size. I have asked once about what size they have because my son [...] likes to eat and [the nursery] often say he's had seconds, and at one point they said, 'oh he wanted thirds' and I said, 'well shall we not give him thirds because I think he would just eat and eat' ..., like I don't know how it compares to our portions ..." (Parent 53).

Some interviewees rationalized that EYS were providing smaller portions strategically, to reduce waste, as children can then ask for seconds if required. Others suggested that allowing children to choose for themselves was positive as they will be "learning about portion size when they do that" (Parent 49), particularly if eating with their peers.

Many parents spoke about their child being involved in food related 'learning' activities, such as growing food, shopping excursions and baking. However, there were only a few instances where parents reported participating in food related activities or events, such as in developing menus or cooking activities, even though some health promotion knowledge for parents, such as HENRY (Rudolf et al., 2010) was said to be provided. Activities ranged from bringing in bakes from home to share, or accepting invitations to attend specific meals, often breakfast,

with the children, or participating in baking sessions. These were reported as infrequent, sometimes annually, and generally occurred during the normal working day. Many said that they would like to be involved in these types of activities but were not aware of any opportunities to do so, or were not asked.

4. Discussion

4.1. Summary of findings

Parents are key partners in the effort to provide healthy food and nutrition to babies and young children in EYS, yet little is known about the experience of parents across England in doing so. By interviewing a wide range of parents, reflecting experiences from different regions and EYS in England, we were able to gain some insight into parents' knowledge and experience of food practice within these EYS, as well as their opinions and experience of being involved or engaged in this. Our findings suggest that parents were generally knowledgeable about the principles of healthy eating. This accords with Hart and colleagues (Hart et al., 2015), whose findings were similar among parents interviewed about health and nutrition in schools, though this study extends to parents with young children attending EYS. Other factors were highlighted as important, such as food being freshly prepared and cooked on site, rather than by an external provider, particularly for those who had children with food-related conditions or issues. The social aspects of eating, with the accompanying peer pressure to conform, was also recognized as beneficial, again mostly by parents of 'picky' or 'fussy' eaters, who reported working together as 'partners' with their childcare providers to help address these food related behaviors.

However, many parents said they lacked understanding and clarity on specific areas of their EYS' food provision and practice. Portion size and control formed the bulk of this narrative. Parents were unsure of how big or small portions provided in their nursery were, or should be, and how this impacted on their planning and preparation of food in their own homes. Parental uncertainty about portion size has been well documented in the literature (Dev et al., 2017; Larson et al., 2011; Martin--Biggers et al., 2015; More, 2013; Vittrup, 2018). Our findings suggest that this appeared to be exacerbated by a lack of parental trust in the information provided by the provider about what their child had eaten, particularly in situations where children were allowed to leave food and not 'encouraged' by the provider to eat a proportion of their meal. In short, some parents were concerned that their child may not be eating enough, or too much, or not being provided with sufficient nutrients. This supports findings from other literature (Larson et al., 2011; Savage et al., 2007).

We highlighted areas where parents were able, and not able, to engage more actively in this agenda, or where parents felt they did not need to be. Through engaging mainly on a one-to-one basis with their allocated key worker, parents were able to discuss and negotiate for their child's specific needs and many said that they were happy with their level of involvement, some being more involved or engaged than others, and were satisfied with the parenting support provided by their EYS. Some parents chose not to be involved, either due to time and capacity to become more involved, as many parents worked full time, or because of not feeling the need to as they 'trusted the expert.' Conversely other parents expressed the wish to be more involved but were unable to. Here the narrative was more nuanced. Explanations included poor relationships with practitioners (e.g., lack of trust); differing expectations of the role of the EYS; concerns over specific food and nutritional needs; food practices, structures or systems not supporting 'ad hoc' engagement (e.g., EYS not having an open-door policy, or providing the only option to engage with parents at busy 'handover' time); or parents wanting to be involved but unaware of being able to be. Here we found a link between 'parent as consumer' (Vincent, 1996) and their expectation of level of involvement. Parents who said that they were not paying directly for nursery food, or that the food provided was considered by them to be 'good value' or 'cheap,' did not expect to engage or to involve themselves in their EYS's food provision too much. On the other hand, parents who said that they were paying separately for food, or who said that they were paying 'quite a lot,' or 'extra' had more to say and expressed more engagement with their EYS. This was particularly illustrative by the parent who opted to pay extra to ensure that their child had a healthy diet. Therefore, even in one setting, a tiered system emerged through which parents who are economically able can purchase nutritionally higher quality food and engage more actively than parents without such means. This is especially important in the context of early years, where evidence is clear excess levels of adiposity in childhood track through adolescence and adulthood. (Dehghan et al., 2005; Singh et al., 2008). Though numbers are small, this does illustrate perceived power relationships and potential inequities of food provision in EYS.

Much of this is contained with the 'communicating' aspect of involvement (Epstein, 2010), where parents asked for there to be more two-way or meaningful communication on food and nutrition, a finding that supports other studies (Dev et al., 2017; Johnson et al., 2013; Kambouri et al., 2021; Luecking et al., 2020). Dipti and colleagues, in their study on engaging parents to promote nutrition and health in pre-school EYS, identified a range of barriers to communication, including parents being too busy to talk to providers, and providers unsure of how to communicate about nutrition without offending parents (Dev et al., 2017). Similar findings were reported in a small qualitative study in the UK with childminders, whereby communication with parents around food was reported to be sometimes tense (Goldsborough et al., 2016). Our findings add to this discourse, that parents viewed providers as often too busy to talk about food, and were concerned about offending their childcare provider over nutritional issues, such as questioning menus. This highlights the importance for more trust and relationship building between EYS and parents, as espoused by, among others, Luecking and colleagues (Luecking et al., 2020).

4.2. Implications for policy and practice

Practitioner guidance on strategies to promote healthy eating are available in the UK, including ways to better involve and engage parents (Action for Children 2017b), and to support the development of parent practitioner partnerships in EYS (Kambouri et al., 2021; PACEY). Action for Children's 'Eat Better, Start Better' guidelines on food and drink in early years settings have 'best practice around involving and engaging parents', suggesting (a) all staff are able to share the EYS's approach to healthy eating with parents/carers and children; (b) families and children are consulted and encouraged to give feedback about the meals and snacks offered; (c) family and children's involvement in decision-making is included in the EYS self-evaluation' and (d) families are encouraged to participate in food activities to support development of healthy cooking skills (Action for Children, 2017a, 2017b). Yet, from interviews with parents carried out for this study, there is little evidence that EYS are implementing much of this in practice.

Viewing parental involvement in early years food in the UK, through the lens of Epstein's framework, helps to reflect on the policy and practice implications of the findings presented here. Table 2 below outlines an adapted Epstein typology used in the analysis as interpreted for parental involvement in the area of food and nutrition in EYS. Based on our research aim we limited our analysis to four of the six types of involvement: parenting; communicating; volunteering and decision-making.

In Table 2 we have outlined the key challenges reported within four types of parental involvement and the potential implications these have for policy and practice, with suggested actions. The first type, parenting, refers to how interviewees report on how their childcare provider assists and provides support to them in their parenting skills, including any understanding physical development and the importance of healthy nutrition, so that they can establish healthy home environments. The second, communicating, refers to the types and channels the provider communicates with parents about food and nutrition, and their child's

Table 2Implications of the findings in terms of Epstein's typology of parental involvement in the EYS.

Name of type*	Explanation of type*and practice in relation to food and nutrition	Examples of challenges reported by interviewees [i] and literature [l]	Suggested actions ** with relevance for policy and practice
Parenting	EYS assists parents in understanding early years child development and nutritional needs including home conditions to support	 Reported variability in EYS provision of meetings and training events [i][l] Parents feeling patronized when given information about nutrition or when staff concerns about nutrition are mentioned [i][l] Staff feeling unprepared and insufficiently trained to have difficult conversations [l] 	Provide additional funds for staff training and continued professional development to enable productive conversations. Engage with other established community resources (such as Health Visitors) to re-enforce the messages about healthy food and eating to parents, families, and EYS staff.
Communicating	EYS communicates with family about food and nutrition (structural and individual level) and child's progress	 One way communication channels on food [i][I] Barriers to providing feedback – e.g., parents fear of offending provider if critical of food [i] EYS fear of offending parents [I] Parents not trusting accuracy of information provided on food provided/eaten [i] 	Share existing food and drink guidance with parents and remind them of guidance, for example using the communication app if relevant. Provide resources to support relationship building between practitioners and parents, such as the Café model (Kambouri et al.) for building parent-practitioner partnerships
Volunteering	EYS involves parents and carers as volunteers in food-based activities and events	Some parents would have liked opportunity to volunteer – some have flexible work to engage more [i] EYS lack of flexibility to enable volunteering [i] The sector not supporting culture of volunteering (as with primary mainstream sector) – perceived more as 'childminder' to enable parental working rather than partnership [i][1]	Work with parents to include those actively keen to volunteer; include conversation about volunteering at first discussion but also afterwards e.g., at drop-off, to provide reminders Flexible working policies to enable parents to engage more (such as to be able to volunteer/attend activities) EYS providing varied and accessible opportunities for parents to engage (such as parents evenings, EYS open door policy) Enable culture shift to mirror practitioner/parent relationship in mainstream primary schools where parents more actively engaged rather than sector as 'childminding' service to enable parents to work
Decision- making	EYS involves families as participants in decision-making on food (e.g., food policy/menu development)	Parents were involved primarily in individual (one to one) decision making – very little 'participatory' involvement or engagement at collective/EYS level [i][I] Little consultation took place – parents wanted to be involved at this level but most unaware of opportunities to be [i]	Active consultation with parents on menu development/food policies Formal or informal mechanisms for facilitating partnerships with parents (e.g., through Café Model, or PACEY)

Source: *adapted from Epstein's involvement framework, Epstein, 2010 ** Authors

progress, at both individual and organization level. The third type, volunteering, is interpreted as any opportunities afforded to parents for their involvement in food related activities and events by the childcare provider, including whether and how these are, or are not, taken up by them and why. Lastly decision-making refers to information parents gave about being involved in any organizational decision-making around food and food practices, such as menu development or healthy eating policies. The challenges, identified through interviews and supporting literature, largely relate to communication and trust. Many parents appeared unaware of any 'rules of engagement' or expectations between themselves and the EYS in relation to food provision and practice, with some expressing dissatisfaction with their level of involvement and agency in this.

Discussions with representatives from key stakeholders (Warren et al., 2022) indicate that more policy work and development is needed in the early years sector, particularly in ensuring clear and accessible guidelines are readily available to parents, carers, and EYS respectively, and that practitioners and parents have more clarity about their roles and responsibilities in this. A starting point might be the implementation of programs to develop trust and mutual collaboration between parents and EYS practitioners, such as through the CAFÉ model recently described by Kambouri and colleagues (Kambouri et al., 2021), which recognizes parents and EYS practitioners as equals in early years development.

4.3. Limitations

Contracting the recruitment and interviewing to Kantar Public did inevitably limit the analysis as the authors were working from telephone transcripts carried out by third parties, however mitigation strategies were put in place to minimize this, as described in the methods section. The study sample only included parents' accounts, we were not able to speak to or observe the EYS so there was no opportunity to cross validate our findings. Though parents spoke openly about their experiences and recollections, interviews largely took place during the pandemic lockdown in 2020, so some were not attending their nursery or childminder and were reliant on memories, which might lead to recall bias. The sample were largely parents who had children in nurseries, and only a few used childminders, so did not fully reflect the sector.

5. Conclusion

This paper has provided insight into how parents are involved and engaged in food provision and practice in their EYS. Our findings were mixed. Whilst parents were generally knowledgeable about healthy eating, they reported varying levels of involvement with their EYS in this. Much of this was passive and communication channels were largely oneway with little or no opportunities afforded for any active, meaningful engagement around food and healthy eating outside of one-to-one discussions of their child's specific needs and requirements. Some parents

expressed a lack of understanding or awareness of how they could or should be more involved, with many expressing some level of dissatisfaction, particularly on their EYS's communication practices, and the lack of feedback. Findings highlighted some of the structural issues that impeded involvement, such as limited and inappropriate opportunities to engage in discussions, or to volunteer in healthy eating activities. These findings add to the limited literature on parental involvement in EYS and suggest more research is needed in this area, specifically studies that include parents and early years practitioners.

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Credit author statement

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Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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