

Motives Underlying Food Choice for Children and Perception of Nutritional Information Among Low-Income Mothers in a Latin American Country

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ABSTRACT

Objective: The aim of the present study was to investigate the influence of nutritional information on how low-income mothers select food for their children.

Design: Five focus groups, each consisting of 5–10 participants, were conducted.

Participants: Women, older than 18 years, mothers of young children who were beneficiaries of one of the national food stamps programs in Uruguay.

Phenomenon of interest: Focus group discussions were held around motives underlying food choices for children and perception of labeling systems.

Analysis: Transcripts of the focus group discussions were analyzed using inductive coding.

Results: Forty-two women, aged between 18 and 40 years, participated in 5 focus groups. Results showed that low-income mothers do not consider nutritional information when selecting food their children. Traditional nutritional labeling was perceived as complex, difficult to find, and difficult to understand. Participants stressed that they relied on the nutrition claims included on labels for assessing the healthfulness of food products. Semi-directive and directive front-of-pack labels were positively evaluated in terms of ease of interpretation. Participants preferred the traffic light system over other alternatives.

Conclusions and Implications: Results suggest the need to implement simplified nutritional labeling and to regulate the use of nutrition claims on products targeted at children.

Key Words: focus group, food labeling, traffic light system (*J Nutr Educ Behav.* 2016;48:478–485.)

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INTRODUCTION

The prevalence of overweight and obesity among children has increased worldwide at an alarming rate in past decades.¹ Childhood obesity has several negative health and psychosocial consequences, with both immediate and long-term effects.^{2–4} Although childhood obesity has been more common in high-income countries, it has increased

in many low- and middle-income countries, particularly among urban populations.⁵ It has been estimated that 1 in 4 or 5 children and adolescents in Latin America is overweight or obese.⁶

One of the causes of the increasing prevalence of obesity among children and adolescents is the food environment, which is characterized by the availability of foods that are calorie-dense, poor in nutrients, and that pro-

mote over-consumption.^{7,8} The increase in the production, promotion, and consumption of these products has been identified as one of the main drivers of unhealthful diets in high-, medium-, and low-income countries.^{9,10} Therefore, food policies aimed at coping with the global obesity epidemic must take into consideration the characteristics of the food environment to overcome barriers to healthy eating and to encourage a positive response in the food system.¹¹

Public policies targeted at reducing childhood obesity identify the family as the most important site for intervention.¹² Parents, and particularly mothers, are responsible for selecting most of the foods purchased and consumed by young children.¹³ Research has shown that although parents would like to choose healthful foods for their children, price, time, marketing, and pressure from their children prevent them from achieving this goal.¹⁴ Because of time constraints and lack of ability to process all the information available

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on food packages, parents of pre-school children tend to evaluate the healthfulness of food by using voluntary health and nutrition claims that food companies include to promote their products.¹⁵ In this sense, it is important to highlight that nutrition claims are commonly included in products targeted at children, which are high in sugar, saturated fat, and/or sodium.¹⁶

Front-of-package (FOP) nutritional information could encourage consumers to make healthy food choices by enabling them to quickly and easily evaluate the nutritional value of packaged foods.^{14,17} FOP labels can be classified into 3 main groups according to the degree to which they allow consumers to draw conclusions on the healthfulness of products: non-directive (eg, guideline daily amounts [GDA] system), semi-directive (eg, traffic light system), and directive (eg, health and warning logos).¹⁸ Several studies have shown that the traffic light system, which classifies the content of key nutrients by use of the traffic light color code, is the easiest system to understand under experimental conditions.^{17,19,20}

However, few studies have focused on how parents perceive nutritional information when selecting food for their children.¹⁵ Furthermore, most studies on consumer perception and use of nutrition labels have been carried out in high-income Western countries with medium/high-income consumers, which suggests that research on this topic with low-income consumers from Latin American countries is still necessary.¹⁷

Low-income people tend to have less healthy diets and have higher rates of non-communicable diseases than middle- or high-income people.^{21,22} Low-income people have been reported to be not likely to use nutritional labels when selecting their foods because of their low level of nutrition knowledge.²³⁻²⁵ Therefore, studying how low-income consumers perceive nutritional information is particularly relevant for the definition of public policies.

In this context, the aims of the present study were to investigate how low-income mothers in Uruguay, a country located in the Southeast part of Latin America, select packaged foods for their children, to evaluate the influence of nutritional information in their choices, and to explore their perception of traditional and alternative FOP nutritional labels. Considering that few studies

have been carried out on this specific population, a qualitative approach was used to explore the diverse views and experiences of this target population about their food choices and nutritional information on food packages. In particular, focus groups were used to explore the perception of low-income mothers and to capture different forms of communication that are commonly used in their everyday social interactions.²⁶

METHODS

Participants

A total of 42 female participants from Montevideo, the capital city of Uruguay, took part in the study. Participants were between 18 and 40 years old (64% between 18 and 25 years old) and were mothers of young children between 1 and 5 years old. All participants were unemployed and had not completed secondary education.

All the participants were beneficiaries of one of the national food stamps programs, targeted at the most vulnerable low-income people in the country, which is administered by Instituto Nacional de Alimentación (Uruguay). Participants were randomly recruited from the database of the program to minimize sampling biases. Participants were recruited by phone, and it was explained to them that the aim of the study was related to their food consumption habits. The study was approved by the ethics committee of the School of Chemistry of Universidad de la República (Uruguay). Participants signed an informed consent form and received a gift for their participation (equivalent to US \$20).

Focus Group Discussions

Five focus groups were conducted for this study. Standard procedures were followed; each focus group involved 5–10 participants.²⁶ All interviews were conducted by the same researcher, who had a general question guide for leading the interview that was identical for all the focus groups. The question guide was developed by the researchers who authored the study, which was based on a literature review and results from previous studies with the target population.

First, participants discussed motives for selecting food for their children

and the information they regularly consider when purchasing packaged foods. After this initial discussion, respondents were shown different formats of nutritional labels and were asked to discuss their perception about usefulness and ease to understand. Four types of nutritional information schemes were considered: the traditional nutritional information panel (Figure, A) and 1 system from each of the 3 types of FOP nutritional labels (non-directive, semi-directive, and directive). The following systems were considered: the guideline daily amount system (Figure, B), the traffic light system (Figure, C), and the warning system recently implemented by Chile (Figure, D). This last system is currently being considered in Uruguay as a complement for traditional nutritional information. According to Chilean regulations, products with high calorie, sodium, sugar and/or saturated fat content should include a warning sign on the FOP.²⁷ The study was conducted before the final version of the system was approved. Therefore, the initial version of the warning system was considered in the present work. This version of the warning system uses a single colored warning sign for all nutrients (Figure, D), whereas the final version considers separate black warning messages for each nutrient.²⁷

Focus group sessions were tape-recorded with participants' consent and then transcribed. A note-taker was present during the focus groups but did not participate in the discussion. The moderator and the note-taker had been trained in qualitative research methods and had more than 4 years of experience in conducting and analyzing focus groups.

Data Analysis

A grounded theory approach was used to manually analyze the content of the transcripts.²⁸ The moderator of the focus groups, the note-taker, and an additional researcher with extensive experience in qualitative research performed an inductive coding of the data.²⁶ Initially, one of the researchers read all the transcripts and identified emerging themes for each of the main questions of the focus group discussion, which composed the main topics of the discussion. A second researcher independently confirmed

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