

BREAKFAST CEREAL AND CHILDREN

Breakfast cereal (ready-to-eat breakfast cereal, muesli and oats) is the most popular breakfast choice among Australian children. In Australia, the ABS 2011-12 Australian Health Survey data showed that 45% of children usually ate breakfast cereal including¹:

- 58% of 2-3 year olds;
- 57% of 4-8 year olds;
- 41% of 9-13 year olds; and
- 32% of 14-18 year olds.

Among non-breakfast cereal consumers, the most popular foods children ate for breakfast was bread (56%) followed by milk (25%).¹

Regular consumption of breakfast cereals by children and adolescents was associated with:¹

- diets higher in vitamins and minerals;
- a greater likelihood of meeting recommended nutrient intakes; and
- a lower BMI and reduced risk of being overweight or obese.

The ABS 2011-12 Australian Health Survey showed that the contribution of breakfast cereals to daily nutrient intakes per capita for Australian children 2-18 years old was:²

- 21% of their daily thiamine and iron intake;
- 15% of daily riboflavin intake;
- 25% of folate intake;
- 9% of daily fibre intake; and
- 3% of sodium intake; and 3% of total sugars intake.

For breakfast cereal consumers 2-18 years old, the contribution of breakfast cereals to daily nutrient intakes was:²

- 36% of thiamine and iron intake;
- 25% of riboflavin intake;
- 25% of folate intake;
- 18% of fibre intake;
- 10% of calcium intake; and
- 6% of sodium intake; and 6% of total sugars intake.

Healthier diets

The evidence shows children and adolescents who regularly eat breakfast cereal have better overall diets, specifically:

- they have diets that are higher in vitamins and minerals (Grade B evidence);³
- they have a greater likelihood of meeting recommended nutrient intakes (Grade C evidence);³
- children who eat breakfast cereal are more likely to eat a wider range of foods at breakfast and to have greater whole grain and milk intakes;⁴
- milk consumed with breakfast cereal accounts for almost a third of the daily milk intakes of Australian children;⁵
- secondary analyses of the 2011-12 Australian Health Survey showed:
 - there was no difference in overall daily energy, total sugars, or added sugars intakes whether children or adolescents consumed breakfast cereals containing less than 15g total sugars per 100g, or breakfast cereal containing 15g or more total sugars per 100g;^{1,6}
 - there was no difference in daily added sugars intakes whether children or adolescents consumed breakfast cereals containing different amounts of total sugars: less than 15g

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total sugars per 100g; 15g to less than 30g total sugars per 100g; or 30g or more total sugars per 100g.^{1,6}

Lower BMI and reduced risk of obesity

Scientific evidence consistently associates regular breakfast cereal consumption with healthy weights in children and adolescents. In summary:

- regular consumption of breakfast cereals is associated with a lower BMI and reduced risk of being overweight or obese in children (Grade B evidence);³
- for children who regularly consume breakfast cereal, there is no difference in their risk of being overweight or obese whether they consume pre-sweetened cereals or other breakfast cereals (Grade C evidence);³ and
- a recent UK research paper, analysing data from 16,936 participants involved in the Millennium Cohort Study, found breakfast skipping was the number one modifiable factor for predicting children's BMIs in the overweight range and number two factor for predicting BMIs in the obese range.⁷

Improved cognition and school performance

There is a significant body of research supporting the role of breakfast and its impact on specific measures of brain function, cognition and academic achievement.⁸⁻¹⁰

This includes most recently, a systematic literature review of 41 studies, covering more than 166,000 school aged children, that identified breakfast eating as the most common dietary factor associated with better academic achievement.¹⁰

The benefits of eating breakfast are related to the nutritional quality of the breakfast and the finding that breakfast eaters have more nutritious diets overall.⁸⁻¹⁰ An Australian study demonstrated that the nutritional quality of breakfast independently predicted numeracy and literacy scores even after adjusting for socioeconomic status. It also highlighted that eating a good quality breakfast, which contained at least one serve of cereal, dairy and fruit, had a positive influence on school performance.⁹

No increased risk of dental caries

Consumption of breakfast cereals by children is not associated with an increased risk of dental caries (Grade B evidence).³

References

- 1 Nutrition Research Australia, Breakfast and Breakfast Cereal Consumption Among Australians – A secondary analysis of the 2011-12 National Nutrition and Physical Activity Survey, Sydney, February 2016. <http://bit.ly/BfastCerealDataReport>
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- 4 CSIRO. Additional analyses of the 2007 National Children's Nutrition and Physical Activity Survey. Canberra: Department of Health & Ageing; 2012.
- 5 Fayet F, Ridges L, Sritharan N, Petocz P. Breakfast cereal consumption is associated with higher micronutrient and milk intake among Australian Children. *Australasian Medical Journal* 2011; **4**(12):775.
- 6 Nutrition Research Australia. Breakfast choice and its impact on added and free sugars intake: A secondary analysis of the 2011-12 National Nutrition and Physical Activity Survey, Sydney, December 2016. <http://bit.ly/BfastCerealDataReport>
- 7 Kelly, Y., et al. BMI Development and Early Adolescent Psychosocial Well-Being: UK Millennium Cohort Study. *Pediatrics*. 2016, **138** (6) e20160967; DOI:10.1542/peds.2016-0967
- 8 O'Dea JA, Mugridge AC. Nutritional quality of breakfast and physical activity independently predict the literacy and numeracy scores of children after adjusting for socioeconomic status. *Health Education Research* 2012; **27**: 975-985.
- 9 Hoyland A, Dye L, Lawton CL. A systematic review of the effect of breakfast on the cognitive performance of children and adolescents. *Nutrition Research Reviews* 2009; **22**: 220-243.
- 10 Burrows T et al (2016) Is there an association between dietary intake and academic achievement: a systematic review. *J Hum Nutr Diet*. doi: 10.1111/jhn.12407 <http://onlinelibrary.wiley.com/doi/10.1111/jhn.12407/full>



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Interpreting evidence grades

According to NHMRC guidance, Grade A evidence is to be trusted to guide clinical practice, Grade B is to be trusted to guide practice in most situations, Grade C provides some support but care should be taken in its application, and Grade D is suggestive, where the body of evidence is weak and therefore the statement should be applied with caution.

About the Australian Breakfast Cereal Manufacturers Forum (ABCMF)

The ABCMF provides evidence-based, practical information so Australians can have a better understanding of the true value of breakfast cereals and breakfast as part of a healthy lifestyle. The ABCMF is a forum of the Australian Food and Grocery Council.

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For more information contact ABCMF Director Leigh Reeve AdvAPD lreeve@afgc.org.au

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