

Research Report

# We are where we eat: How consumption contexts induce (un)healthful eating for stigmatized overweight consumers

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## Abstract

Increasing obesity rates and public stigmatization of overweight individuals have drawn attention to the need to identify factors that influence consumers' choices to eat healthful or unhealthful foods. The authors of this paper conduct three empirical studies (using stigma manipulation in studies 1 and 2) to test when and why stigmatized overweight consumers are likely to eat more (un)healthful foods. The results suggest that stigmatized overweight individuals consume more calories from healthful foods in public contexts to repair their social identity, but consume more calories from unhealthful foods in private contexts to repair their affect. Consequently, stigmatized overweight consumers end up eating more calories altogether regardless of consumption contexts. The findings are important for marketers and policymakers to improve overall health and wellbeing, especially for overweight consumers.

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## Introduction

Healthful and unhealthful foods directly impact consumers' health and weight. Recognizing that nearly 67% of adult US consumers are obese or overweight (Centers for Disease Control & Prevention (CDC), 2013), researchers seek to understand why people continue to make poor food choices. Research shows that food consumption is associated with individuals' affective states (Arnou, Kenardy, & Agras, 1995; Gardner, Wansink, Kim, & Park, 2014; Macht, 2008), and that the presence or absence of others affects food choices (Herman, Roth, & Polivy, 2003; McFerran, Dahl, Fitzsimons, & Morales, 2010; Wansink, 2004). Given that, American society highly stigmatizes obesity (Puhl & Heuer, 2010), when do overweight individuals more likely to make poor food choices? Does it matter whether others are present or absent when overweight individuals choose what they eat?

In this paper, we integrate literature on affect regulation (Gross, 1998) and social identity (Tajfel & Turner, 1979, 1986) to develop a framework predicting when and why stigmatized overweight consumers eat healthful versus unhealthful foods, depending on consumption context. Contrary to previous findings, we show that stigmatized overweight people, compared with people of normal-weight, are likely to consume more healthful foods when they are in public contexts to repair their social identity. Ironically, healthful consumption is a function of what and how much an individual eats, and thus over consuming so called healthful foods in public contexts is ultimately unhealthful. However, consistent with prior findings, in private contexts, stigmatized overweight individuals are more likely than normal-weight individuals to consume more unhealthful foods to manage their mood. Since food consumption is one of the most frequent consumer consumption experiences, we help overweight consumers understand how consumption context and stigmatization affect their healthful and unhealthful food consumption.

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## Theoretical background

### *Affective regulation and consumption*

Affective states influence food consumption behaviors. Past research found that sad (versus happy) people were more likely to choose buttered popcorn and M&Ms rather than raisins (Garg, Wansink, & Inman, 2007), and people who felt positive rather than neutral affect had increased preference for healthful grapes rather than unhealthy candies (Fedorikhin & Patrick, 2010). Moreover, people engage in affective regulation to reduce, increase, or maintain their current affective states (Gross, 1998). For instance, people who have positive affect are more likely to try unhealthy chocolates when they are given mood-lifting cues (eating chocolate to feel better), but are less likely to try healthful coconut water when they are given mood-threatening cues (long surveys perceived as boring) (Andrade, 2005). Likewise, people select indulgent foods to maintain positive moods, but select nutritious foods when they have no need to maintain their moods (Labroo & Mukhopadhyay, 2009).

Similarly, people in negative affective states often try to repair their affect by consuming products that make them feel better (Mick & Demoss, 1990; Morris & Reilly, 1987). Indeed, sad individuals prefer “comfort foods” or indulgent foods to regulate their negative affect (Andrade & Cohen, 2007; Cornil & Chandon, 2013; Tice, Bratslavsky, & Baumeister, 2001; Wansink, Cheney & Chan, 2003), to avoid emotional stress (Polivy & Herman, 1999), or to escape adverse self-awareness (Heatherton & Baumeister, 1991). In sum, extant research demonstrates that people use food consumptions to regulate their affective states.

### *Social identity theory and consumption*

Social identity theory suggests that individuals form their self-concepts from their personal identities and from their actual or perceived memberships in social groups (Tajfel & Turner, 1979, 1986). The aspect of an identity that drives behavior depends on the situational cues (such as identity, social affiliation and status) of a particular identity (Markus & Kunda, 1986). People feel threats to their social identity when they are treated negatively or devalued because of their particular social identity (Major & O’Brien, 2005; Tajfel & Turner, 1986). Situational cues eliciting social identity threats can particularly and strongly impact traditionally stigmatized groups (Steele, Spencer, & Aronson, 2002). Western society tends to stigmatize overweight individuals (Carr & Friedman, 2005; Puhl & Heuer, 2010), which poses risks to their psychological and physical health by making them vulnerable to identity threat and compels them to find behaviors to resolve the threat (Steele et al., 2002). Do stigmatized overweight people always experience identity threat? What behaviors will they use to resolve such threats? Applying extant research that has studied how individuals make consumption choices in the presence or absence of others, next, we conceptualize when stigmatized overweight consumers are likely to make poor

food choices and when they are likely to make healthful food choices.

### *Public and private consumption*

The presence of others is well known to influence consumption decisions. When others are able to observe and evaluate consumers’ choices, consumers try to protect themselves from unflattering criticism: they try to impress others by choosing more variety (Ratner & Kahn, 2002), being less price sensitive (Wakefield & Inman, 2003), adopting high-tech products (Kulviwat, Bruner, & Al-Shuridah, 2009), and selecting light foods (Amiraian & Sobal, 2009; Pliner & Chaiken, 1990). Similarly, the presence of others often influences both quality and quantity of food consumed (Herman et al., 2003; McFerran et al., 2010; Wansink, 2004). For example, individuals eat more when they are with familiar people (De Castro & Brewer, 1992), and modify their eating in accordance with eating norms others have established (Engell, Kramer, Malafi, Salomon, & Leshner, 1996; McFerran et al., 2010). Furthermore, people often judge others in terms of femininity, attractiveness, intelligence, and health according to their food choices (Mooney & Lorenz, 1997; Oakes & Slotterback, 2004; Stein & Nemeroff, 1995). Overall, when their consumption is conspicuous, people strive to make positive impressions (Schlenker, 1980).

As the American rate of obesity increases, the stigma intensifies (Puhl & Heuer, 2009). American society tends to blame overweight individuals for causing their weight problems, for example, by eating too much and failing to exercise (Chambliss, Finley, & Blair, 2004; Klaczynski, Goold, & Mudry, 2004). Faced with identity threat from the stigmatization, overweight individuals may act to resolve the threat. Asian Americans have been shown to try to escape being stereotyped by changing their food consumption to less-healthy American foods to restore their American identity (Guendelman, Cheryan, & Monin, 2011). Consumers have also been shown to respond to social identity threats by avoiding identity-congruent products (e.g., Dalton & Huang, 2014; Puntoni, Sweldens, & Tavassoli, 2011; White & Argo, 2009; White, Argo, & Sengupta, 2012). Rising obesity rates are publicly linked with increasing consumption of calorie-dense foods (French, Story, & Jeffery, 2001; Hill, Wyatt, Reed, & Peters, 2003). Thus, unhealthy foods will remind overweight people of their stigmatized status. Hence, in public, they will avoid eating unhealthy foods to avoid stigmatized behavior. Thus we posit that overweight (versus normal-weight) individuals who are experiencing weight-based stigmatization are likely to eat more healthful foods in the presence of others to communicate their positive, non-stigmatized social identity. That is, they will engage in overeating healthful foods to repair their social identity.

Conversely, when stigmatized overweight individuals are in private contexts, they can act according to their own reasoning rather than according to external influences (Simonson & Nowlis, 2000), perhaps by focusing on ways to improve their negative feelings. Indeed, weight stigmatization often leads to

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