

Fathers' Perspectives on Coparenting in the Context of Child Feeding

Neha Khandpur, ScD,¹ Jo Charles, BS,¹ and Kirsten K. Davison, PhD^{1,2}

Abstract

Background: In a diverse sample of fathers, this study examined coparenting dynamics specific to (1) how fathers managed responsibilities for food parenting with the child's mother and (2) the extent to which their food parenting practices were cooperative versus conflicting with those of the mother.

Methods: Semistructured interviews were conducted with 37 fathers (38 ± 9.1 years) using a piloted interview guide. Interview questions focused on the division of responsibility in food parenting practices, experiences of consistent versus conflicting practices, and the source and consequences of conflicting practices. The data were analyzed in QSR NVivo 10 using thematic analysis.

Results: Sixty-two percent ($N=23$) of fathers reported sharing food parenting responsibilities with the child's mother. Among the remaining fathers, approximately half reported being solely responsible for food parenting ($N=6$) and half reported that the mother was solely responsible ($N=8$). Fathers reported using a variety of approaches to manage planning, procuring, and preparing food with mothers. Cooperative food parenting practices were reported by approximately half of the fathers in this sample. A large percentage of fathers (40%) also reported instances of conflicting food parenting practices. Conflicting practices typically focused on access to energy-dense, nutrient-poor snacks and introducing variety into the diet. Dissimilarities in practices were driven by differences in parental eating habits, feeding philosophies, and concern for child health, and often resulted in child tantrums or refusal to eat.

Conclusions: This study identifies potential sources of inconsistencies in components of coparenting that would be important to address in future interventions.

Background

The prevalence of overweight and obesity among children in the United States remains high. In 2011–2012, 23% of preschool-aged children and more than 34% of school-aged children were overweight or obese.^{1,2} During infancy and early childhood, parents have the largest influence on their children's food and activity behaviors.³ Parents' knowledge, attitudes, beliefs, food choices, and parenting practices directly and indirectly shape their children's food and activity choices. These choices, over time, may lead to positive energy balance, weight gain, and obesity.⁴ Elucidating parental influences on child energy regulation is therefore crucial to understanding and addressing childhood obesity.

The existing body of evidence in this field is heavily focused on mothers. Researchers have been slow to recognize fathers as important agents in influencing childhood obesity. Despite the growing involvement of fathers in child rearing,^{5–8} prompted by important sociocultural changes, their rates of inclusion in research remain low.⁹

The literature on food parenting provides some evidence of their underrepresentation.^{10,11} In a review of the determinants of children's fruit and vegetable intake, Rasmussen et al. found that only 11% of eligible studies included fathers.¹⁰ Similarly, in a systematic review of the parent-child resemblance in dietary intake conducted by Wang et al., only 6 of the 24 studies included fathers.¹¹ Family-based childhood intervention studies have an equally low representation of fathers.¹² Moreover, the few studies that have included fathers have small sample sizes, recruit fathers through mothers or children, and focus on white, well-educated fathers cohabiting with the child's mother.¹³ As family structures evolve and gender-based parenting roles converge,¹⁴ studying fathers becomes a research priority to further our understanding of their role in child feeding as it relates to both the child and to the child's mother.

A small emerging literature has begun to uncover fathers' role in food parenting. Recent research with fathers illustrates that they use a wide variety of food parenting practices¹⁵ or strategies to manage how much, when, and what their children eat.¹⁶ Similar to mothers, fathers adopt

both unresponsive (permissiveness, coercive control) and responsive (autonomy support, structure) food parenting practices.¹⁵ Differences in the frequency with which mothers and fathers use specific food parenting practices have also been examined. While it has been suggested that fathers may use coercive food parenting practices to feed their children more often than mothers,^{17–19} more research is warranted to confirm these initial findings.

Examining mother–father interactions in the context of food parenting from a coparenting perspective is an important next step to build on the growing understanding of individual parental effects on child weight outcomes. Coparenting is a construct that captures the extent to which mothers and fathers coordinate, support, or undermine each other's parenting efforts^{20,21} across diverse family structures.²² It includes verbal and nonverbal negotiations between parents in and outside the presence of the child.²³ Coparenting has been extensively studied in the child development literature and has consistently been shown to affect children's cognitive, social, and emotional outcomes.²⁴ For instance, higher coparental cooperation has been linked with higher levels of self-soothing in children.²⁵ Conversely, children display higher levels of aggression and antisocial behaviors in the presence of conflicting or inconsistent coparenting.²⁶ On the policy front, these findings may have also contributed to an increase in support for father involvement in child welfare interventions.²⁷

To our knowledge, no previous research has examined how mothers and fathers coparent in the context of food parenting. The general lack of recognition of fathers in food parenting and the consequent gap in understanding the nature of the coparenting dynamics hinder our ability to work with the entire family to counter obesity. With the continued evolution of the family structure and varying mother–father partnerships, from intact unions to shared custody, identifying cooperative and conflicting food parenting practices between mothers and fathers would strengthen the capacity to design and deliver effective, family-based interventions for childhood obesity prevention. Therefore, this study used semistructured interviews to examine coparenting dynamics in the context of food parenting in a diverse sample of fathers, and summarizes fathers' perspectives on the following:

1. The division of responsibility between fathers and mothers in food parenting tasks.
2. The extent to which fathers' food parenting practices are cooperative versus conflicting with those of the mother. In instances of conflicting practices the potential sources and perceived consequences of conflicting practices were identified.

Methods

Study Design and Participant Recruitment

In-depth, semistructured interviews were conducted with fathers to elicit information on their experiences feeding their children. Details on study methodology, including

study design and participant recruitment, can be found elsewhere.¹⁵ Briefly, 40 participants were recruited using a combination of purposive stratified sampling and snowball sampling techniques. These techniques were used to ensure diversity in the education levels and residential status of the

Table 1. Participant Characteristics*

Characteristics	Total sample, N = 37
Mean age ± SD, years	38.6 ± 9.1
Age range of target child, n (%)	
2–5	24 (64.8)
6–10	13 (35.1)
Sex of target child, n (%)	
Female	17 (45.9)
Male	20 (54.1)
Race, n (%)	
Black	17 (45.9)
White	15 (40.6)
Other	5 (13.5)
Education level, n (%)	
High school/GED	11 (29.7)
Some college	11 (29.7)
College graduate	5 (13.5)
Postgraduate	10 (27.0)
Living arrangement/residential status, n (%)	
Residential, child and partner	19 (51.3)
Residential, single father	3 (8.1)
Nonresidential, shared custody	10 (27.0)
Nonresidential, visitation only	5 (13.5)
Relationship status w.r.t. mother of target child, n (%)	
Married/in a relationship	19 (51.3)
Divorced/separated	18 (48.6)
Employment status, n (%)	
Employed/self-employed	29 (78.3)
Unemployed	8 (21.7)
Recruitment venue/approach	
Community-based organizations serving fathers	19 (51.3)
Existing database developed during the initial phase of the study ¹⁵	11 (27.5)
Community-based events	4 (10.8)
Social networks of participants	3 (8.2)

*The percentages displayed in the table may not add up to 100 due to rounding.

sample. Fathers were recruited in person and using flyers and e-mails through a variety of avenues as summarized in Table 1. Recruitment materials encouraged fathers to share their parenting experiences around feeding and physical activity. All fathers provided written informed consent.

English-speaking, adult U.S. men, who self-identified as a father to a child between the ages of 2–10 years were eligible to participate. Given this study's focus on coparenting, cases where fathers were exclusive caregivers (*i.e.*, the mother was entirely absent from caregiving activities) were not included in this analysis resulting in an eligible sample of 37 fathers. Participating fathers were predominantly non-Hispanic white or black, reported at least some college level education, and reflected a wide range of living arrangements and relationship statuses with the child's mother (Table 1).

Data Collection

Semistructured interviews were conducted between June and September 2014 using a pretested interview guide, which was informed by the conceptual model proposed by Faith et al.²⁸ A sample of the neutral, open-ended questions used for these analyses can be found in Table 2. Questions were structured to also probe fathers' food philosophy, child characteristics, and the social setting in which feeding occurred. Fathers who completed phone interviews received \$40 ($n=10$, 25%), while those completing in-person interviews were reimbursed \$80 ($n=30$, 75%) to cover the cost of travel. All interviews were conducted by trained research assistants (N.K., J.C.) and lasted between 60 and 90 minutes. Interviews were audio-recorded and transcribed verbatim. The Harvard T.H. Chan School of Public Health, Office of Human Research Administration provided ethical approval for the study.

Data Organization and Analysis

Thematic analysis²⁹ conducted in QSR NVivo 10 was used to code the interview transcripts. Based on the research questions, strategies used to divide responsibilities in food parenting, instances of cooperative versus conflicting food parenting practices, and sources and consequences of conflicting practices were initially identified and coded. Passages within each content area were then examined in further detail to identify all discernable patterns. In each instance, the internal consistency, validity, and verifiability of the themes were determined using an iterative process that included expert consultations, peer review, and applicability across transcripts.^{30,31} A codebook with precise definitions for each theme, providing guidance on how to identify the theme and code excerpts of the transcripts along with examples of quotes, was simultaneously developed (Appendix Table 1). The finalized codebook was then used to recode all 37 transcripts. Variations within each theme were then examined by the relationship status of the father and are presented in the Results section.

Results

Division of Responsibility in Food Parenting

About 63% of fathers ($n=23$ out of 37) reported managing food parenting responsibilities with the child's mother, including meal planning, grocery shopping, food budgeting, cooking, cleaning up, and socializing the child around meal times. The vast majority ($n=19$) of these fathers were either married or in a relationship with the child's mother (82.6%). The remaining 14 fathers reported that food parenting tasks were the responsibility of one

Table 2. Sample Questions from the Interview Guide

Domain	Sample questions
Background questions	<ul style="list-style-type: none"> • What is your approach to the food you eat? • What role do you think your family history or upbringing has had on your approach to food? • Walk me through a typical weekday. Can you talk about the typical interactions around feeding your child through the day? • Does your child have any pre-existing conditions or allergies that affect her/his food intake? Is there anything that I should know about him/her to help me understand your approach to feeding him/her? • Do you have any concerns about your child's eating patterns or diet? • Who else is involved in feeding CHILD? How often would that be? • Thinking about CHILD, what role do you play feeding him/her? What kinds of specific decisions/tasks do you generally make/do? What decisions/tasks do you and your partner split responsibility for?
Questions central to the current study	<ul style="list-style-type: none"> • Do all the adults who feed CHILD (excluding time at child care or preschool) have the same rules about his/her eating? • Do you and CHILD'S mother have similar thoughts on how to feed CHILD and what to feed CHILD? Can you tell me more about this interaction? • Do you and CHILD'S mother have similar concerns about CHILD'S eating? What might these be? • How do you negotiate instances when the both of you think differently?

parent; a similar number of these fathers ($N=6$) reported having sole responsibility for food parenting as those who reported the mother having sole responsibility ($N=8$). All of these 14 fathers were either divorced or separated from the child's mother.

Fathers who managed food parenting with their child's mothers ($n=23$ out of 37) reported a range of approaches for the division of responsibility. These approaches included (1) both parents performing the same task together, (2) each parent being responsible for specific tasks, and (3) each parent being responsible for the same task on specific days.

Ten fathers reported performing tasks such as cooking and grocery shopping alongside the child's mother ($n=10$ of 23). As two fathers explain:

We do the same thing, we'll do it at the same time. It's not like she specifically does this and I specifically do that. Sometimes it's a matter of who beats who to the kitchen. We'll both cook for [our children] together. (Black, less than college education, residential, 30 years, married/in a relationship.)

Me and my wife, we try to split the responsibilities for cooking. As far as groceries go we both do it together. We don't have a car. It makes it easier if we're both together to help carry stuff in. I enjoy going shopping because I like to introduce new things to the kids once in a while and open up their minds a little bit to trying new stuff. (White, less than college education, residential, 40 years, married/in a relationship.)

A similar number of fathers ($n=9$ out of 23) reported dividing tasks with the child's mother and being consistently responsible for specific tasks associated with child feeding. In a few instances, when cooking was primarily the mother's responsibility, fathers reported making the decisions around what to eat or what to cook. Here is what two of the fathers had to say:

My wife is going to do the majority of the meal planning. She does the majority of [the cooking]. I'm involved at the table, just as far as manners, discipline. Making sure the kids are doing what they're asked to do. That's a big role during mealtime. I do a lot of the cleanup as well. (White, more than college education, residential, 34 years, married/in a relationship.)

I'm definitely the primary parent with regards to grocery shopping. My wife is the primary parent on meal planning. (White, more than college education, residential, 33 years, married/in a relationship.)

A comparatively smaller group of fathers ($n=4$ out of 23) reported sharing the same tasks with the child's mother, with one parent taking primary responsibility on certain days of the week when their schedule allowed it, while the other parent stepped in on the remaining days of the week. One father reports

My wife and I split things pretty 50-50, right down the middle. She's really in charge of Thursday, Friday and Saturdays, and I'm able to be there Monday, Tuesday, Wednesday. I do most of the cooking in the evenings when I'm at home. She takes the day, and I take the night. (Asian, more than college education, residential, 37 years, married/in a relationship.)

Cooperative versus Conflicting Food Parenting Practices

Fathers reported instances of cooperative and conflicting food parenting practices with the child's mother. Cooperative practices were reported in a greater proportion of married fathers with 12 out of the 19 married fathers reporting cooperative practices compared with 5 of the 18 divorced/separated fathers. In contrast, fathers' reports of conflicting food parenting practices were less dependent on their marital status. Nearly equal numbers of married and divorced/separated fathers reported conflicting practices.

Seventeen fathers reported similar or cooperative food parenting practices with the mother (45.9%). Having food rules, structuring the child's eating environment to avoid distractions, and monitoring the child's food intake were the most commonly cited food parenting practices that were consistent between both parents. Three fathers illustrate cooperative food parenting practices:

I think mealtime's huge. Food draws us back together. It's that centering point. We want that. My wife is good about that too and I just really try to support her in that. (White, more than college education, residential, 34 years, married/in a relationship.)

Her mother's on the same page with me when it comes to fast food, just really don't do it much at all. (Black, less than college education, nonresidential, 44 years, divorced/separated.)

Fifteen fathers in this sample mentioned high levels of conflicting practices ($n=15$ out of 37, 40.5%; married fathers = 7, divorced fathers = 8). A number of noteworthy patterns emerged in the context in which conflict occurred, the factors underlying the dissimilarities in practices used, and the parent- and child-related consequences of conflicting practices.

Contexts. Of the 15 fathers reporting conflicting practices, 11 fathers reported specific examples around differences in access to energy-dense, nutrient-poor food or in the use of food rules (73.3%), examples of which follow.

You can't just give this kid so much refined sugar, stop it already. His mom just loves sweet things, and he loves sweet things and when it becomes an obsession with him, it's hard to pull in the reins. (White, less than college education, nonresidential, 40 years, divorced/separated.)

She would cook things like Doritos salad. It's an entire bag of Doritos emptied into a bowl, crushed up with lettuce and salad dressing. That's not a dinner you feed. Doritos are snacks not dinner. (White, less than college education, nonresidential, 32 years, divorced/separated.)

Dissimilarities in ensuring variety in the child's diet were also found among 4 of the 15 participants as demonstrated by these quotes:

I asked her mother, "Why doesn't Jane eat fish?" She said, "Because I never gave her fish. I didn't want her to like fish because I don't like fish." I said, "Fish is something we're supposed to give our kids. It's brain food." I [the father] want my daughter to have an open palate of what she likes; not what she can't like because she

wasn't given the opportunity to taste it. (Black, less than college education, residential, 38 years, divorced/separated.)

Sweet potatoes, peanuts, fish, whatever her daddy puts in his mouth, [my daughter] puts in her mouth. Her mom be like, "Oh, you don't eat that." I'm like, "Why are you trying to discourage her from trying different things in life?" (Black, less than college education, residential, 44 years, married/in a relationship.)

Underlying factors. Differences in fathers' and mothers' own eating habits and food and feeding histories ($n=4$ out of 15, 27%), in the concern for child health ($n=3$ out of 15, 20%), and in their child feeding philosophies ($n=3$ out of 15, 20%) seemed to underlie the differences in the practices adopted by fathers and mothers. As a few fathers explain:

She didn't see the effort [to eat healthy] worth it and to her it was more like if he [the son] wants to grow up fat, let him. That's ridiculous. He's seven—you don't give seven-year-olds choices other than what kind of movie do you want to watch today, or what kind of shirt do you want to wear. Not what do you want to put in your body. (White, less than college education, nonresidential, 32 years, divorced/separated.)

She wants to feed him more. For my wife's culture—being thick, and big, means you're healthy. That's what it means. So they would just feed the kids. (White, more than college education, residential, 34 years, married/in a relationship.)

Consequences. Conflicting food parenting practices undermined attempts by one of the two parents to adopt healthier practices and had parent-related and child-related consequences. Eight of the 15 fathers either succumbed to the practices of the other parent (5 out of 8) or overcompensated for them (3 out of 8). The following quotes illustrate this tension:

I try to avoid [sugary cereals]. She gets that at her mom's house. I have to some degree succumbed to caving in to mirroring what she gets over there. It's not a competition, but it has eroded the healthy habits. (White, more than college education, residential, 40 years, divorced/separated.)

I have to be the stricter one. I don't get a chance to break those rules [no fast food] because they've already been broken [by the mother]. So now I got to cram in the veggies. (Black, less than college education, nonresidential, 29 years, divorced/separated.)

In 7 of the 15 instances, fathers reported that the dissimilarities in food parenting practices led to child tantrums and refusal to eat. A noteworthy quote highlights the child-related consequences of conflicting practices:

I attempted to do some of these things [cook healthy food]—but he just straight wouldn't eat them because he didn't have to because he would be given whatever he wants on the other side. (White, less than college education, nonresidential, 32 years, divorced/separated.)

Since the child was subject to two differing practices, it was not surprising that in some cases the child would manipulate the parents to get her/his way.

If [my son] doesn't want to hear what I've got to say [about restricting junk food] he'll run straight to his mother. She will

say, "Oh, you can get whatever you want." I say, "Now, why you do that? I tell him one thing, and then he runs to you. He's playing off of us." She doesn't even care. (Black, less than college education, residential, 63 years, married/in a relationship.)

Disagreement Resolution

Disagreements in food parenting were typically resolved by discussing the issue and negotiating to reach a compromise ($N=28$, 76.5%). In a few instances, external agents such as the dentist or the pediatrician were also consulted, as this father reports:

There hasn't been a conflict on food other than the snacking, and I think that the dentist drew the line on that one. The way I handle things, when we have a conflict, information [is key]. (Black, less than college education, residential, 63 years, married/in a relationship.)

Discussion

This study extends our understanding of the role of fathers in feeding children by examining coparenting dynamics between mothers and fathers. A majority of fathers reported sharing responsibility for planning, procuring, and preparing food with the child's mother. About half of the sample reported using food parenting practices that were consistent and cooperative with those of the mother and an almost equal proportion reported instances of conflicting food parenting practices. Structuring, monitoring, and organizing the child's meals were the cooperative practices identified in this sample, while conflicting practices typically focused on children's access to energy-dense, nutrient-poor food. Dissimilarities in practices often resulted in child tantrums or refusal to eat.

Our understanding of the approaches used for dividing responsibilities came largely from the fathers who were married or in a relationship with the child's mother. Similarly, cooperative food parenting practices were largely identified among married fathers. A majority of separated/divorced fathers were either solely responsible for all tasks or relinquished all responsibility to the mother, and only a few separated/divorced fathers managed to establish a cooperative coparenting relationship with the mother. In contrast, conflicting practices were reported by equal numbers of married and separated fathers. Child development literature suggests that factors beyond custodial arrangements, such as parental absence, economic disadvantage, and interparental conflict in the spousal role,³² may determine the degree of cooperation between separated parents. It is therefore plausible that these factors may be at play in the food parenting realm as well, along with differences in parental eating habits, feeding philosophies, and concern for child health that were identified in this study. More research is warranted to test these hypotheses. Taken together, these results highlight the need for programs to address conflicting practices in both intact and divorced/separated families, stressing the importance of having common feeding goals and targeting non-nutritive food access to prevent future weight gain and obesity in the child.

In this study, conflicting practices resulted in one parent being undermined by the practices of the other or over-compensating for the practices of the other, and are associated with negative outcomes for the parent, including lower relationship quality and higher disagreements.^{22,33} Conflicting parenting has also been shown to impact child behavior by undermining the beneficial impact of a particular parenting practice or style. A recent study examining adolescents' perceptions of restrictive snacking rules set by their fathers and mothers³⁴ found that differences or incongruence between parents attenuated the favorable impact of fathers' restrictive snacking rules and nurturance on their children's snacking.³⁴ The authors concluded that restrictive snacking rules may only prevent snacking, when applied by both parents to similar degrees. Inconsistencies between paternal and maternal parenting practices (encouragement of healthy eating behaviors) have also been shown to be associated with a higher BMI among daughters.³⁵ These patterns are consistent with the child development literature, which has shown links between conflicting parenting practices and child behavioral problems³⁶ and adolescent maladjustment³⁷ and substance abuse.³⁸

A few limitations of the study need mentioning. This study only captures fathers' perspectives. It is possible that mothers would interpret the extent of coparenting in the context of food parenting differently. The few instances of active coparenting with extended family members in this sample of fathers did not lend themselves to a thorough analysis and have not been included in this study but would be important to capture in future studies. It is also possible that fathers who are involved in caregiving were more likely to agree to participate. As such, the perspectives of relatively uninvolved fathers may not have been captured. Despite such limitations this study has multiple strengths. This is the first study to illuminate important coparenting dynamics in food parenting and their likely affects. It builds on the limited diversity in participants among existing studies by recruiting a heterogeneous sample using strategies that did not involve approaching either the mother or the child. Finally, the results from this study have direct relevance in the development of evidence-based child health interventions for a diverse range of family contexts.

Conclusion

This study outlines potential sources of inconsistencies in coparenting in the context of food parenting that may undermine existing interventions. It also highlights possible consequences of these inconsistencies. To further our understanding of family dynamics in the context of food parenting, future studies could assess the moderating influence of conflicting coparenting on child nutrition behaviors and weight outcomes and examine the effects of other caregivers and siblings. Also, an assessment of the influence of conflicting coparenting practices within different family structures and residential status of the father is warranted. A growing understanding of fathers' influences may also in-

crease support for father involvement in programs and improve the capacity to engage both parents and deliver effective family-focused obesity prevention interventions.

Acknowledgments

This work was conducted with support from Harvard Catalyst, The Harvard Clinical and Translational Science Center (National Center for Research Resources and the National Center for Advancing Translational Sciences, National Institutes of Health Award 8UL1TR000170-05 and financial contributions from Harvard University and its affiliated academic healthcare centers). The content is solely the responsibility of the authors and does not necessarily represent the official views of Harvard Catalyst, Harvard University, and its affiliated academic healthcare centers, or the National Institutes of Health.

Author Disclosure Statement

No competing financial interests exist.

References

- Ogden CL, Carroll MD, Kit BK, Flegal KM. Prevalence of childhood and adult obesity in the United States, 2011–2012. *JAMA* 2014;311:806–814.
- Ogden CL, Carroll MD, Kit BK, Flegal KM. Prevalence of obesity and trends in body mass index among US children and adolescents, 1999–2010. *JAMA* 2012;307:483–490.
- Nader PR. The role of the family in obesity prevention and treatment. *Ann N Y Acad Sci* 1993;699:147–153.
- Golan M, Crow S. Parents are key players in the prevention and treatment of weight-related problems. *Nutr Rev* 2004;62:39–50.
- Livingston G. *The Rise of Single Fathers: A Ninefold Increase Since 1960*. Pew Research Center, 2013.
- Yeung WJ, Sandberg JF, Davis-Kean PE, Hofferth SL. Children's time with fathers in intact families. *J Marriage Fam* 2001;63:136–154.
- Jones J, Mosher WD. Fathers' involvement with their children: United States, 2006–2010. *Natl Health Stat Report* 2013;71:1–22.
- Bureau UC. *The National Data Book, 2012 Statistical Abstract of the United States: 2012, 131st edition, 2011*.
- Phares V, Lopez E, Fields S, et al. Are fathers involved in pediatric psychology research and treatment? *J Pediatr Psychol* 2005;30:631–643.
- Rasmussen M, Krølner R, Klepp K-I, et al. Determinants of fruit and vegetable consumption among children and adolescents: A review of the literature. Part I: Quantitative studies. *Int J Behav NutrPhys Act* 2006;3:22.
- Wang Y, Beydoun M, Li J, et al. Do children and their parents eat a similar diet? Resemblance in child and parental dietary intake: Systematic review and meta-analysis. *J Epidemiol Community Health* 2011;65:177–189.
- Panter-Brick C, Burgess A, Eggerman M, et al. Practitioner review: Engaging fathers-recommendations for a game change in parenting interventions based on a systematic review of the global evidence. *J Child Psychol Psychiatry* 2014;55:1187–1212.
- Khandpur N, Blaine RE, Fisher JO, Davison KK. Fathers' child feeding practices: A review of the evidence. *Appetite* 2014;78:110–121.

14. Kwon K-A, Han S, Jeon H-J, Bingham GE. Mothers' and fathers' parenting challenges, strategies, and resources in toddlerhood. *Early Child Dev Care* 2013;183:415–429.
15. Khandpur N, Charles J, Blaine RE, et al. Diversity in fathers' food parenting practices: A qualitative exploration within a heterogeneous sample. *Appetite* 2016;101:134–145.
16. Gevers D, Kremers S, de Vries N, van Assema P. Clarifying concepts of food parenting practices. A Delphi study with an application to snacking behavior. *Appetite* 2014;79:51–57.
17. Hendy HM, Williams KE, Camise TS, et al. The Parent Mealtime Action Scale (PMAS). Development and association with children's diet and weight. *Appetite* 2009;52:328–339.
18. Pulley C, Galloway AT, Webb RM, Payne LO. Parental child feeding practices: How do perceptions of mother, father, sibling, and self vary? *Appetite* 2014;80:96–102.
19. Lloyd AB, Lubans DR, Plotnikoff RC, et al. Maternal and paternal parenting practices and their influence on children's adiposity, screen-time, diet and physical activity. *Appetite* 2014;79:149–157.
20. Minuchin S. *Families and Family Therapy*. Harvard University Press, 1974.
21. McHale JP. Coparenting and triadic interactions during infancy: The roles of marital distress and child gender. *Dev Psychol* 1995;31:985.
22. Van Egeren LA, Hawkins DP. Coming to terms with coparenting: Implications of definition and measurement. *J Adult Dev* 2004;11:165–178.
23. LeRoy M, Mahoney A, Pargament KI, DeMaris A. Longitudinal links between early coparenting and infant behaviour problems. *Early Child Dev Care* 2013;183:360–377.
24. Marsiglio W, Amato P, Day RD, Lamb ME. Scholarship on fatherhood in the 1990s and beyond. *J Marriage Fam* 2000;62:1173–1191.
25. Feinberg ME, Kan ML, Goslin MC. Enhancing coparenting, parenting, and child self-regulation: Effects of family foundations 1 year after birth. *Prev Sci* 2009;10:276–285.
26. Schoppe SJ, Mangelsdorf SC, Frosch CA. Coparenting, family process, and family structure: Implications for preschoolers' externalizing behavior problems. *J Fam Psychol* 2001;15:526.
27. Fagan J, Palm G. Interventions with fathers. *Encyclopedia on Early Childhood Development* 2015.
28. Faith MS, Van Horn L, Appel LJ, et al. Evaluating parents and adult caregivers as “agents of change” for treating obese children: Evidence for parent behavior change strategies and research gaps a scientific statement from the American Heart Association. *Circulation* 2012;125:1186–1207.
29. Braun V, Clarke V. Using thematic analysis in psychology. *Qual Res Psychol* 2006;3:77–101.
30. Tong A, Sainsbury P, Craig J. Consolidated criteria for reporting qualitative research (COREQ): A 32-item checklist for interviews and focus groups. *Int J Qual Health Care* 2007;19:349.
31. Farmer T, Robinson K, Elliott SJ, Eyles J. Developing and implementing a triangulation protocol for qualitative health research. *Qual Health Res* 2006;16:377–394.
32. Feinberg ME. The internal structure and ecological context of coparenting: A framework for research and intervention. *Parent Sci Pract* 2003;3:95–131.
33. Van Egeren LA. Prebirth predictors of coparenting experiences in early infancy. *Infant Ment Health J* 2003;24:278–295.
34. Gevers DW, van Assema P, Sleddens EF, et al. Associations between general parenting, restrictive snacking rules, and adolescent's snack intake. The roles of fathers and mothers and interparental congruence. *Appetite* 2015;87:184–191.
35. Berge JM, Wall M, Bauer K, Neumark-Sztainer D. Parenting characteristics in the home environment and adolescent overweight: A latent class analysis. *Obesity* 2010;18:818.
36. Panetta SM, Somers CL, Ceresnie AR, et al. Maternal and paternal parenting style patterns and adolescent emotional and behavioral outcomes. *Marriage Fam Rev* 2014;50:342–359.
37. Simons LG, Conger RD. Linking mother–father differences in parenting to a typology of family parenting styles and adolescent outcomes. *J Fam Issues* 2007;28:212–241.
38. Trockman JS. The relationship between congruence in parenting styles and adolescent substance use severity. Doctoral dissertation, Adler School of Professional Psychology, 2012.

Address correspondence to:

Neha Khandpur, ScD

Department of Nutrition

Harvard T.H. Chan School of Public Health

Harvard University

677 Huntington Avenue

Boston, MA 02115

E-mail: neha12@mail.harvard.edu

Appendix Table I. Codebook: Interactions with the Child’s Mother	
Primary codes	Example quotes
<p>Division of Responsibility in Food Parenting</p> <p>Quotes that indicate division of roles and responsibilities between parents, within the context of child feeding. These might include tasks related to planning, procuring or preparing food (eg. meal planning, grocery shopping, cooking, and cleaning up).</p>	<p>“Me and my wife, we try to split the responsibilities for cooking. Usually, breakfast in the morning, I take care of. Mom usually makes the lunches for the afternoon, and then dinners, we split responsibility. As far as groceries go we both do it together. We don’t have a car. It makes it easier if we’re both together to help carry stuff in. I enjoy going shopping because I like to introduce new things to the kids once in a while and open up their minds a little bit to trying new stuff.”</p> <p>“My wife and I split things pretty 50-50, right down the middle. She’s really in charge of Thursday, Friday and Saturdays, and I’m able to be there Monday, Tuesday, Wednesday. I do most of the cooking in the evenings when I’m at home. She takes the day, and I take the night.”</p>
<p>Cooperative Versus Conflicting Food Parenting Practices</p> <p>Quotes that indicate differences or similarities in the strategies that parents employed to manage how much, when and what their children eat.</p>	<p>“I think mealtime’s huge. Our family is pretty good about doing things together. Food draws us back together. It’s that centering point. We want that. My wife is so good about that too and I just really try to support her in that.”</p> <p>“She would cook things like Doritos salad. It’s an entire bag of Doritos emptied into a bowl, crushed up with lettuce and salad dressing. I’m like that’s not a dinner you feed. Doritos are snacks. This isn’t dinner.”</p>
<p>Disagreement Resolution</p> <p>Quotes that indicate how mother and father resolve disagreements pertaining to food parenting.</p>	<p>“My daughter is more likely to have an unhealthy snack with her mom but I’m way more disciplined on it. I’m more consistent with that. There hasn’t been a conflict on food other than the snacking, and I think that came—the dentist drew the line on that one.”</p>