

University of Wollongong

## Research Online

---

Faculty of Health and Behavioural Sciences -  
Papers (Archive)

Faculty of Science, Medicine and Health

---

2005

### Motivational factors in the food buying behaviour of parents of pre-school age children: a projective technique study

Gary Noble

*University of Wollongong*, [gnoble@uow.edu.au](mailto:gnoble@uow.edu.au)

Sandra C. Jones

*University of Wollongong*, [sandraj@uow.edu.au](mailto:sandraj@uow.edu.au)

Danielle McVie

[dlidgard@uow.edu.au](mailto:dlidgard@uow.edu.au)

Follow this and additional works at: <https://ro.uow.edu.au/hbspapers>



Part of the [Arts and Humanities Commons](#), [Life Sciences Commons](#), [Medicine and Health Sciences Commons](#), and the [Social and Behavioral Sciences Commons](#)

---

#### Recommended Citation

Noble, Gary; Jones, Sandra C.; and McVie, Danielle: Motivational factors in the food buying behaviour of parents of pre-school age children: a projective technique study 2005.  
<https://ro.uow.edu.au/hbspapers/70>

Research Online is the open access institutional repository for the University of Wollongong. For further information contact the UOW Library: [research-pubs@uow.edu.au](mailto:research-pubs@uow.edu.au)

---

## Motivational factors in the food buying behaviour of parents of pre-school age children: a projective technique study

### Abstract

There is growing concern over childhood obesity levels around the world with many overweight children developing into obese adults. Research shows that the food choices of young children are determined largely by parents and that many parents are aware of what constitutes 'healthy' food yet continue to purchase 'unhealthy' food for their children's consumption. This study explores this apparent paradox by identifying the motivations of parents of pre-school children in the purchase of both 'healthy' and 'unhealthy' food in the context of a supermarket shopping experience. Data was collected from 116 respondents using projective story and photograph techniques and then coded and analysed using the constant comparative method. What this study labels as 'good parenting' emerged as the main motivational force leading to the purchase of healthy food. In contrast, this study suggests the purchase of unhealthy "treats" or "bribes" is explained through the concept of 'expediency'. Both good parenting and expediency have a number of dimensions that are capable of explaining variations in the food decisions of individual respondents in this study.

### Disciplines

Arts and Humanities | Life Sciences | Medicine and Health Sciences | Social and Behavioral Sciences

### Publication Details

This conference paper was originally published as Noble, G, Jones, SC and McVie, D, Motivational factors in the food buying behaviour of parents of pre-school age children: a projective technique study, in Purchase, S (ed), Proceedings for the ANZMAC Conference, University of Western Australia, 2005.

## **Motivational Factors In The Food Buying Behaviour Of Parents Of Pre-School Age Children: A Projective Technique Study.**

Gary Noble, Centre for Social Marketing Research, University of Wollongong  
Sandra Jones, Danielle McVie, Centre for Health Behaviour & Communication Research,  
University of Wollongong

### **Abstract**

There is growing concern over childhood obesity levels around the world with many overweight children developing into obese adults. Research shows that the food choices of young children are determined largely by parents and that many parents are aware of what constitutes 'healthy' food yet continue to purchase 'unhealthy' food for their children's consumption. This study explores this apparent paradox by identifying the motivations of parents of pre-school children in the purchase of both 'healthy' and 'unhealthy' food in the context of a supermarket shopping experience.

Data was collected from 116 respondents using projective story and photograph techniques and then coded and analysed using the constant comparative method. What this study labels as 'good parenting' emerged as the main motivational force leading to the purchase of healthy food. In contrast, this study suggests the purchase of unhealthy "treats" or "bribes" is explained through the concept of 'expediency'. Both good parenting and expediency have a number of dimensions that are capable of explaining variations in the food decisions of individual respondents in this study.

Implications of the study's findings are discussed in the context of the Theory of Reasoned Action (TRA) and an identification of the salient beliefs that may underlie the attitudes and behaviour of some parents. The paper concludes by suggesting that social marketing campaigns targeted at the belief structures of parents may have a far greater impact on the current childhood obesity problem than just nutritional education programs.

Keywords: motivational factors, childhood obesity, projective techniques.

### **Introduction**

Childhood obesity is an area of growing concern around the world. In Australia it is estimated that 5- 6% of children are obese and 14-18% are overweight (Booth, Wake, Armstrong, Chey, Hesketh and Mathur, 2001). Food choice is regarded as a major factor influencing children's weight issues (Parry, 2004). Studies (e.g., Campbell and Crawford, 2001) indicate that the food choices of pre-adolescent children are largely determined by parents. Various studies into parental food choice report a number of factors as having influence. These include; parenting style (Morton, Santich and Worsley, 1996), time pressures (Mothersbaugh, Herrmann and Warland, 1993) and nutrition knowledge (Variyam, Blaylock, Lin, Ralston and Smallwood, 1999). Two findings from previous studies that are of direct interest to this study are: mothers feed themselves more healthy foods than they feed their children whilst reporting that health is an important motivator of food choice for their children (St John Alderson and Ogden, 1999): and, that the majority of parents know which foods are 'good' and which are 'bad' for their children (Variyam, 2001).

Based on the foregoing two findings a curious paradox would appear to exist in the food decisions of some parents. That is, why would parents who are aware of what represents 'healthy' food regularly purchase and allow their children to eat 'unhealthy' food? This study explores this apparent paradox by identifying parent's motives for the purchase of both 'healthy' and 'unhealthy' food for their pre-school age children in the context of a supermarket shopping experience. Identifying these motives has significant implications for health education and social marketing campaigns in the area of childhood obesity as they provide a basis on which to build campaigns designed to change parent's food buying behaviour.

### **Methodology**

The use of projective techniques rose to prominence in the late 1950's and early 1960's following the seminal work of Haire (1950) but decreased in the 1970's and 80's. However, it is again gaining favour amongst academics and practitioners (Neal, Quester and Hawkins, 2004). Considering the aim of this study – to identify and explore the motivations of parents of pre-school children in the purchase of both 'healthy' and 'unhealthy' food – the use of projective techniques appears well justified. A second reason for the use of projective techniques in this study is the issue of social desirability bias. A number of previous food choice studies (e.g., Hebert, Clemow, Pbert, Ockene and Ockene 1995) have identified this bias as a problem in this area of research. The use of projective techniques allows respondents to project their feelings, attitudes or motivations into some form of unstructured stimulus bypassing their own defence mechanisms therefore lowering the likelihood of social desirability bias (Day 1989).

As this study focussed on the food decisions of parents of pre-school aged children (3-5 year olds), that is, the group where parents have the greatest influence, seven child-care centres in a large regional city of New South Wales acted as data collection sites. Data was collected from 116 respondents. All respondents had at least one child under the age of six, the mean age of respondents was 35.7 years, 80% of respondents had post-secondary education and 88.5% of respondents were female.

Both picture response and story response techniques were used to collect data with four separate groups of randomly assigned respondents. In Group I (n = 35), respondents were shown a photograph of a mother shopping with her children purchasing carrots and apples in the fruit and vegetable section of a supermarket. In Group II (n = 26) respondents were shown a photograph of the same mother and children, in the same supermarket, purchasing chocolate bars in the confectionery aisle of the supermarket. In Group III (n = 29), respondents were given a story to read about a mother and her two children which described an after school shopping trip in which the mother purchased an apple, a carrot and milk for the children to snack on. In Group IV (n = 26), respondents were given the same story to read except for the fact the mother purchased a 'Mars Bar' and a 'Pop Top' for the children. In all four groups, respondents were asked the same two questions: 1) what do you think the woman in this scenario/photo is thinking and feeling, and 2) what do you think motivates the woman in this scenario/photo? Data was gathered in the form of respondents written responses to these two questions. Responses ranged from a few lines to several paragraphs.

Data was coded and analysed using the constant comparative method (Strauss and Corbin, 1998). This method involves the inductive coding of data through the comparison of all

events, occurrences or social interactions identified within the data in terms of similarities, differences and general patterns. Inductive coding requires fracturing the data into coded units then progressively and systematically grouping data units that show similarities and relationships. In this study, responses from all four groups were coded through a comparison for similarities and differences between the ‘healthy’ (Groups I and III) and ‘unhealthy’ (Groups II and IV) buying behaviour. For the purpose of this paper the notion of “conceptual ordering” (Strauss and Corbin, 1998, p. 19) has been adopted. Conceptual ordering refers to the organisation of data into discrete themes according to their properties and/or dimensions, and then using description to explicate those themes.

## Research Findings

Before elaborating on the key findings of this study it is of value to note that respondents in this study showed no difficulty in recognising the different nutritional value of the food and drinks shown in the two photographs and stories and labelling them as such through the frequent use of the words “healthy and “unhealthy”. This finding alone supports previous studies (e.g., Variyam, 2001) that have suggested most parents recognise, at a fundamental level at least, what types of foods are ‘good’ and ‘bad’.

### Healthy Food Choice – ‘Good Parenting’

In this study, respondents associated the decision to purchase ‘healthy’ food with what is labelled here as ‘good parenting’. The concept of good parenting is encapsulated by the following quote “a desire to raise happy, healthy children”. Good parenting can be conceptualised as having four main dimensions, namely:

Sense of duty – some respondents regarded the purchase of healthy food as “the right thing to do”. That is, it was seen as a responsibility and this was evidenced in the frequent use of phrases such as “this woman is motivated by a strong sense of responsibility” and “it is her responsibility to buy the family food and ensure that her family eat well”.

A parent’s affection for their children – the love and affection by a parent for their children was seen by many respondents as a motivating force in the purchase of healthy food.

Respondents used terms such as the “love of her children” to describe what motivated the mother in both the healthy photograph and story.

Quality time – many respondents associated the purchase of healthy food with having quality time with the children. The woman in the healthy photograph and story was often described as either thinking or being motivated by “spending quality time with her children”. In turn, quality time was described by one respondent as a feeling of being “fulfilled and content”.

Education – the desire to teach children what represents “healthy eating” was seen as a motivating factor by some respondents who associated the purchase of healthy food with, to quote one respondent, the desire to “instil healthy eating habits”.

In this study, good parenting equates with a belief that healthy food leads to healthy children and this in turn can provide parents with a sense of fulfilment and is a reflection of their love for their children. However, of interest, good parenting also has dimensions that reflect a need to conform to perceived social norms. The dimensions of ‘sense of duty’ and ‘education’ suggests that some respondents consider a parent’s purchase of healthy food for their children, along with the education of these children on healthy eating habits, is a social obligation of parents. In other words, social pressure may be a strong factor in motivating some parents in the purchase of healthy food for their children.

### **Unhealthy Food Choice – ‘Expediency’**

What is labelled in this study ‘expediency’ was identified as the main motivational force underlying the purchase of unhealthy foods. Expediency can be described as the force that leads some parents to purchase “treats” or “bribes” in their effort to overcome feelings of guilt and/or avoid conflict with their children whilst shopping. Expediency appears to have four main dimensions, namely:

Keeping peace – a desire to avoid conflict was seen as a major factor in the purchase of unhealthy food products in a supermarket context. Respondents used phrases such as “anything to keep them quiet”, “she’s poised to do battle” or “anticipating a conflict” to describe what the mother was feeling and may be motivating her actions. The purchase of a Mars bar, a Pop Top or other similar product was seen as a “treat” or a “bribe” capable of “placating” the children.

All these chores – many respondents described the mother as “feeling tired” and as having “so little time” to do the “chores” of which shopping was just one. As a result respondents suggested the mother was thinking that she had to “get her shopping done without any problems”. An expedient way to achieve this was through the use of lollies etc to “bribe or control the children”.

Feeling guilty – the mother was often described as a working mother and as feeling “guilty”, not necessarily for giving them what was labelled as “junk food” but rather for “spending time working” and being away from the children. As a result, the motive for the purchase of unhealthy food was described in terms of a “treat” to compensate for her absence, to quote one respondent “she wants to make her kids happy and feels that junk food and Disney videos do the trick”.

In control – some respondents suggested that the woman in the photograph and story had a strong “need to be in control” and the use of lollies etc allowed her to keep control over the children whilst in the supermarket. As one respondent stated “she is beginning to tense up as her two toddlers begin to exert their willpower”.

The dimensions of expediency suggest that respondents recognise that the purchase of unhealthy food for their children may not be the most appropriate behaviour or in the best interests of their children. However, respondents appear capable of justifying and overcoming their concerns at this behaviour on grounds such as it is a “treat” that, as one respondent stated, “all mums do once in a while”. That is, the purchase of unhealthy food for their children is not an entrenched and regular behaviour but rather an “occasional” action that may overcome a parent’s sense of guilt and/or need to remain in control over their children and avoid confrontational situations with their children. It would appear from this finding that some parent’s may experience a sense of cognitive dissonance (Festinger 1957) that they overcome by establishing a belief that the purchase of unhealthy food is acceptable as a treat or a bribe.

### **Discussion**

Respondents in this study showed no difficulty in recognising the nutritional implications of providing their children healthy and unhealthy food as well as what represents these two categories of food. Therefore, a lack of nutritional knowledge cannot be used to explain why some parents purchase unhealthy food for their young children. This finding supports the view of other researchers (e.g., Variyam, 2001) that nutrition knowledge alone will not address the issue of weight control in children. Knowledge is often insufficient to achieve behavioural change because knowledge is not related to the underlying motivator (Donovan

and Henley, 2003). Therefore, health promotion and/or social marketing campaigns that understand and address the motivations for some parent's food choice (i.e. the notions of 'good parenting' and 'expediency') are more likely to have an impact on the obesity problem than just public education programs that focus on informing parents of the nutritional value of different foods.

The finding that a shortage of time ('all these chores') is a factor in the purchase of unhealthy food is in line with other studies (e.g., Townsend, 1991, Videon and Manning, 2003) that suggest a perceived shortage of time is largely responsible for the increasing intake of convenience foods and a decline in the time spent preparing family meals. However, this study suggests the issue is more complex than just a shortage of time; it also involves issues such as guilt and conflict avoidance. That is, they lead to actions that are designed to solve problems (a lack of time and/or guilt) or avoid future problems (conflict avoidance).

The findings from this study can be considered in the context of the Theory of Reasoned Action (TRA). TRA suggests behaviour is directly influenced by a person's behavioural intention, in turn, intentions to act are preceded by a person's attitude towards the behaviour and associated subjective norms, underlying both a person's attitude and subjective norms are beliefs (Ajzen and Fishbein 1980). In other words, beliefs "ultimately determine intentions and behaviour" (Ajzen and Fishbein 1980, p. 62). The concepts of good parenting and expediency provide insights into the salient beliefs of respondents in this study. Respondents associate the purchase of healthy food with conforming to the social norms of educating and caring for a child and the belief that the purchase of healthy food equates with affection and quality time with a child. In contrast, respondents, associate the purchase of unhealthy food with the belief that it is acceptable as a "treat" or a "bribe" to reduce conflict and/or feelings of guilt. The identification of these salient beliefs could act as the basis for a quantitative study following the principles of TRA and/or social marketing campaigns targeted at the belief structures of some parents.

### **Limitations and Conclusion**

It is recognised that there are limitations to this study. For example, the findings only apply to the parents surveyed at the seven child care centres and cannot be generalised. Therefore, before any effort is made in developing either negative or positive appeals based on the results of this study further research is required. The respondents in this study may not be representative of all parents in all situations. The respondents in this study were parents with children attending day care centres, most likely working mothers, with the majority having a post-secondary education. Future research could focus on extending the study to situations that involve a non-working parent as well as parents from a range of socio-economic backgrounds and in different contexts to that of a supermarket shopping experience.

In conclusion, this study has attempted to identify the motivations of parents of pre-school age children in the purchase of healthy and unhealthy food in the context of a shopping experience. The analysis of the data suggests that what has been labelled as 'good parenting' is the main motivational force leading to the purchase of healthy food. In contrast, this study suggests that the concept of 'expediency' describes the motivating force in the purchase of 'unhealthy' "treats" or "bribes" whilst shopping. This paper has then gone on and discussed the implications of these findings in the context of the Theory of Reasoned Action and the salient beliefs that may underlie the attitudes and behaviour of some parents. Moreover, it

argues that social marketing campaigns are more likely to result in a desired behavioural change and have a far greater impact on the current childhood obesity problem than just nutritional education programs.

## References

- Ajzen, I., Fishbein, M., 1980. *Understanding Attitudes and Predicting Social Behaviour*, Prentice Hall, Upper Saddle River: N.J.
- Booth, M. L., Wake, M., Armstrong, T., Chey, T., Hesketh, K., Mathur, S., 2001. The epidemiology of overweight and obesity among Australian children and adolescents. *Australian and New Zealand Journal of Public Health* 25 (2), 162-69.
- Campbell, K., Crawford., 2001. Family food environments as determinants of pre-school aged children's eating behaviours: Implications for obesity prevention policy. A Review. *Australian Journal of Nutrition and Dietetics* 58, 19-25.
- Day, E., 1989. Share of heart: What is it and how can they be measured? *The Journal of Consumer Marketing* 6 (1), 5-12.
- Donovan, R., Henley, N., 2003. *Social Marketing. Principles and Practice*, IP Communications, Melbourne.
- Festinger, L., 1957. *A Theory of Cognitive Dissonance*, Stanford University Press: Stanford
- Haire, M., 1950. Projective techniques in marketing research. *Journal of Marketing* 14 (5), 649-656.
- Hebert, J.R., Clemow, L., Pbert, L., Ockene, I.S., Ockene, J.K., 1995. Social desirability bias in dietary self-report may compromise the validity of dietary intake measures. *International Journal of Epidemiology* 24 (2), 389-398.
- Morton, H., Santich., B., Worsley, A., 1996. Mother's perspectives on the eating habits of two-year-olds: A pilot study. *Australian Journal of Nutrition and Dietetics* 53 (3), 100-05.
- Mothersbaugh, D. L., Herrmann, R.O., Warland, R.H., 1993. Perceived time pressure and recommended dietary practices: The moderating effect of knowledge of nutrition. *The Journal of Consumer Affairs* 27 (1), 106-27.
- Neal, C., Quester, P., Hawkins, D., 2004. *Consumer Behaviour: Implications for Marketing Strategy*, McGraw-Hill Australia, Sydney.
- Parry, C., 2004. Are parents behind the fat kids? *Marketing Week* 27 (33), 32-33.
- St John Alderson, T., Ogden, J., 1999. What do mother's feed their children and why? *Health Education Research* 14 (6), 717-27.
- Strauss, A., Corbin, J., 1998. *Basics of Qualitative Research: Techniques and Procedures for Developing Grounded Theory*, Sage, Thousand Oaks, Ca.



Townsend, B., 1991. Consumers don't always do what they say. *American Demographics* 13 (4), 12-14.

Variyam, J. N., 2001. Overweight children: Is parental nutrition knowledge a factor? *Food Review* 24 (2), 18-22.

Variyam, J. N., Blaylock, J., Lin, B., Ralston, K., Smallwood, D., 1999. Mother's nutritional knowledge and children's dietary intakes. *American Journal of Agricultural Economics* 81 (2), 373-84.

Videon, T. M., Manning, C.K., 2003. Influences on adolescent eating patterns: The importance of family meals. *Journal of Adolescent Health* 32 (5), 365-373.