

Counter-Advertising May Reduce Parent's Susceptibility to Front-of-Package Promotions on Unhealthy Foods

Helen Dixon, PhD¹; Maree Scully, BA Hons¹; Bridget Kelly, PhD, APD²;
Robert Donovan, PhD³; Kathy Chapman, M Nutr Diet⁴; Melanie Wakefield, PhD¹

ABSTRACT

Objective: Assess the effect of counter-advertisements on parents' appraisals of unhealthy foods featuring front-of-package promotions (FOPPs).

Design: A 2 × 2 × 5 between-subjects Web-based experiment. Parents were randomly shown an advertisement (counter-advertisement challenging FOPP/control advertisement) and then a pair of food products from the same category: an unhealthy product featuring an FOPP (nutrient content claim/sports celebrity endorsement) and a healthier control product with no FOPP.

Setting: Australia.

Participants: A total of 1,269 Australian-based parents of children aged 5–12 years recruited from an online panel.

Main Outcome Measures: Parents nominated which product they would prefer to buy and which they thought was healthier, then rated the unhealthy product and FOPP on various characteristics.

Analysis: Differences between advertisement conditions were assessed using logistic regression (product choice tasks) and analysis of variance tests (ratings of unhealthy product and FOPP).

Results: Compared with parents who saw a control advertisement, parents who saw a counter-advertisement perceived unhealthy products featuring FOPPs as less healthy, expressed weaker intentions for buying such products, and were more likely to read the nutrition facts panel before nominating choices (all $P < .001$).

Conclusions and Implications: Counter-advertising may help reduce the misleading influence of unhealthy food marketing and improve the accuracy of parents' evaluations of how nutritious promoted food products are.

Key Words: advertising, nutrition, front-of-package promotions, parents, front-of-package labeling, marketing (*J Nutr Educ Behav.* 2014;46:467-474.)

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INTRODUCTION

Amidst increased community concern regarding marketing of unhealthy products to children and support for tighter restrictions,^{1,2} food companies are focusing on messages that encourage parents to purchase such foods for their children.³ Research from the UK highlighted many examples of the food industry using

nutrient, health, and quality claims, celebrity endorsements, and emotion to create a favorable attitude toward a brand in both broadcast (eg, television) and non-broadcast (eg, product packaging, company Web sites) media promotions that misled parents as to the true nutritional value of their products.⁴

Two common marketing strategies that have been found to influence

parents in a previous experimental study are nutrient content claims and sports celebrity endorsements.⁵ Nutrient content claims emphasize selected positive nutritional attributes of products without acknowledging unhealthy nutritional characteristics (eg, "99% fat-free" candy). Sports celebrity endorsements often align high-energy products with images of health and vitality. Many foods featuring such promotions are not healthful.⁶⁻⁸ A previous study found that front-of-package nutrient content claims and sports celebrity endorsements (in which statements about a product's nutritional content and convenience were attributed to the celebrity) tipped parents' food product preferences toward unhealthy products, especially when they had not read the nutrition facts panel, and led parents to erroneously perceive these products to be more

¹Centre for Behavioural Research in Cancer, Cancer Council Victoria, Victoria, Australia

²School of Health and Society, University of Wollongong, New South Wales, Australia

³Centre for Behavioural Research in Cancer Control, Faculty of Health Sciences, Curtin University, Western Australia, Australia

⁴Cancer Council New South Wales, New South Wales, Australia

Address for correspondence: Helen Dixon, PhD, Centre for Behavioural Research in Cancer, Cancer Council Victoria, 615 St Kilda Rd, Melbourne, Victoria 3004, Australia; Phone: (+61) 39 514 6480; Fax: (+61) 39 514 6800; E-mail: Helen.Dixon@cancervic.org.au

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nutritious than healthier products without such promotions.⁵ These sports celebrity endorsements were also shown to enhance parents' perceptions of consumers of the product, the healthiness and quality of the product, and intentions to purchase the product.⁵ Other studies with adults⁹ and children^{10,11} have found that such front-of-package promotions (FOPPs) enhance perceptions of how healthy and nutritious products are. Because parents are typically the gatekeepers for children's food choices at home,¹² preventive initiatives aimed at reducing the persuasive impact of unhealthy child-oriented food marketing should target parents as well as children.

Counter-advertising could provide a promising avenue for reducing the deleterious effects of unhealthy food advertising to parents while promoting healthier food choices. Counter-advertisements challenge messages of industry marketing using tactics such as questioning advertisers' motives, highlighting the negative health implications of unhealthy food products, and exposing misleading promotions.¹³ Media research on other health issues indicates that counter-advertising can be an effective strategy for reducing unhealthy behaviors. For example, the "truth" campaign, a youth anti-tobacco counter-marketing initiative run by the American Legacy Foundation, accounted for a significant portion of the decline in US youth smoking prevalence rates observed between 1999 and 2002 after controlling for potential threats to validity such as cigarette prices, investment in state tobacco control programs, and secular trends in smoking prevalence.¹⁴ A review of mass media campaigns promoting quitting among adults provided some support for the use of anti-industry messages.¹⁵ Alcohol counter-advertising has been effective in reducing alcohol consumption of teenagers and young adults.^{16,17} Although most research assessing public responses to health-related counter-advertising has focused on young people, some studies from tobacco control also show positive effects on adults.^{18,19}

Despite evidence supporting the efficacy of counter-advertising strategies for tobacco control and alcohol harm reduction, efforts to employ counter-advertising in the area of

obesity prevention have been scarce. Nevertheless, some innovative examples exist. In France, advertisements for processed, sweetened, or salted food and drinks are required to carry cautions urging people to stop snacking and to exercise and eat more fruits and vegetables.²⁰ New York City Health Department's Pouring on the Pounds counter-advertising campaign graphically highlights the sugar content in soda and the potential of sugar-sweetened beverages to contribute to weight gain.²¹ This campaign was also adapted for transit advertising in San Francisco, CA. A small mixed-methods evaluation found that around one third of survey and focus group respondents were aware of San Francisco's Pouring on the Pounds campaign; however, because no baseline data was collected, the impact of the campaign on changing behavior could not be assessed.²²

The objective of the current study was to provide empirical evidence to assess the potential efficacy of counter-advertisements that may affect obesity prevention. Specifically, this study aimed to test whether exposing parents to counter-advertisements that challenge nutrient content claims and sports celebrity endorsements led them to more critically and accurately appraise unhealthy child-oriented food products bearing these FOPPs. It was hypothesized that parents exposed to counter-advertisements would be less likely to prefer unhealthy products bearing these FOPPs and would rate such products and consumers of them less favorably than would parents not exposed to counter-advertisements.

METHODS

Design and Procedure

The study employed a 2 (FOPP) × 2 (advertisement) × 5 (product category) between-subjects experimental design. Using a Web-based method, parents were randomized to: (1) an FOPP type (nutrient content claim or sports celebrity endorsement), (2) an advertisement (counter-advertisement challenging their assigned FOPP or control advertisement), and (3) a pair of packaged food products from the same product category composed of an unhealthy (energy-dense and nutrient-poor) product

featuring their assigned FOPP and a healthier product without an FOPP. Participants first viewed their assigned advertisement before subsequent questions assessing their reactions to it could be completed. The advertisement played through automatically on a loop in the center of the screen, with participants unable to click through to the questions until they had viewed the advertisement at least twice. Next, participants viewed their assigned pair of packaged food products and then completed a choice task and ratings of the unhealthy product. The Cancer Council Victoria's Institutional Research Review Committee granted ethical approval to conduct the study. Implied consent was obtained by panel members clicking on the Web link and completing the survey.

The sample was composed of members of an existing national online panel who resided in Australia and were identified as being the main grocery buyer for their household and the parent or caregiver of a child aged 5–12 years. The online panel, managed by the market research company commissioned to conduct the fieldwork, was composed of members originally sourced from various methods including computer-assisted telephone interviews, face-to-face, and online market research databases. Panel members were sent an e-mail with a Web link to the survey, inviting them to participate in a study about packaged food. As an incentive to participate, members received points toward shopping vouchers from the market research company upon completing the survey. Three screening questions were asked at the beginning of the survey to confirm that participants met the eligibility criteria, were not employed (or had close family or friends) in the food manufacturing or marketing industries, and were not dietitians or nutritionists. Based on power calculations using results from previous experiments testing adults' responses to FOPP promotions⁵ (Cohen $D = 0.24$ for effect of nutrient content claim on mean purchase intentions for food product) and anti-tobacco counter-advertisements^{23,24} ($V = 0.15$ and 0.08 , respectively, for the effect of anti-smoking advertisements during movies on the proportion of respondents likely or unlikely to be smoking in 12 months), a sample size of 1,040

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