Advertising and the Influence on Self-Destructive Behaviors with an Emphasis on Childhood Obesity

By

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I. Introduction

i. Current State of Society

The fields of psychology and marketing have been overlapping for decades. Marketers have been using different aspects of psychology to reach their target markets on a more individualized basis for so long that it has become a known concept that more research is now done on the emotions and feelings that consumers have toward a particular brand rather than price in many instances. Companies such as Saatchi and Saatchi have made huge strides in marketing on ideas such as “Lovemarks,” or branding to the consumer based on their psychological feelings and emotional attachment towards a brand. The question arises: at what point does this relationship between psychological mindsets and marketing become too related and begin to have the opposite effect? When does it become clear that instead of marketers using psychology to reach the consumers on a more emotional basis, they are actually influencing the consumer’s psychological mindset to become addictive, obsessed, or even self-destructive? This argument seems to now be fought on both sides of the spectrum on a daily basis nowadays. Regulations are being put into place on many different aspects of marketing to try and prevent this from occurring, but the question still stands as to whether there truly is a direct relationship between marketing and the influence of self-destructive behaviors it can place on our society. From binge drinking to childhood obesity, this is an issue that can affect individuals of all ages. With society being bombarded with marketing at all hours of the day, this is an issue that would be difficult to escape and not necessarily one’s own choice for falling into, especially for children.

ii. Influx of Self-Destructive Behaviors

Self-destructive behavior can be thought of as acts or thoughts that are harmful to one’s self and that may become a way of acting and behaving on a regular basis. Many studies have been completed in order to determine why there has been such an increase in these self-destructive and risk-taking behaviors within the past few decades. One such study by Stephen Lyng reviews his personal concept of “edgework” that he uses as “…a classifying category for voluntary risk taking [that] allows us to view high-risk behavior as involving, most fundamentally, the problem of negotiating the boundary between chaos and order” (851-86). His “edgework” theory focused on his view of sky-diving and how each diver felt that they were participating in a death-defying activity, while being confident of crossing back over. This invincible mindset is another aspect of our society and the way we view risk. By attempting to discover and defy an individual’s physical limits, “edgeworkers” can be described as over-eaters, risk-adverse individuals, or even drug addicts. This mindset is spreading rapidly throughout society and our youth, causing self-destruction in aspects such as teenage binge-drinkers and childhood obesity.

Another contributing aspect of this nationwide self-destructive epidemic would be the economic recession that has been going on throughout the past few years. When people tend to be more stressed about money, jobs, and the economy; there is a good chance that they will choose other outlets in order to relieve some of their stress and anxiety. Many people fall into a depression when they realize that they are going to have money troubles or lose their job. This type of emotional baggage can lead to excessive binge drinking and over-eating in order to compensate for these sad feelings. “The Growing Epidemic of Binge Drinking in the United States” article mentioned that the problem with binge-drinking is worse than previously imagined. There are currently about 38 million U.S. adults binge-drinking approximately 4 times a month (“Stop Childhood Obesity”). A University of Miami study found that for every increase of 1% in the unemployment rate, there would be a 17% increase in cases of alcoholism or alcohol abuse (Szalavitz). It goes to show that despite people losing their jobs and decreasing their income, their mental state that they are in during unemployment will influence their desire to be self-destructive
and drink. As Pamela Babcock stated, “…today’s stresses are not conventional. Today’s workplace stress is generated in part by fear of the unknown, as opposed to the usual stress of deadlines or people conflict and so forth…” (Babcock). In order to fully understand why American society has had such an influx in self-destructive behaviors, one must look at all reasoning behind what may have brought us here. Susan Babcock also made a good point by quoting that, “Studies have shown that 18 percent of people under stress drink more, and half of people who are stressed tend to overeat. We also know that stress is a major cause of relapse for smoking and tobacco use,” (Babcock). With society falling more and more into harmful behaviors and the economy being in the negative state that it is currently in, it seems obvious as to why marketing companies may be focusing on unhealthy food items and alcohol advertisements for the people to see.

iii. Marketing in Relation to Increase in Self-Destructive Behaviors

The way in which researchers are going about studying whether marketing is playing a vital role in our society’s health and risk-aversion personalities vary in many different ways. A central view to examine is the novelty seeking and harm avoidance concept, which can also be thought of as the risky or risk-adverse concept. By the time an individual grows up to be a young adult they have more than likely heard both sides of a marketing campaign for many self-destructive behaviors. As Dr. Kragn stated it so well:

“Anti-substance use and anti-obesity messages do not occur in a vacuum. Young people at the age when they begin using drugs (and all of us in general) get both anti and pro-smoking, anti and pro-drinking, and anti and pro-drug messages every day. Our culture airwaves carry the message that smoking is sophisticated and associated with sexuality at the same time that they offer reports about it’s terrible effects on one’s health. Perhaps an even more intensely contradictory message is delivered via food ads- we hear how creamy and good tasting certain foods are, promising a positive experience, while, at the same time, the dieting, health, fitness, fashion and entertainment industries present us with images and information that being thin is both more desirable and healthy.”

With marketing providing each of these completely opposite messages at all hours of the day, it can get confusing for individuals to determine which is the better option for their own health and safety. Not many children will grow up having not seen all of the unhealthy food ads, although if so, they will only be a few years older and be bombarded by unhealthy fast-food messages. Individuals may begin to have conflicting inner feelings and emotions that cause them to be unable to decipher which option is truly the “right” choice to be made.

Another argument that has been put forth on multiple occasions for advertising is that advertising does not actually attempt to persuade or force a consumer to purchase a brand, but rather simply creates a preference for one brand over another and is unlikely to actually incite a purchase. Many advertisers feel that until there is a defining link that will provide direct causality between their advertising and the choices of society in harmful behaviors, there should be no ban put in place to block them from future marketing campaigns (Hoek, and Gendall 409-423). Known as Ehrenberg’s “Weak” Theory of Advertising, this theory puts forth the questions of whether or not advertising ever actually persuades the consumer. As the theory implies through the name, it states that advertising is a rather weak motivator towards influencing any consumer to actually purchase a product. Ehrenberg believed that consumers that do not already purchase the brand do not normally notice the advertising; therefore, the advertising will not actually persuade someone to switch, but rather reinforce a current consumer’s behavior to keep purchasing their product that they see advertised (Hoek, and Gendall 409-423). Through using a model with the components: awareness, trial, and reinforcement; Ehrenberg realized that advertising focused primarily on the reinforcement stage. The model, as seen below, was later updated by Barnard to include that the advertising could influence a slight “nudge” toward influencing a consumer’s behavior in purchasing the product (Hoek, and Gendall 409-423).
This concept of advertising and marketing directly relates to the arguments put forth by advertising companies that do not believe that their advertisements are playing a role in the influx of self-destructive behaviors among society. Although it is still possible that if a person has developed unhealthy habits, such as eating poorly, advertising will cease to change their mind into eating something of a more healthy option. For example, if an individual loves to eat a cheeseburger for every meal in a day, they are not going to start eating salad simply because they see it advertised as a “healthy” option. To support current regulations and implementations being put forth against advertising companies and unhealthy advertisement is the opposite of the “Weak” Theory, known as the “Strong” Theory. This theory proclaims that advertising can actually influence and persuade a consumer to physically purchase the brand being advertised. If this theory holds true, then it would provide evidence that companies, such as fast food restaurants, should be unable to advertise their obviously unhealthy options to the public for fear of causing someone to choose their product over a more healthy option. This advertising could then later be linked to the self-destructive habit of eating unhealthy, or worse, obesity.

II. Advertising and Childhood Obesity

To get a closer view on a major current epidemic facing the issues previously discussed, the following will now focus primarily on the childhood obesity epidemic among the American culture. According to the “Childhood Obesity Statistics and Trends” article, “between 16 and 33 percent of children and adolescents are obese… Over the past three decades, the childhood obesity rate has more than doubled for preschool children aged 6-11 years. At present, approximately nine million children over 6 years of age are considered obese,” (“Stop Childhood Obesity”). The issue of childhood obesity and efforts to stop this heart-wrenching crisis has been a main topic among society for quite a few years. A 2011 article mentioned that obesity rates for children have tripled throughout the years 1980 to 2008 (“National Center for Chronic Disease Prevention and Health Promotion”). When children have these overeating self-destructive behaviors instilled in them so young, they will more than likely continue this negative cycle into their adulthood. The key is to stop the cycle when they are young in order for them to continue to live a healthy life once they leave their youth. Advertising plays a major role in influencing children’s wants and actions. Many arguments have been put into play for the regulations that should or should not be placed on advertising to minors. For example, many people believe that it is not morally correct to advertise toys within fast-food kid’s meals because it will entice the children to wish to eat unhealthy in order to get a toy in return. Advertisers feel that they are simply creating a brand preference, rather than causing the distinct desire within the children for the unhealthy food (Hoek, and Gendall 409-423). Others believe that it is the parent’s responsibility to instill good eating habits for their children. If an advertisement comes on for fast-food, it is the parent’s role to regulate the amount of times a week that each child will eat the food and to teach their children good eating habits. Both of these
arguments have many different studies to back them, but for the sake of studying the advertising aspect of self-destructive behaviors, the following will focus on the effect that advertising has on the overall epidemic.

Many different laws and regulations have been put in place in order to fight this epidemic, but are they working? According to the Rudd Center, “In 1974, the advertising industry created the Children’s Advertising Review Unit (CARU), intended to provide industry self-regulation and perhaps to deflect criticism by advocates who continued to call for legislative restrictions,” (“Yale Rudd Center for Food Policy and Obesity”). While many people feel that these guidelines are plentiful in order to keep the advertising companies in check and obey certain guidelines to not lead children to eat non-nutritional food, there are plenty others that do not. As Janet Hoek and Philip Gendall from Massey University discuss, McDonald’s was once asked to use a non-branded character to promote healthy eating habits for young children. This way, the children would not relate fun characters solely to unhealthy food, but also to healthy food options. By having McDonald’s sponsor this character, it would show that they are still attempting to have the best interest of the children first, rather than only having the children gain horrible eating habits from their food and advertising. The character “Willie Munchright” would promote healthy eating sponsored by McDonald’s, yet not branded through the company (Hoek, and Gendall 409-423).

The arguments that are put forth against this relate back to Ehrenberg’s “Weak” Theory of Advertising as discussed earlier. This theory states that an advertising campaign is unlikely going to motivate someone to actually change his or her behavior. This campaign therefore, would not motivate a young child to not eat the unhealthy food if they were going to anyways, but rather provide a healthier child the confidence and security that they are making the right decision in the food they are eating.

Andrew Seidman wrote on July 15, 2011 about the new self-imposed regulations being put forth by major food and beverage producers in the U.S., such as Kraft, Kellogg and Nestle, Coca-Cola and PepsiCo (Seidman). With these new Children’s Food and Beverage Advertising Initiatives (CFBAI) being put in place by December 31, 2013, the companies will have to limit their advertising of products that have a certain amount of calories, sugar, sodium and saturated fat that are promoted to children. These regulations come after the Federal Trade Commission tried to instill more strict policies that would eliminate the advertising of almost all products that these companies were directing toward individuals under the age of 18. With these new regulations and the ability to see what has been done in the past, it is very interesting to note on whether there is a difference being seen. Are children becoming more self-conscious and less self-destructive in their eating habits? A few shortcomings may be the cause of why children are still becoming more obese each additional the year. Based from the “Rudd Report: Trends in Television Food Advertising: 2010 Update,” these limitations for the Children’s Food and Beverage Advertising Initiatives may be part of the direct cause for the conclusions that are below:

1. Participation in the CFBAI is voluntary.
2. Participation in the CFBAI does not limit advertising on general audience programming viewed by large numbers of children.
3. Participation in the CFBAI allows companies to advertise primarily unhealthy products and brands with no limitations.
4. CFBAI pledges do not limit food marketing to adolescents.

Despite these new rules being put into place and this issue becoming more in the limelight, it appears that society is remaining in their self-destructive ways across all categories; all the while, having advertising entice us to continue ("Rudd Report: Trends in Television Food Advertising to Young People 2010 Update").

III. Analysis

There seems to be a common theme that although self-destructive behaviors are examined and studied by psychologists and other researchers, there has not been enough of a direct explanation of risk taking behavior that focuses on the relationship between present marketing campaigns and the increase in societal risky behaviors. There is possibly a direct link to many
harmful behaviors occurring within our society that are not being fully examined in order to
determine a direct linkage of cause and lead to more regulation or a cure. As Stephen Lyng wrote
about the current situation, “A few studies incorporate social variables into the analysis but always
maintain a strict separation between the psychological and social realms” (851-86). Researchers
such as Lyng realized that these self-destructive and risk-taking behaviors should be researched and
linked to something other than a psychological reasoning and more of a sociological perspective;
yet they were looking at social aspects such as social structures, gender, and cultural differences
rather than the marketing and advertising plaguing our society on a daily basis (851-86). When
viewing childhood obesity with this perspective, there is much to be discovered that may lead to a
better solution for the problem.

Once doing research, it is easy to see the correlation between food and beverage advertising
and the connection that it has upon childhood obesity ratings. As the “Rudd Report: Trends in
Television Foods Advertising to Young People 2010 Update” mentioned, 2004 was the highest
spike for advertising companies in spending on unhealthy food and beverage ads concentrated
toward children ("Rudd Report: Trends in Television Food Advertising to Young People 2010
Update"). This number declined after this, until 2010, when the number escalated back up again.
Based upon the Division of Health and Nutrition Examination Surveys by Cynthia Ogden, Ph. D
and Margaret Carroll, M.S.P.H., it is easy to see an obvious correlation that there is a noticeable
spike in obesity among children and adolescents in the United States during years 2003-2004
(Ogden, and Carroll). The 2009 “Rudd Report: Public Perceptions of Food Marketing to Youth:
Results of the Rudd Center Public Opinion Poll, May 2008” mentioned that “African American
and Hispanic parents were more aware than other parents about the amount of food marketing their
children saw and where they saw it more frequently. They were also more concerned about the
negative impact that the media and food marketing has on their children” (15). With this type of
demographic separation, one would be lead to believe that the children within this demographic
would have a lower obesity level, since the parents are more concerned about the outcome of
watching television advertisements.

Unfortunately, according to the data provided by Cynthia Odgen, Ph.D., and Margaret
Carroll, M.S.P.H., Hispanic boys actually lead the average in obesity ratings for children since
1988 to 2008. Hispanic boys are in the lead with an overall average of 22.3%, while blacks fall into
second at 17.5%, and white boys following at only 16.9%. This data, as can be seen in the table
“Children Annual Obesity Ratings by Demographic” below, can lead one to ponder whether the
arguments that state it is the parent’s responsibility to monitor the type of television their children
watch are valid at all. If these parent’s are designated to be more aware and care more, why are their
children more obese? One would then be able to jump to the conclusion that their children are
watching the advertisements anyway. When the children are still able to get access to the
advertisements in their outside environment, the message will still affect them and influence their
behavior and eventually their health. This data puts an emphasis on the importance of advertising
companies to actually regulate what they offer society, rather than simply state that it is each
parent’s responsibility to monitor what their children eat or drink.
**TABLE 1: Children Annual Obesity Ratings by Demographic**

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<tbody>
<tr>
<td>Boys, All</td>
<td>11.3</td>
<td>14.8</td>
<td>17.6</td>
<td>18.2</td>
<td>18.2</td>
<td>18.2</td>
</tr>
<tr>
<td>Boys, Non-Hispanic white</td>
<td>11.6</td>
<td>11.8</td>
<td>16.6</td>
<td>19.1</td>
<td>15.5</td>
<td>16.7</td>
</tr>
<tr>
<td>Boys, Non-Hispanic black</td>
<td>10.7</td>
<td>21.1</td>
<td>16.7</td>
<td>18.4</td>
<td>18.4</td>
<td>19.8</td>
</tr>
<tr>
<td>Boys, Mexican American</td>
<td>14.1</td>
<td>27.2</td>
<td>21.8</td>
<td>18.3</td>
<td>25.6</td>
<td>26.8</td>
</tr>
<tr>
<td>Girls, All</td>
<td>9.7</td>
<td>14.8</td>
<td>15.7</td>
<td>16.4</td>
<td>17.3</td>
<td>16.8</td>
</tr>
<tr>
<td>Girls, Non-Hispanic white</td>
<td>8.9</td>
<td>11.0</td>
<td>13.7</td>
<td>15.4</td>
<td>13.5</td>
<td>14.5</td>
</tr>
<tr>
<td>Girls, Non-Hispanic black</td>
<td>16.3</td>
<td>25.2</td>
<td>22.0</td>
<td>25.4</td>
<td>29.8</td>
<td>29.2</td>
</tr>
<tr>
<td>Girls, Mexican American</td>
<td>13.4</td>
<td>19.3</td>
<td>20.3</td>
<td>14.1</td>
<td>25.4</td>
<td>17.4</td>
</tr>
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</table>

Based on Chart 1, “GRPs in Ages 2-11 yrs. And Category from 2002-2010” below, modeling data from the “Rudd Report: Trends in Television Food Advertising to Young People 2010 Update,” it is astonishing to see how advertising regulations are not making much of an impact on what is being advertised to young people. Although many people realize that fruit and vegetable companies do not spend their time and money advertising to young children, let alone advertising much at all, but to see the visual difference within advertising to those ages 2 to 11 years old makes the issue seem much worse. Candy, which is simply candy bars and other candy products (excluding chewing gum and breath mints) was being seen in 2010 almost double what it was being seen on the previous year of data, 2008. Fast food companies had more reach and frequency in 2010 than they have in at least 8 years with a total of 117,806 GRPs. The amount of reach for fruits and vegetables, which includes canned, fresh, and frozen fruits and vegetables, and salads is only 3% of what was being seen for fast food restaurants. With advertising striking children at such a young age and instilling such bad habits into them, it is obvious as to why childhood obesity has become such an epidemic and self-destructive habit within American culture.
It can be seen that advertising companies are not changing their strategy in order to help the efforts against childhood obesity. The “Rudd Report: Public Perceptions of Food Marketing to Youth, Results of the Rudd Center Public Opinion Poll, May 2008” gives a better view of specifically how often children really do see these advertisements (Brownell, and Schwartz). It was previously shown how much reach the companies are achieving to get their product seen by young children and all audiences, but now it is time to take a look at how often parents are noticing their children actually viewing the ads. As Chart 2, “Frequency Adults Report (their) Children Have Seen or Heard Food and Beverage Marketing in Past Month by Age Group,” below models, as children get older they begin seeing the advertisements more often. This can be good and bad. Young children do not know the difference between what is healthy and what is not healthy; therefore, they are easier to persuade using cartoon characters to model an unhealthy brand. Children ages 12 to 17 are more capable of distinguishing what may be healthy from not, but they are also more prone to developing bad habits that will follow them into their adulthood. Once again, it appears that parents notice their children watching fast food advertisements more than any other category. This makes sense due to the fact that fast food companies are spending such a significant amount of money to reach this target market. Children ages 6 to 11 saw an advertisement for soda 4.98, or about one to three times per day. Ice cream for all ages seemed to be the only category that did not exceed being seen two to six times a week by children. These numbers confirm the fact that children are actually seeing these ads that are being put forth by the food and beverage companies, but they are not simply seeing them every so often, they are seeing them multiple times a day.
Due to the argument that advertising is not the direct issue and that the true argument is that parents should be those to monitor what their children are watching and eating, the following Chart 3, “Level of Concern with the Effect of Media on Children from Parent’s Perspective”, gives another perspective of how the adults are viewing the severity of the situation at hand. Based on the information from the “Rudd Report: Public Perceptions of Food Marketing to Youth: Results of the Rudd Center Public Opinion Poll, May 2008,” the chart gives an overall view of a few of the main categories of concern for parents based upon the age group of their children (Brownell, and Schwartz). The scale was based on a 1 to 10, with 1 being that they do not agree at all that the media is affecting their children within the category and a 10 being that they strongly agree that the media is having an influence on their child in that particular segment. It is not surprising to find that parents with children ages 12 to 17 are more concerned about violence within the media than any other age group. As children get older, the concern for media topics such as alcohol and tobacco use become more of an issue because it is more likely that the 12 to 17 age group can begin to use these products. The concern about food marketing to kids has the closest comparison for parents of children ages 2 to 5 and 12 to 17. The difference in the average score for these two age groups is only .03, which is .09 points closer than any other segment. This goes on to prove that parents of all ages have a concern about the food advertisements that their children are seeing. Even at a young age, such as 2 to 5 year olds, these parents have the notion that their children are being affected by the marketing that they are
seeing for unhealthy foods. This is causing these children to start a self-destructive behavior at such a young age that it is hard to terminate as an adult. When seeing the level of concern that parents are having for the multitude of age groups about food marketing campaigns designated to children combined with the previous numbers of the advertising views that are reaching children, the issue at hand becomes much more severe and in need of a solution.

IV. Results

These bad habits being formed within children are not only important for the health of those under 18, but also are affecting those individuals once they grow into adults. Advertising unhealthy food to children is a moral issue that is in the process of being regulated, but what about the issue of when these children grow into adults and keep their bad habits? If children are able to grow up thinking that fast food and candy are good options as a meal, then as adults they will keep this self-destructive behaviors and remain obese. Health problems will only increase, causing more issues for the individual as well as society. Over-eating is a common self-destructive behavior that has been plaguing many citizens for decades. Based upon the “Rudd Report: Trends in Television Food Advertising to Young People 2010 Update,” adults ages 18 to 49 now see up to 7,100 ads per year for food and beverages. This has increased by approximately 1,700 advertisements since 2002. Although there have been positive trends within this spike in advertising items such as fruits and healthy beverages, there still remains the overall fear that food and beverage advertising is going too far in causing self-destructive behaviors within our society. As the “CDC National Obesity Trends” states, “During the past 20 years, there has been a dramatic increase in obesity in the United States and rates remain high. In 2010, no state had a prevalence of obesity less than 20%. Thirty-six states had a prevalence of 25% or more; 12 of these states (Alabama, Arkansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Oklahoma, South Carolina, Tennessee, Texas, and West Virginia) had a prevalence of 30% or more,” proving that this is an epidemic spreading through the children and entire adult population as well ("Centers for Disease Control and Prevention"). There are approximately 12.5 million children ages 2 to 19 years old that are considered obese within the
United States. That attributes to around 17% of U.S. children while 35.7% of U.S. adults are considered obese ("Centers for Disease Control and Prevention"). If the cycle does not stop in the near future, the 37.5% will be rising dramatically once these children that are learning bad eating habits being to step into adulthood.

People can choose to believe that advertising is “weak”, or that there is no significant impact on a person’s attitude toward a product other than brand preference, but the numbers shown above can prove as an argument to that point. Many studies have been completed to provide evidence that advertising of unhealthy food and beverages for children are negative and will bring about bad consequences for the fight against childhood obesity, but not as many studies have been done to provide evidence that advertising can effect multiple self-destructive behaviors. By noting that the United States is having such a hard time with adult obesity and seeing how the numbers for children viewing unhealthy advertisements is increasing into their older years, it is obviously significant that advertising can play a vital role in the actions and behaviors that people choose to do. The regulations being put into place are clearly not making a grand impact on negatively influencing children to be unhealthy in their food choices. Regulations are also currently not blocking children from seeing the advertisements for unhealthy options. If the relation to childhood obesity is clearly seen, then the “weak” theory can be somewhat abandoned and applied to alternate self-destructive behaviors such as binge-drinking and adult over-eating. There needs to be more regulations and more research done in order to solve this cycle of issues that arise from advertisements motivating viewers to participate in self-destructive behaviors.
Works Cited


