Children’s Obesity: Is Consumer Research Relevant?

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“Children’s Obesity: Is Consumer Research Relevant?” Session Co-Chairs Elizabeth S. Moore, University of Notre Dame, William L. Wilkie, University of Notre Dame
Research Papers “Consumer Research Inputs to Public Policy: The Case of Children’s Obesity” Elizabeth S. Moore, University of Notre Dame, William L. Wilkie, University of Notre Dame

The disturbing trend of a steady increase in obesity among the nation’s youth has captured the attention of a broad set of citizens and institutions. Public policymakers are responding by considering various courses of action involving marketing and advertising to children. Inputs are being sought from the consumer research community, which has an opportunity to help direct the future of this debate. This paper provides an historical analysis of prior consumer research inputs to policy in this area, and then details a series of needs, challenges, and opportunities for consumer researchers interesting in working in this area.”

“Researching the Link between Food Advertising &amp; Childhood Obesity” Debra M. Desrochers, University of Notre Dame, Debra Holt, Federal Trade Commission

To combat the increasing prevalence of childhood obesity, several constituencies are calling for restrictions on food marketing that is directed to children. Others point out that there are numerous practical difficulties with such restrictions. This segment will highlight past, current, and needed research regarding the relationship between food marketing and childhood obesity. While past research provides a benchmark, current research will focus on the Federal Trade Commission’s new study of television advertising to children. Future research is needed to establish the link between marketing and obesity and to evaluate alternatives to government regulation of marketing to children.”

“A Model of Children’s Preventive Health Behavior: Understanding the Role of Individual, Contextual, and Attitudinal Determinants” Kathleen Seiders, Boston College, Elizabeth G. Miller, Boston College, Maureen E. Kenny, Boston College, Mary E. Walsh, Boston College

In this research, we investigate the influence of individual, contextual, and attitudinal factors on children’s preventive health behaviors. Because our goal is to better understand prevention behavior related to childhood obesity, we measure outcomes linked to children’s food choices and decisions about nutrition and physical activity. The model is examined in the context of a health education intervention that was implemented across nine urban, racially and ethnically diverse elementary schools. Our findings provide new insights into children’s health decisions, the impact of environmental influences, and the drivers of childhood obesity. Public policy implications are discussed and recommendations are presented. Discussion Leader Jerome D. Williams, University of Texas

[to cite]:

[url]:
http://www.acrwebsite.org/volumes/12458/volumes/v33/NA-33
SESSION OVERVIEW

Children’s obesity has become an increasingly serious health problem in the U.S.A. According to the Institute of Medicine, obesity among preschool children (ages 2-5 years) has more than doubled since the 1970s, and has more than tripled among children ages 6-11 (Institute of Medicine 2005). This public health issue has attracted attention from public policymakers, consumer interest groups, nutritionists, academics, and food marketers. Inputs are being sought from the consumer research community, with an opportunity to help direct the future of this debate. The goal for this session was to highlight critical research issues, report new empirical evidence, and suggest future research directions.

The Moore and Wilkie paper opened the session with a brief analysis of how consumer research was used in previous FTC efforts to regulate advertising to children. They then discussed emerging research issues, especially re: the changing landscape for marketing to children. To illustrate, the authors presented findings from a content analysis of children’s “advergaming” websites. These findings point to a pressing need to further understand children’s response capacities and defenses at different ages in new media. Needs for research on children’s food consumption choices and behaviors over time were also discussed, and recommendations made as to how this might proceed.

The Desrochers and Holt paper shifted focus to the nature of consumer research evidence needed for public policy decisions. Here major policy proposals to restrict food advertising to children are analyzed. Highlighted were research projects underway and needed to investigate any link between television advertising and obesity. Coverage was then broadened to research needs on the consequences of (and possible alternatives to) an advertising ban, as well as alternative solutions to obesity such as guidelines regarding portion size, and/or comparisons across product classes and nutritional content.

In the third paper, Seiders, Miller, Kenny and Walsh reported findings from an empirical test of a model of children’s preventive health behaviors, set within a health education intervention being implemented in nine urban, racially and ethnically diverse elementary schools. Outcome measures linked to children’s food choices, decisions about nutrition, and physical activity were reported. Both individual level characteristics and environmental factors were assessed. These environmental factors have not previously been studied, and are a key issue given the extensive market distribution of certain foods. The authors’ findings provide new insights into the determinants of children’s health decisions, the impact of environmental influences, and the drivers of childhood obesity.

Jerome Williams, University of Texas, served as the discussion leader for the session. He is a member of the Institute of Medicine (IOM) committee charged by Congress to investigate the effects of food marketing on children’s diets. In discussion he provided attendees with useful insights into dimensions of the policymaking process in this area.

“Consumer Research Inputs to Public Policy: The Case of Children’s Obesity”

Elizabeth S. Moore, University of Notre Dame
William L. Wilkie, University of Notre Dame

The disturbing trend of a steady and alarming increase in obesity among the nation’s youth has captured the attention of a broad set of citizens and institutions, with calls for action becoming increasingly powerful. Public policymakers are considering various alternatives. Marketing and advertising are being questioned, and inputs are sought from the consumer research community. This paper provides an analysis of key issues for those interested in contributing to this research. It first offers an historical analysis of previous public policy efforts to regulate advertising to children, followed by current assessment of consumer research needs, challenges, and opportunities.

Lessons Learned from FTC’s Earlier Effort to Ban Advertising to Children

Concern with children as a vulnerable group has been longstanding, with many societal protections afforded by law. A number of issues involving marketing to children are as yet unresolved, however. The most notable previous undertaking occurred in the late 1970’s when the Federal Trade Commission (FTC), in response to petitions from citizen groups, undertook Trade Regulation Rulemaking to investigate possible new rules for advertising to children. Emphasis was on sugared products, dental caries, and nutrition (not substantially distinct from today’s concern with obesity). A range of rules were considered, ranging from required disclosures to an outright ban of all television advertising to younger children.

Given the legal setting, FTC and industry had considerable interest in receiving evidence and insights from consumer researchers. In this section of the paper some of the key children’s research contributions are summarized, as are key research questions that emerged in retrospect (e.g., “Does children’s exposure to TV commercials assist or suppress their use of a healthy/unhealthy dimension in food choices?” or “What possible roles and approaches are there for effective consumer education for children?”). These are likely to prove useful in informing today’s debates as well.

Finally, the public policy outcome (FTC terminated the proceeding) and reasons for it are briefly described. It is pointed out that this outcome left the debated issues in this area unresolved for the ensuing thirty years: many of these same issues are arising today on childhood obesity.

Current Research Needs, Challenges, and Opportunities

The second, longer section of the paper turns to the current concern with children’s obesity. In a major public policy initiative, the U.S. Congress recently issued a mandate to the Institute of Medicine of the National Academies of Science—to thoroughly investigate this problem and provide a set of recommendations for action. The first author of this paper served as an invited expert from marketing academia to present consumer research-based insights at the Institute’s special workshop. This section extends that work in offering key considerations for consumer researchers.
A primary target for public policy today is, as earlier, television advertising to children. However, today’s nature and scope of marketing to children is much broader than this. Consider, for example, other areas likely to be related to obesity, including easy product availability (distribution, display, and convenience), product innovation, and appeals to taste, price, and quantity. Also, integrated marketing communications programs now need to be incorporated into our analysis of advertising itself. Finally, children today are exposed to a fast-changing, interactive media and promotion landscape. For example, new technologies have brought “advergaming” to the fore. Sixty-four percent of children on the Internet play games there (U.S. Department of Education 2003), with many of these featuring brands in fun, involving manners (readers should consult, for example, C Candystand.com, Nabiscoworld.com, Postopia.com). Further, 98% of children’s websites now permit advertising (Neuborne 2001).

The paper then reports findings from an extensive content analysis of these websites, conducted in cooperation with the Kaiser Family Foundation. Consider how different these exposures are, and how extended they can be (the average Internet visitor spends 26 minutes on a site (Fattah and Paul 2002)). It is clear that our repository of children’s research based on 30-second advertising exposures clearly needs to be extended, and that our age conceptualizations of children’s response capacities and defenses also needs to be investigated within these new venues. Public policy needs insights here to assist in moving beyond the current preoccupation with television advertising, and consumer researchers can clearly contribute to such broadened understanding.

The paper then points to a need for more research on children’s actual food consumption decisions. Here timing is a factor to be investigated, as obesity is obviously the result of numerous behaviors with possibly repetitive patterns (note that much experimental research studies single decision occasions). Consuming in a continuous fashion is important here, as is learning more about how prior product usage impacts subsequent behaviors. Finally, the roles of social factors relating to food consumption, exercise, and nutrition also offer promise. Given that obesity runs in families (as well as subcultures), intergenerational influence research holds considerable potential to contribute new insights and possible directions for ameliorating this growing problem (e.g., Moore, Wilkie, and Lutz 2002).

In summary, the alarming increase in childhood obesity is a powerful societal trend portending dire health consequences for millions of Americans in the years ahead. Consumer research is being called upon. This paper is intended to help to alert our field to the challenge, and to offer positive directions for future research undertakings.

“Researching the Link between Food Advertising & Childhood Obesity”
Debra M. Desrochers, University of Notre Dame
Debra Holt, Federal Trade Commission

The increasing prevalence of childhood obesity throughout the United States now ranks as a critical health threat (Institute of Medicine 2005). In an effort to combat this threat, several constituencies are calling for restrictions on food marketing, particularly television ads for less nutritious foods that are directed to children. This segment of the special session focused on the past, current, and needed research pertaining to the relationship between the advertising of fast food and childhood obesity.

The first section of the presentation briefly covered the public policy history of television advertising to children, and highlights some recent evidence and concerns that have revitalized the issue. The topic of television advertising to children emerged as an important public policy issue early in the 1970s (Kunkel and Gantz 1992). In response, the Federal Trade Commission (FTC) conducted the Children’s Advertising Rulemaking proceeding in 1978 to consider the possibility of restricting television advertising of highly sugared food to children. Several studies prepared at that time provide a baseline for future analysis. The first study was prepared by Howard Beales (1978) who later became Director of the FTC’s Bureau of Consumer Protection based on local, or spot, advertising, the second by John Abel (1978) based on national advertising, and a third by Richard Adler (1978) based on all programming, supported by a National Science Foundation grant. The conclusions of the rulemaking session were presented (Beales 2004).

Since 1978 there have been significant changes in television viewing. For example, there are now several kid-specific networks competing around the clock (Brown 2004). Meanwhile, more than $1 billion is spent on media advertising of food and beverages to children that reaches them primarily through television (Institute of Medicine 2005). Consequently, various groups, such as the Center for Science in the Public Interest (CSPI) and the Kaiser Family Foundation, are arguing for a re-examination of this issue by public policymakers.

In response, a recent article reviewed and assessed several research projects and hypotheses on the causes of obesity, children’s exposure to food advertising, and the effects of food advertising on consumer choice (Zywicki, Holt, and Ohlhausen 2004). This article determined that, based on publicly available data, it did not appear that children’s exposure to food advertising had increased since children’s obesity rates began to rise around 1980. However, since there had been no rigorous studies on food advertising exposure since the late 1970s, the question of whether food ad exposure has increased since then remained an open question. Therefore, the FTC began an analysis of comprehensive current data on television advertising. Some of the preliminary findings of this study were presented and compared to findings of the 1977 studies. To complement the FTC study, ideas for future work addressing the link between food marketing and childhood obesity were proposed. Even if a causal link between television advertising and obesity is not established, some groups may argue that restricting food advertising on children’s programs would do no harm and might help to protect children. Therefore, it is important to consider another policy related question: what would be the overall impact of marketing restrictions? Several areas of needed research were presented on this topic.

In closing the presentation, several areas of research were listed that would further inform the issue of food marketing and obesity. For example, regarding the issue of television advertising itself, some of these are: (1) the continued investigation of a potential causal link, (2) the impact and effectiveness of integrated marketing communications including television advertising, and (3) how we can use advertising to promote weight loss / healthy diets & lifestyles. In the area of advertising bans, we need more research on the benefits and harms of a ban, and on assessing whether the benefits more than offset the harms. Finally, research is needed to identify other solutions to the obesity problem, such as: (1) increasing the focus on the reduced activity component of obesity, (2) changes to labeling and portion size standards, and (3) healthy lifestyle initiatives.

1The opinions expressed herein are the authors’ alone and do not necessarily represent the views of the FTC or its Commissioners.
“A Model of Children’s Preventive Health Behavior: Understanding the Role of Individual, Contextual, and Attitudinal Determinants”
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Mary E. Walsh, Boston College

In the last three decades, the obesity rate among children 6-11 years of age has tripled; obesity rates are particularly high for subpopulations of minority and economically disadvantaged children (AAP Policy Statement 2004). Obesity in the pediatric age group is associated with significant health problems, including Type 2 diabetes, and is a major risk factor for adult morbidity and mortality (Ogden et al. 2002).

A number of biological, psychological, cultural, and economic factors have been associated with increased childhood obesity. Although it is difficult to show a conclusive link between specific risk factors and population-wide obesity increases, many experts agree that the epidemic is based on availability of energy-dense foods and decreased physical activity (e.g., Andersen et al. 1998). Intervention efforts that aim to reduce childhood obesity typically focus on correcting the energy intake and expenditure imbalance. School-based nutrition and activity interventions are widely advocated because of the high percentage of time children spend in school (Institute of Medicine 2005; Ruiz et al. 2004). However, the effectiveness of school-based programs is debated: most school-based trials designed to promote more healthful lifestyles have produced disappointing results and have not effectively reduced pediatric overweight (Ebbeling, Pawlak, and Ludwig 2002).

A greater understanding of factors that influence children’s health-related decisions could advance the design and delivery of effective nutrition and activity interventions. Although researchers have proposed and tested a variety of models of behavior change related to preventive health measures, these models have rarely been applied to children. Further, knowledge concerning the individual and contextual determinants of childhood obesity, including those related to food marketing impacts, is very limited.

We address these gaps in the literature by examining determinants of children’s decisions about diet, nutrition, and exercise. Drawing on the expanded health belief and other prevention-specific models (Bush and Iannotti 1990; Moorman and Matulich 1993; Rosenstock 1990), we develop and test a model of individual, contextual, and attitudinal influences on children’s preventive health behavior. We examine the model in the context of a health education intervention where objectives include behavioral change with regard to healthful nutrition and beneficial physical activity.

Model Description and Research Approach

The multi-faceted, evidence-based health education curriculum was implemented across nine urban elementary schools. All of the schools are racially and ethnically diverse; the curriculum was delivered to all 4th and 5th grade students (approximately 435) in the nine schools.

Individual level characteristics include basic demographics (sex and age), body mass index (BMI), economic resources, and ethnicity. Environmental factors are geographically-based, related to the neighborhood and community in which the child lives. Relative to neighborhoods, factors include the density of fast food restaurants, the density of full-service supermarkets, and prevalence of parks and other recreational facilities. Early prevention models have not incorporated environmental predictors and individual-environmental interactions, and empirical studies examining the impact of environmental influences are limited (Drewnowski and Specter 2004). This is an important issue for marketers to address; for example, some researchers believe that nutrition knowledge is less important than the pronounced availability of certain foods (e.g., fast food items and soft drinks) in the environment (Schwartz and Puhl 2003).

The core constructs of our model reflect earlier proposed prevention models, most notably the health belief model. Specifically, we measure locus of control, self-efficacy, health motivation, response efficacy, and perceived health status. Outcome variables include nutrition knowledge, food choices, and physical activity. Food choices include decreased fast food and increased fruits and vegetables consumption. Physical activity measures include increased physical education participation and reduced sedentary activity (e.g., television viewing). The outcome data is self-reported. Some of the multi-item measures have been adapted from studies with adults, but most have been validated in studies with children.

Conclusion

This study contributes to the literature on two major dimensions. First, it tests a model of children’s preventive health behaviors, taking much-needed steps to investigate the complex relationships that affect children’s health-related decisions. Second, it increases our ability to gauge health education’s potential to influence obesity-related preventive behaviors. From a policy perspective, this is important. If educational campaigns consistently show weak results, policy makers are likely to accept more restrictive remedies (e.g., restrictions on advertisements targeted to children; mandatory restaurant labeling; taxes on low-nutritional value foods) in their attempts to blunt the impact of obesity. From a consumer behavior perspective, the increasing purchase autonomy of children underscores the need to better understand their nutrition and activity decisions and choices.

REFERENCES


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