

Children, obesity and associated avoidable chronic diseases project

Evaluation study

Abridged report

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Introduction

On 1 March 2004, the European Heart Network (EHN) started a 32-month project on '*Children, obesity and associated avoidable chronic diseases*'. The aim of this project is to contribute to reducing the obesity epidemic and associated avoidable chronic diseases such as cardiovascular diseases and diabetes among children and young people. The evaluation of the project '*Children, obesity and associated avoidable chronic diseases*' focuses primarily on whether the project will lead to increased awareness of the impact of food marketing and increased reported activity in combating the negative effects on current consumption patterns.

In order to evaluate whether the project is leading to increased awareness of the impact of food marketing on current consumption patterns of children and young people, ResCon Research & Consultancy completed two survey studies. During the period October through November 2004, 181 organisations in 18 countries completed a base-line (T0) survey. This survey was repeated during the period November 2005 through March 2006 (T1) and covered representatives of 164 organisations in 16 countries. National coordinators distributed the questionnaires. The questionnaires were completed by national heart foundations and allied organisations.

This document reports on the changes in the respondents' perceptions of awareness and activity within their countries that have taken place during the last year. For this purpose, we compared the T0 (2004) and T1 (2005) surveys to determine changes in answers the following research questions:

1. How do the national heart foundations and allied organisations in this study perceive the impact of marketing and media on current consumption patterns of children and young people?
2. To what extent do organisations (alliances) believe that they are informed about this subject?
3. To what extent and how are national heart foundations and allied organisations involved in activities directed at combating the negative effects of food marketing on consumption patterns of children and young people and what was the contribution of the EHN project?
4. What priority is given to this problem within the organisations' policies?
5. To what extent do organisations (national heart foundation and selected allied organisations) have concrete action plans tackling the obesity problem and what do these action plans entail?
6. What kind of, and to what extent do, barriers hinder the organisations from combating the negative effects of food marketing?
7. Which project factors contribute to the success of these actions?

8. What are the opinions of the organisations in this study toward the way(s) the obesity problem is/should be tackled?

Before going into a description of the main outcomes of that comparison, a number of limitations of the study need to be addressed. All of the data were self-reported by representatives of organisations and are, therefore, subject to memory and recording errors. Furthermore, for data collection, the researchers were dependent on the willingness of organisations to contribute in this study. Organisations that participated in the study might have been more involved and interested in child obesity and associated avoidable chronic diseases than organisations that did not participate.

Moreover, this study should not be interpreted as an 'effect-measurement' study, but rather as a 'mapping' study. It gives an impression of the state-of-affairs and shows trends. There are several reasons for this limitation. First, the study design did not allow 'non-project' related effects to be determined. In other words, the changes between T0 and T1 cannot be attributed to the project alone. Second, the number of completed questionnaires per country differed considerably. The number of questionnaires per country affects the mean values of the outcome variables and their standard errors. Because this number is small for some countries, statistically significant changes could not be shown.

Methods

The European Heart Network is a Brussels-based alliance of heart foundations and likeminded non-governmental organisations throughout Europe, with member organisations in 26 countries. Twenty national heart foundations agreed to participate in the Children and Obesity project, and function as national coordinator in this project, responsible for coordinating the tasks at the national level. In September 2004 (T0), the director of EHN sent a letter to these national coordinators requesting them to cooperate with this survey. Two questionnaires accompanied the letter. The national coordinators were asked to distribute the questionnaires and, if necessary, have them translated into their respective languages before distribution.

A comparable recruitment procedure was carried out one year later (T1). In October 2005, the national coordinators that participated in the T0 survey were requested to cooperate with the T1 survey and to distribute questionnaires to the same organisations which participated in the T0 study. Furthermore, there was also an option for those national coordinators, who so requested, to ask organisations in their respective countries that had not been involved in the 2004 study to participate in the 2005 study. Three questionnaires accompanied the request.

The qualitative questionnaire

The qualitative questionnaire was meant to collect both qualitative and quantitative data using a closed and an open answer structure. It was to be completed by the national coordinators and by one or two organisations they work with in their countries.

The quantitative questionnaire

The quantitative questionnaire was meant to collect quantitative data only, using a closed answer structure. It was to be completed by representatives of organisations and other individuals with whom the national coordinator works. The national coordinator decided which organisations in their countries to include in the survey.

The quantitative questionnaire for 'new' organisations

A quantitative questionnaire was developed for the new organisations that did not participate in the T0 evaluation. The questionnaire was similar to the above-mentioned quantitative, but questions referring to base-line comparisons were left out or revised.

Quantitative analyses of the data consisted of descriptive statistical analysis, such as frequencies, means and one-way analysis of variance (ANOVA). Analyses were carried out at pan-European, regional and national levels. We distinguished between three regions: northern Europe, central Europe and southern Europe.

Results and discussion

Thirty-four 'new' organisations that had not participated in the T0 study did participate in the T1 study. Of all of the respondents who participated in the T1 study, 62.1% indicated that their organisation is working in the public sector, 30.2% in the private sector and 7.8% in both sectors. This distribution is about the same as was found in the T0 study.

At T1, several organisations that had participated in the T0 study had dropped out. To determine if 'prior knowledge' might explain this dropout, we compared the T0 scores of organisations which participated in both the T0 and T1 study with those of the organisations which participated in the T0 study only. Analyses, however, showed no significant differences and we conclude that dropout was not strongly related to prior knowledge or awareness.

Question 1: perceived impact of marketing

Comparison of the T0 and T1 data suggests that the perception of the negative impact of food marketing on consumption patterns has increased. Especially awareness of the impact of Internet advertisements has increased substantially. Small increases were found in awareness of the impact of food labelling and the

impact of education at school. We recommend paying more attention to these awareness levels.

Question 2: level of information

The level of information, as perceived by the respondents, seems to have increased as well. About one third of the respondents indicated that the level of information in their organisation had increased as compared with T0. We found, however, a wide range of scores at the country level. The respondents' knowledge about on-going activities in other European countries increased but it scored lower than other items.

Question 3: activities

At T1, respondents indicated that they were only slightly more active, compared with T0, in combating the negative impact of food marketing on consumption patterns of children. A time span of only one year between T0 and T1 may, however, be too short to measure significant changes in activity. Of the allied organisations (relatively less informed organisations), 61% reported to be active in tackling the negative impact of food marketing at T1, compared to 57% at T0. Most organisations in the T0 study as well as in the T1 study assessed their contribution highest in giving information to parents and/or children to help them make healthy food choices and to promote physical activity. They assessed their contribution lowest in entering into agreements with the food (marketing) industry. Comparable figures were found among new organisations. In general, the countries are more active in combating the negative effects of food marketing compared to October 2004.

At T1, Southern European country scores on activity were relatively higher than those of Northern and Central European countries. Organisations that did not participate in the T1 study scored a higher activity level at T0 than organisations which participated in the T0 and T1 studies. Furthermore, most respondents perceived an increase in both the number and the kind of activities.

According to the participants, the EHN project especially stimulates organisations to give information to parents and/or children to help them make healthy food choices, and it stimulates organisations to promote physical activity. The contribution of the project scored lowest with respect to entering into agreements with the food (marketing) industry. We, therefore, recommend to strengthening this activity as it may contribute to solving the marketing and media problem. Furthermore, the project seems to have positively contributed to initiatives to increase awareness of the impact of food marketing on current consumption patterns of children and young people.

Question 4: priority

The priority given to the obesity problem increased compared to T0. Also, the number of organisations which have a policy statement increased in most countries compared to T0. Policy plans were mainly focused on promoting healthy nutrition.

Question 5: action plans

At T1, 11 organisations from 8 countries reported to carry out concrete actions tackling the obesity problem of young children. Furthermore, 10 organisations from 8 countries reported that the current interest and activity in projects and initiatives regarding Children and Obesity have increased compared to the level at T0. New organisations scored lower on giving priority to the obesity problem than organisations that participated at T0 and T1.

Question 6: barriers

The project seems to have contributed to a decline in the perceived barriers that are met in carrying out activities aimed at combating the negative effects of food marketing. Especially the barriers 'lack of cooperation between national organisations', 'lack of expertise' and 'lack of material resources' have declined. Some barriers, however, have increased: 'the lack of human resources' and 'lack of financial resources'. Further encouragement to overcome these barriers, therefore, is needed.

Question 7: success factors

Opinions of factors that will contribute to combating the negative effects of, especially, food marketing include:

- More collaboration between (alliance) organisations
- More attention to, and working with, the media that is sympathetic to the subject
- Raising more funds and financial support.

We recommend giving priority to these activities in future initiatives.

Question 8: ways to tackle obesity

Respondents' opinions towards ways to tackle the obesity problem among children and young people have not changed significantly during the year. Nearly all respondents share the opinion that more efficient food advertising and food promotion legislation should be introduced. However, opinions on how to tackle the negative effects of food marketing vary considerably.

Most representatives have the opinion that their (national) government does not protect children from marketing of energy-dense, low nutrient foods. We recommend encouraging national governments to get involved.

Final conclusions and recommendations

The main purpose of this study was to determine if the project is leading to the expected results. Given the limitations in study design, it is not possible to present 'hard' figures that demonstrate that the changes measured one-year after the start of the project can be attributed to the project. Furthermore, substantial shifts in awareness, knowledge and, especially, activities need time to develop, and we believe that one year is rather short to expect to see significant shifts. For these reasons, we consider our findings to suggest trends in the state-of affairs.

Nevertheless, based on those trends seen in our comparison of the 2004 and 2005 data, as well as the respondents' perceived contributions of the project, we conclude that the project is, indeed, leading to the expected results and, therefore, deserves continuation.