'Let Them Eat Cake - If They Want To': Consumer Experience of Self-Control in Dieting

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ABSTRACT
“Obesity in the U.S. has reached an epidemic level. Both consumers and society are trying to battle this problem; for consumers, the most common means is weight loss through dieting although the rate of achieving desired weight goal is discouragingly low. Lack of self control is often recounted as the most common reason for consumer failure in successful weight loss. This paper reports on the phenomenological exploration into the dieters’ lived experience of self control attempts with weight loss. Among the factors that undermine consumers’ self control attempts are treating food as comfort and its omnipresence, whereas social support and relative freedom from family responsibilities seem to aid successful self control.

INTRODUCTION
Although obesity among the U.S. population has been qualified as an epidemic (Hamdy 2003), it represents a rising problem on a global scale (Wadden, Foster, and Brownell 2002). Worldwide, 300 million people are afflicted by obesity, of which 115 million live in developing countries (Witkowski 2005). In the U.S., approximately 64% of adults are overweight or obese (Seidler and Petty 2004), and obesity remains one of the costliest medical conditions, with the increased risk of about 30 serious illnesses (Dellande, Gilly, and Graham 2004; Flegal et al. 2002). Consequently, excess body weight represents a problem that both the consumer and society are trying to fight. For consumers, the most common means of battling this problem is dieting, either independently or through various weight loss programs and products. Americans spend $35 billion on dieting programs each year (Vohs and Heatherton 2000), and according to a recent national consumer survey, 71 million U.S. adults are currently dieting (Hubrich 2004). But despite the expended physical and material efforts, the results are rather grim: out of about 50 million people who go on a diet each year, only 5% manage to maintain weight loss in the long run (FDA 1992). The significance of weight loss to overall consumer well being cannot be understated (e.g., Bagozzi and Edwards 2000), yet relatively little research is available in consumer behavior on the factors contributing to why losing weight and maintaining it successfully is so difficult.

This paper draws on the proposition that self control, and especially its failure, is the most common reason why majority of individuals are unable to succeed in weight loss pursuits (Baumeister, Heatherton, and Tice 1994). Exercising self control is necessary for avoiding hedonic temptations (Kivetz and Simonson 2002), which in the case of successful weight loss includes managing the consumption of toothsome yet highly caloric foods. Consumers often find themselves conflicted between the long-term weight loss goal and the immediate gratification of the desire for foods they are not supposed to eat (e.g., Baumeister 2002b; Hoch and Loewenstein 1991). Struggle with self control is aggravated by the fact that a lot of eating occurs in social surroundings where there are a number of environmental conditions that can facilitate or inhibit consumers’ strivings (Bagozzi 1992). Our phenomenological exploration into the lived experience (Thompson, Locander, and Pollio 1989) of 18 informants at various stages in the weight loss process focused on the understanding of the factors impeding and contributing to consumers’ strivings for self control in weight loss attempts. The insights into consumer experiences of self control uncover how personal and external factors interact in handling or succumbing to multiple temptations encountered on the way to achieving the desired weight goal.

LITERATURE REVIEW
The existing conceptualizations of self control in marketing and consumer behavior draw upon perspectives from economics and psychology. The economic perspective of self control focuses on the principle of time inconsistency in terms of fluctuating preferences between the immediate hedonic pleasures and the long-term rational goals (Schelling 1978; Thaler and Shefrin 1981). Yielding to temptation represents the failure of self control accompanied by the experience of inner conflict (Baumeister 2002b) because it does not maximise the individual’s long-term best interest. Thus, the problem of self control is construed as the clash between hedonism and rationality or between desire and willpower (Deily and Reed 1993; Hoch and Loewenstein 1991; Wertenbroch, Soman, and Nunes 2004), and self control represents the type of mastery or skill at strategies that help battle desires and urges.

Applying the economic perspective, marketing scholars have examined the mechanics of the self rationing strategy (Wertenbroch 1998, 2001) as the means by which consumers try to impose limits on the “myopic” self who wants to be healthy in the long run but also wants to smoke a cigarette right now (Schelling 1984). The products examined in these studies represent the “vice” category (e.g., tobacco), products that contain inherent potential for producing undesired consequences for health (Hirschman 1992), or the overall well being as in the case of compulsive buying (O’Guinn and Faber 1989). Thus, although the economic approach suggests that avoiding unwanted consumption (Lawson 2001) requires the mastery of self control strategies (e.g., Hoch and Loewenstein 1991), why certain self control strategies work better than others and under what conditions it is more likely that consumers will be able to either manage or defect in self control attempts has not been examined. Also, there have not been longitudinal studies of how consumers try to control themselves over longer time periods. For example, Lawson (2001) used the diary method in which participants recorded their thoughts and behaviors over a two-week period. In their study on precommitment, Kivetz and Simonson (2002) asked informants about their preferences in terms of luxury option over a necessity.
Recent theorization on self control and its relevance to consumer behavior has evolved from studies in social psychology (Baumeister 2002b). In this view, self control, defined as the conscious effort to alter how the individual would otherwise feel, think, or behave, represents a type of resource (Baumeister et al. 1998; Baumeister et al. 1994; Muraven, Tice, and Baumeister 1998). The key assumptions of this view are that self control as a resource is an effortful attempt to alter behaviors, affect, or cognitions; that effortful exertion exhausts the self control resource and renders subsequent control less likely to be successful; and that the resource can be recharged after sufficient rest (e.g., Muraven, Baumeister, and Tice 1999).

The resource model of self control proposes that when consumers are emotionally distressed, tired, or preoccupied by making decisions, they will be more likely to yield, for instance, to the temptation of impulsive buying (Baumeister 2002b). In a dieting context, a study using the resource model found that dieters who had to control themselves not to eat candy gave up faster on a subsequent task of solving puzzles than non-dieters (Vohs and Heatherton 2000). The other relevant assumption of the resource model is that self control can be increased by continuous exertion in the long term (Baumeister 2002a; Schmeichel and Baumeister 2004). Despite the theoretical rigor, the resource model of self control does not specify the origin of this resource nor how it can be recharged, points especially relevant in contexts such as dieting where consumers have to exert themselves continuously in order to not only accomplish desired end-states but also maintain them. For example, if self control is a resource that can be improved as a muscle over the long haul, why aren’t chronic dieters better able to control conflicting desires? All of the social psychology research on the resource view of self control is experimental, and the only longitudinal study by Muraven et al. (1999) examined participants’ trials at improving self control over a two-week period.

Two main conclusions can be drawn from the above review of the literature on self control. First, self control has not been examined longitudinally in contexts where consumers have to exert themselves on a continuous basis, as in the case of dieting. Second, conditions that may play a crucial part in consumers’ self control attempts and the influence of those conditions on the likelihood of long-term success have not been investigated. Based on these conclusions, the study focused on the lived experience of the dieters and the factors that rendered their self control efforts either successful or likely to fail in their weight loss efforts.

**METHODOLOGY**

Semi-structured interviews that emphasised consumers’ experiences with the weight loss process were conducted with 18 female informants (McCracken 1988). Informants were sampled by gender purposefully, as the existing body of research suggests that women are more likely to be preoccupied with body weight concerns and try to deal with them through dieting than men (e.g., Nchter 2000; Ogden 1992). Informants were recruited through flyers posted at three commercial weight loss centers (Weight Watchers, Diet Center, and LA Weight Loss). The interviews were conducted either in the homes of the informants or at locations of their preference. After the interview, the snowball sampling approach was used, asking the informants for the names of potential interviewees.

Twelve out of 18 informants had used commercial weight loss services before, although only nine of them were enrolled in any weight loss program at the time of the interview. The informants were at different stages of weight loss. Three informants were trying to lose weight independently; five were at the maintenance stage with an average time of five years of staying at their goal weight; one informant was considering gastric bypass surgery, and four informants were re-joining Weight Watchers for either the second, third or fourth time; these informants had regained all or almost all of the weight lost before. The rest of the informants were in the process of working toward their goal weight.

Following McCracken (1988), interviews began with “grand tour” questions about the informants’ past experience with weight loss in terms of the actual weight lost, the length of time involved, and personal importance of losing weight. After the general questions, the informants were asked to provide details about their current experiences with the focus on their actual weight loss activities. In the course of the data gathering, interview tapes were reviewed regularly in order to guide the foci of future interviews (Schouten 1991). The interviews were tape-recorded and transcribed verbatim for the analysis.

The interview data were examined for common themes across informants in order to categorise the factors and conditions facilitating or inhibiting the informants in their self control attempts as well as the means they employed in overcoming difficulties encountered in those attempts (Spiggle 1994; Wallendorf and Arnould 1991). Since all the informants talked about the relationship they developed with food in childhood, careful attention was paid to this theme and how it was integrated into the lived experience of the weight loss process (Thompson, Locander, and Pollio 1990). The findings are organised around common themes from the data readings and reflect perceptions, concerns, meanings, and reported activities that make up the informants’ overall experience of controlling themselves in striving for the desired weight.

**FINDINGS**

**Factors Impeding Self Control**

**Special Relationship with Food.** All informants in the study had prior experience with trying to lose excess weight, whether attempted independently or with the aid of commercial weight loss providers, and they unanimously agreed that without the discipline of controlling their urges for food, the accomplishment of weight loss was unlikely. Dieting as a way of losing weight primarily involves regulating food intake (Ruderman 1986). Consumers have to follow specific rules and guidelines in terms of what they eat, how much, how often, as well as incorporating exercise into the weight loss plan. All of these activities require expending self control in order to override an impulsive pattern of response. Since self control requires conscious effort to alter behavior, thought, or feeling (Baumeister et al. 1994), the biggest hurdle for consumers to overcome is changing the very special relationship that they have with food.
I love junk food. Cookies, cake, candy…that kind of stuff. I think that’s the worst because all of this tastes so familiar and good to me…we grew up eating meat, and cookies, and potatoes, and pies, and you know, you come to like those foods, and it’s that mentality instilled in us from way back…and my mother died believing that I got diabetes because I was a vegetarian at some point in life. (Jessica, 49)

In the account of the informants, this difficulty is primarily constituted by the fact that the love for food, especially food that is fattening or “junk,” was developed throughout their life course and many trace it back to childhood experiences. Informants report on growing up in the environment of abundance where food was lavishly available, and as a consequence, consuming food was disconnected with its primary function of satisfying hunger.

Because eating and hunger weren’t tied together when I was a kid. You never really got hungry there was always so much food. You just never did. And if something would happen and I would be upset, my mother would give me a cookie. And a reaction to just about everything was eating. (Lydia, 44)

Food as Comfort. Apart from abundance, as the quote above indicates, food was endowed with much emotional content. Often food became the substitute for important emotional needs not otherwise fulfilled by parents. As a result, food acquired a special status, as in the case of Lydia for whom motherly love or the absence of it was substituted through food.

My mother actually was a big contributing factor because she was a great cook, and a great baker, and not very capable of fulfilling emotional needs for the family. So, her solution was always, if you don’t feel well, eat something. And then if you were eating sweets, she would say, why are you eating that or don’t eat so much. And I learned from early on to treat food very differently than just the fuel for the body. (Lydia, 44)

The messages and uses of food learned in childhood become blueprints for perceptions and meaning that the informants ascribe to food later in life. These blueprints are so deeply internalised that the informants consult them to account for their own perceptions and interpretations of meanings ascribed to food.

You know it’s just…the message when I was a child was always, eat everything on your plate; you can’t leave the dinner table until your plate is clean; and if, if you want dessert you need to clean your plate. We were raised as kids with that message, eat your food, there’s children starving in Africa, don’t waste food, wasting food is bad. It’s very…hard to retrain your brain. Kinda like a record with deep grooves in it that plays itself over and over again. And for me, getting out of those grooves has been hard…with that message playing there. (Natalie, 35)

As the above quotes indicate, it is not surprising that the special attitude toward food as the source of comfort and substitute for emotional attachment becomes one of the most prominent associations that informants develop. The learned perceptions and reactions to food are traceable in the popular metaphor of “comfort food” that many informants mention, far from encompassing just the gustatory pleasure derived from consuming it. In the words of one informant, “food is just comforting…it’s the American way of life, it’s mashed potatoes and cheese and biscuits and gravy; things that are warm and gooey and yummy…and the need to comfort yourself is channeled through food…” (Natalie, 35).

This particular attitude toward food as the source of comfort and attachment continues to be reinforced, especially when the informants are undergoing stressful life situations. Hardships in college, work, family relationships, life transitions, or other less critical contexts represent commonly encountered stressors (Dohrenwend and Dohrenwend 1981). For the study’s informants, these are the situations when they are most likely to seek food as the channel to relieve feelings of stress and frustration.

Because food, it just, feels like food is more basic, and maybe food is…has been a replacement for you know some things. Like, I don’t have a family, I was thinkin’ about it before. I don’t have a family, and I think food, to some extent, is replacing that, replaces those kinds of things. You know the comfort that you get from a family. Say that you were married and you had kids. If something stressful happened, you would go talk to your spouse, or you’d go play with your kids, or you’d go you know do somethin’ like that. And for those things, when something bad happened to me, when something stressful happened to me, I would, I would eat…I remember when I was a couple years out of college, I taught in Stewart, Nebraska, and I was fired from that position. And I remember sitting up that whole night after I was fired and eating chips…I ate a whole bag of chips and a bunch of ice-cream, and when I got done I was full, and so…I was comfortable…I did not feel as bad about being fired any more. (Evelyn, 51)

Turning to food in the times of stress was routinely reported by all informants in the study. Regardless of the seriousness of the stressor, whether being in a bad marriage, dealing with co-workers, or an unexpected visit of the granddaughter, it serves as the sure trigger of seeking...
comfort in food over any other source of relief.

I really was tryin’ to keep track and pay attention to what I was eating yesterday. I did a very good job. I wrote down everything I ate. And then my granddaughter called and said that she was coming in two weeks, and I didn’t know she was coming. And all of a sudden I was stressing ’cause my son didn’t know how he was gonna arrange to see her. It was just thrown into my lap and it was impossible to reason with him. I went right down to the refrigerator and got one of his [her son’s] little mini cheesecakes. And while I was talking to her on the phone, I ate it. So I know that’s how I deal with stress. (Sheila, 52)

Thus, for Sheila, who of her own account was regulating her eating by journaling and keeping track, this effort was aborted as soon as she had to encounter a situation that she interpreted as stressful. Eating cheesecake was the immediate response to dealing with the stressor, which was exacerbated by the lack of cooperation on the part of her son to settle the situation.

Omnipresence of food. Another factor that inhibits consumers’ self-control attempts in the weight loss process is the availability and easy access to the types of food that they are trying to consume. Many informants in the study reported on the state of heightened awareness of food in their surrounding environment. The abundance of stimuli can easily trigger an impulsive response (Dholakia 2000; Hoch and Loewenstein 1991), and for consumers who have to regulate continuously what and how much they are consuming, the most challenging control task is being exposed to such stimuli in all of their respective settings. They perceive lavishness of food as some type of intended “food bombardment” that constantly puts their regulating efforts to test.

You need the food in order to survive, right? And we’re constantly surrounded by it. It’s not like an alcoholic goes out there and sits here with beers just sitting right here, you know. I mean it...food taunts you, it’s there. It taunts you. You know it’s like you drive by, you smell McDonald’s. You see it on TV. There’s a Burger King commercial there; there’s a Pizza Hut commercial. You open magazines, there’s, there’s these two mixed messages that you get. On one page there’s an advertisement for a Snickers bar, and then on the other page there’s 20 tips on how to lose weight and keep it off. So we get all these mixed messages, and you know you have that constant struggle. (Angela, 46)

The informants in the study all acknowledge the importance of food as an indispensable part of their social environments and interactions. During the time of conducting the interviews, the biggest feeding feast of the year, Thanksgiving, was pending or had already been celebrated. All of the informants without exception were dedicating much mental and physical effort to how they were going to deal with the inescapable presence of their favorite foods at family gatherings, and how for a few of them, the need to control themselves marred the experience of enjoying the event. But apart from Thanksgiving or Christmas that are single occurrences of the type throughout the year, more mundane routines such as “food days” at work are equally challenging in terms of controlling food intake. The work setting, in general, seems to be the venue where consumers trying to lose weight have to exercise continuous vigilance, as it is often full of stimulating foods.

Probably the most tempting days that we have here at work are Thursdays, because Thursday is our clinic day, and we have several students that come from the university. And someone always brings a treat on that day for the students of course. And Elva is one of our nurses. She is a wonderful cook, and she will bring...those are terrible days for me, because she will bring these seven layer chocolate desserts, or these coconut macaroons, I love coconut; or when Peggy orders pizza that’s tough for me. She’ll order a vegetarian pizza and I like that. But it’s so bad. (Sheila, 52)

Thus, for the informants in the study, fighting the desire for foods they are trying to avoid is aggravated by the social environment that is perceived as not very conducive to healthy eating. “Junk food” is relatively cheap and easy to come by, whereas healthy alternatives require a lot more effort. For instance, Natalie complains about how, if she has not planned her day out in detail in terms of what she is going to eat, where she is going to get “proper” snacks, or when she is going to have them, locating those proper foods can be quite a challenge.

...I didn’t prepare. So, I’m hungry and instead of saying well I don’t want cookies; I really wanna have a salad, I have to walk all the way down the street. I mean where would I get a salad around here? I don’t know; across the street maybe. Then you’d have to have them keep the cheese off of it; and you know have some low fat salad dressing. There’s just not a whole lot of options for that, not to mention it doesn’t taste very good. So it’s a lot easier to be bad. I mean how many things are in that vending machine that are healthy for you? Like one thing. Like maybe those pretzels. Okay, there’s bananas and apples up there, so then I would go get a banana, ’cause that would be a wise choice. But look at how many things I had to go through in my mind, just to get to the healthy decision. Had to go to the cookies; I had to go to the vending machine; I had to think about getting something to eat it now. (Natalie, 35)
The safest environment for the informants to comply with the diet and not to be tempted to fail self control efforts seems to be the home. For the older informants in the study, home is where they are in relatively fuller control of what types of foods they will provide and consume. Since all informants acknowledged that the path to a sure downfall or breaking the diet is the presence of tempting foods at home, they try to not keep those foods around. While this proves an effective way of staying on the diet, it is not the case for some of the informants. Especially when the dieter’s spouse is not very sensitive or cooperative, home can become a challenging place for resisting temptations.

My husband is a huge junk food addict because he goes to the store and brings home massive amounts of junk food. Well when I shop for groceries, I will always buy, like he likes steak. I don’t like steak, I don’t eat steak. He likes deli meats, and he likes white bread; he will only eat white bread. And, and so I’ll have pot—he loves potato chips. He will come home with ten bags of potato chips. It’s just… And so they’re in the house. And I try to stay away from ‘em; he loves doughnuts for breakfast and cinnamon rolls. And if I have that stuff around I’m probably gonna eat it, ‘cause I love pastries. (Jessica, 49)

As evidenced from the above discussion, the dieters have to battle on multiple fronts simultaneously. Compliance with the weight loss program requires that they continuously monitor food portions and types of food to consume, as well as consciously altering the impulsive responses to tempting foods in their environments. The availability, ease of access, and social contexts where food is routinely present exacerbates their perceptions of the difficulty of exercising continuous self control. At the same time, exercising self control in order to lose weight requires that they change the deeply ingrained approach to food as a source of comfort and stress-reliever reinforced over the course of life events and experiences. For the informants, these intertwined factors may undermine their strivings for the desired goal.

Factors Facilitating Self Control

Even though a number of factors may inhibit consumers’ self control efforts to lose weight, and despite a modest success rate of maintaining weight loss results long term (e.g., Baumeister et al. 1994), successful attainment and maintenance of the weight goal is quite possible. In fact, five informants in the study have been maintaining their weight on average for five years, considered to be a long-term result (Wing and Hill 2001).

Weight Loss as an Exclusive Priority. In line with changing the approach to food as the source of comfort as reported by informants, the most important factor contributing to weight loss success is making it the top priority. By making it the priority, informants refer to the reality that weight loss requires continuous efforts, which is a major challenge given that these efforts have to be exerted in the midst of everyday life activities of making decisions, choices, or other concerns requiring the same self control resource (Baumeister, Muraven, and Tice 2000).

...making the weight your focus. Because people have lives; they have children that take time away; they have spouses that aren’t very cooperative; they have jobs that demand a lot of their time; they have illnesses; sick family members and house payments to make. And they tend to put themselves on the back burner. You know like they tend to put themselves last on the list. Women are notorious for this; where we don’t wanna exercise ‘cause we feel guilty taking time away from our family. We don’t wanna go to a Weight Watcher meeting because you know I should be home cooking dinner for my family, or I should be goin’ to the park with my kids or whatever—You know you just, you don’t wanna spend the money to do it, or whatever the excuses are. (Anne, 64)

Dedication of Time. A few informants shared the same experience of being unable to concentrate on weight loss because of available time. This was true for female participants since their roles of being mothers and home keepers in conjunction with being employed place serious demands on the time resource needed for the implementation of the weight loss routine in their schedules. This concern for time was voiced by 52-year-old Sheila, who had joined and dropped weight loss programs seven times before she finally was able to lose and steadily maintain weight since 2000.

Learning to control yourself is hard and continuous work. Like a full-time job you know. One thing that, is, is the time that I had to devote to it also. Because when having children you’re so busy, you’re working full time. I’ve always had the cake decorating business, so that’s always been there. We delivered newspapers, so it was just not, I didn’t have time to really spend on myself, like to exercise or to even be wantin’ to worry about doing this. So the kids, you know they’re older, so, I have all the time, you know that I need to devote to myself. And I think that, that was one of the major things. (Sheila, 52)

Although important, the lack of availability of time is only one factor that inhibits integrating the regulatory efforts needed for weight loss. Many informants openly admitted to the fact that prior to losing weight, they never acknowledged the presence of a weight problem. Consequently, their prior efforts were not radical enough to help them in accomplishing the desired results because this would have meant life-time changes and commitment to actions required for weight loss and maintenance.

I realised that this is gonna be something I have
to do for the rest of my life. I’m constantly working on it so that I don’t lean on my food crutch. You know you’re never cured when get your weight off. You never are fixed. And so I make the effort…’I’m constantly always dealing with it every day, with food issues. For the first time ever I just bought this gigantic bag of broccoli at Sam’s Club, you know. And it was like before, I would’ve gone to Sam’s Club and maybe purchased…cheese bites or something like that. But this didn’t happen overnight. I’m constantly evolving. (Nicole, 32)

As mentioned earlier, one of the challenges for self control is monitoring food intake. For some informants this means drastically altering how they treat food, such as throwing it away. Given the attitude towards wasting food ingrained since childhood, such measures are accompanied by feelings of uncertainty and tension.

I’m taking care of our two-year-old, and so I constantly have an open refrigerator and an open cupboard. And you know little kids eat a lot, and they eat a lot of junk. They eat macaroni and cheese, and they eat peanut butter and jelly sandwiches, and they eat chicken strips. And they don’t eat much of it. And you’re thinking, I just made that perfectly good grilled cheese sandwich for you, and you’re not gonna eat it. And now I have to throw it away. It re—originally when he first started eating that kind of food, I found myself really struggling with, if I’m making him a grilled cheese sandwich, then I’ll make myself one. Or I’ll eat the rest of his. So I started throwing whatever he did not eat away. And it felt awful in the beginning. I was like, what are you doing? You know I’ve lost weight and kept it off, and here I was struggling again with another issue. So they constantly pop up, that’s why you have to stay on top of things; because just right around the corner is another issue. (Natalie, 35)

Use of Self control Strategies. Finally, the informants recounted a number of strategies, referred to as “tricks of the trade,” that they use in order to control their urges. Akin to support, these strategies serve the same function of providing the means that consumers rely on in fighting temptations they perceive around them.

I didn’t have a good support system when I joined. I didn’t have friends that were involved with it; I didn’t know anyone else that was doing it; and the people I worked with all were foodaholics, and how can you control yourself when we ate all the time together. And now I have these people at work who are doing it [dieting] with me, you know. And I remember one day, I was like I will eat this chocolate and that’s it, and she [a friend] literally dragged me to the meeting. And I was fine. And all of us at work are doing really good. And it helps, because okay, well everybody else is not fallin’ off the wagon so I’m not fallin’ off either you know. (Angela, 46)

Support also serves as a reminder for these informants to regulate themselves as the precursor for successful weight maintenance. Most importantly, support from affiliation with the weight loss program seems to be the key determinant for the likelihood of success. In their own accounts, without the bond of accountability designed by the weight loss programs (e.g., journaling food intake, weighing in, attending meetings, or talking to weight loss service providers), the informants would give up self control efforts more easily. All five long-term maintainers in the study were still very actively involved with their respective weight loss programs and reported readiness to continue doing so indefinitely.

I need that constant daily reminder, the accountability for my own actions, and I know I need them [Diet Center] to continue doing this. So I’m ready to pay and stay as long as I live... (Joan, 56)

The Importance of Support. One contributing factor that the informants report as being essential in their continuous self control efforts is the various forms of support they receive from family, friends, and weight loss programs. The importance of social support to health outcomes and psychological well being has been extensively documented (e.g., Cobb 1976; Cohen and McKay 1984; Turner 1981). Support is crucial not only in the initiation of the steps necessary for weight loss but all throughout the process. The effects of stress, for instance, that can severely undermine self control are often mitigated by support from peers or family members. The informants who continued attending Weight Watcher meetings also recounted the relevance of sharing their self control struggles and getting ideas from other members. In times of frustration with the diet or following the breakdown or lapse, the support system plays a crucial role in providing incentives to continue striving.

I mean some days I’ll literally hold onto the steering wheel and I say, you’re driving past it, you’re driving past it [McDonald’s]. You’re gonna drive past it. You’re not stopping there. You learn little tricks of the trade, like not to carry cash on you, ’cause if you don’t have cash then it’s not as easy to you know stop there. Even though the world of debit cards is changing things you know; but if you don’t have cash that helps. Put your purse in the back of your car in the trunk. That’s another little trick. (Nicole, 32)

The most difficult thing for me was to overcome junk food. So what I started doing
was I’d play a game called Let’s Make a Deal. And my deal is, if I want to have a cookie, I have to eat a bowl of vegetables first. If I want to have a cup of coffee, I have to have two cups of water first. And it works for me. I know that every now and then I want to eat junk food. And so if I’m gonna do it, I know I have to eat a bowl of veggies first, and sometimes that makes me not want the cookie then. So getting the vegetables in, and the water in, and the exercise in has been a real struggle for me. I just really have to force myself to do it. (Alice; 22)

Although these strategies are not always implemented, the key difference between the long-term maintainers and other informants in the study was that they continuously “updated” the pool of strategies by experimenting and utilising those that had proved to be the most effective.

**DISCUSSION**

With rising levels of obesity on the one hand and low success rates at losing weight on the other, it is critical to understand what contributes to the difficulty consumers have with weight loss. Many consumers with weight problems continuously try to learn how to control urges, overcome impulses, and acquire healthy eating habits. They struggle for self control, yet often fail at it. The statistics on dieting point to only a small number of consumers who are successful at controlling themselves to maintain weight loss long term (Baumeister et al. 1994). The existing theories in consumer behavior and marketing have not examined the conditions that are likely to help or inhibit consumers in handling temptations. The data from this study provide insight into why it is so difficult for consumers to exert themselves on a continuous basis even when it is in their best interest (Muraven and Baumeister 2000), and into what makes it possible to maintain weight loss results long term.

Trying to lose weight was a challenging task for all the informants in the study. Fundamentally, the biggest difficulty is overcoming the learned attitude towards food ingrained through childhood experiences and upbringing; food has become not only the way of satisfying hunger but also the channel for comfort and emotional attachment. The “emotional eating” phenomenon is connected to this particular aspect of the relationship that the informants develop with food. The reliance on food evolves into a dominant pattern for coping with stress, and in the course of various life events, this pattern is reinforced. Exertion of self control is further challenged by the omnipresence of food, which the informants found to be an inescapable part of their social reality. The availability and easy access to food inhibits dieters’ self control attempts. The centrality of food, around which many social interactions and activities occur, is perceived as a trial for self control. At the same time, it reinforces consumers’ alertness and serves as a reminder for vigilance they have to exercise in order to resist temptation.

On the positive side, it is possible to exert self control efforts on a continuous basis irrespective of the challenges associated with the weight loss process. The factors that most contribute to the likelihood of success are the ability to dedicate time and concentration to the goal, which makes the long-term maintenance of weight loss more likely. Support from family as well as from the social network and weight loss programs seems to be among the determining factors in strengthening self control efforts. Successful maintainers were able to not only summon but also actively utilise the support and strategies learned through the social networks in times of struggle with self control.

**CONCLUSIONS**

Countering obesity is an issue of tremendous concern and one that has implications on both societal and personal levels. It has also generated controversies like “hamburger laws” and debates about whether consumers are solely responsible for the health consequences of food choices they make (Wald 2003). Controlling food intake and altering behaviors that lead to weight gain are argued to be within the realm of personal responsibility (Klem et al. 2000; Wing and Hill 2001). Thus, the view that consumers do need to exercise self control in adopting healthy lifestyles seems to be uncontested. But how feasible is it that consumers will abandon the deeply ingrained attitudes and behaviors associated with food consumption, reinforced through years of experience and habit? As the data from the study indicate, exercise of self control represents a major struggle. Successful self control in weight loss is deeply contingent upon the resolution of multiple challenges, which consumers encounter in their lived realities. Apart from personal life circumstances, surrounding social environments in which they habituate often seem to undermine consumers’ self control attempts. The consumption of food is not only a fundamental and vital human activity but one that is predominantly social in nature (Maykovich 1978; Saltzer 1980). While the literature on self control focuses on consumers’ ability to regulate impulses or unwanted consumption (e.g., Lawson 2001), most of their food choices occur in various social settings. Hence, consumers’ continuous focus on what they eat is intertwined with social interactions, personal relationships, norms, and obligations that make up their respective environments (Shepherd 1999). Without accounting for the role of these complex social determinants, the understanding of self control successes and failures in consumers’ weight loss strivings remains incomplete. Further investigation of the factors that facilitate or inhibit these attempts is warranted in order to help consumers advance their own well being.

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