

Introducing Juice and Sugar-Sweetened Beverages in Early Infancy: Parental Knowledge and Intended Behaviors

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Background: In USA obesity in Pediatrics is a major public health concern and early introduction of juice and sugar-sweetened beverages (SSBs) in children's diets plays an important role.

Objective: (a) to assess infants' caregivers' knowledge about juice and SSBs and (b) to identify factors that contribute to the intended early introduction of juice and SSBs in children's diets.

Methods: The study was conducted at the university affiliated Hasbro children's hospital of state RI. As part of a longitudinal randomized controlled trial on the prevention of obesity starting in early infancy, they consecutively enrolled 144 parent-infant dyads presenting for a well-child care visit. Parental knowledge about juice was assessed by presenting a series of 9 statements on a 5-point Likert-type scale. Parents could strongly agree (SA), agree (A), be neutral (N), disagree (D) or strongly disagree (SD) with each statement.

ACADEMIC P.E.A.R.L.S

Pediatric Evidence And Research Learning Snippet



Parental Knowledge of juices and sweetened beverages in infants diet

Results:

- Seventy-two percent of parents plan to give juice to their babies starting in the first year of life; only 16% plan to introduce SSBs.
- Parents with some college education or more were significantly less likely to report an intention to introduce juice ($P < .0001$) and SSBs ($P < .001$) in their children's diets.
- Education level was significantly associated with knowledge about juice and SSBs ($P < .001$).
- Parents with higher knowledge were significantly less likely to plan on introducing juice ($P < .001$) and SSBs ($P < .001$).
- Forty-two percent of caregivers reported keeping juice at home and 21% reported having sugary drinks at home every single day of the week.

Parental Knowledge About Juice.

| Statement | Respondents who answered correctly | N (%) |
|---|------------------------------------|----------------|
| (False) Juice gives my baby vitamins and nutrients that he/she needs to remain healthy | | (52/139) (37%) |
| (True) Giving juice to my baby can cause diarrhea, gassiness, and/or bloating | | (39/138) (28%) |
| (False) Juice is way to provide fruit in my baby's diet | | 65/138) (47%) |
| (True) Giving too much juice will make my child gain too much weight and become overweight or obese | | (81/139) (58%) |
| (True) Giving juice to my baby could cause teeth decay/cavities | | (86/137) (63%) |
| (False) 100% juice does not contain sugar | | (70/136) (51%) |
| (True) Juice can take away my baby's appetite for more nutritious foods | | (74/136) (54%) |
| (True) Putting my baby to sleep with a bottle containing juice, sugary drinks or formula can cause ear infections | | (47/137) (34%) |
| (True) WIC provides 4 ounces per day of juice because that is the most that is currently recommended | | (52/131) (40%) |

Conclusion: Parents of young infants lack enough knowledge about the detrimental effects of juice and sugary drinks on their children's health.

Key message: Pediatricians are in a unique position to provide anticipatory guidance starting at a very young age regarding the negative health effects of juice and sugary drinks and to promote a healthy diet that includes water and milk as the best drink options for children and adolescents.

EXPERT COMMENT

“The excessive consumption of juice and SSBs leads to childhood overweight and obesity. A focused intervention targeting the caregivers of infants prior to the introduction of juice and SSBs offers the opportunity to proactively prevent the development of obesogenic habits.”

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With warm regards,

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Reference

Musial S, Abioye A, Murillo AL, Eskander J, Sykes O, Rodriguez L, Friedman JF, Bancroft B, Golova N. Introducing Juice and Sugar-Sweetened Beverages in Early Infancy: Parental Knowledge and Intended Behaviors. *Clinical Pediatrics*. 2021 Feb;60(2):109-18.