



Kids and Nutrition: Making a Difference

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Over the past decade, the obesity epidemic among children has been growing. Currently, about 1 in 3 U.S. children are overweight. 15% are considered obese.¹ With this growing epidemic, there has been a collective call for action for those of us empowered to “do something.”

- The government has launched a new food guide (MyPlate) as well as new campaigns like Michelle Obama’s “Let’s Move!”
- Schools are improving their lunch menus and introducing nutrition education at younger ages.
- Moms, the gatekeepers for most families, are using more strategies to encourage their kids to eat healthy.
- Food companies are getting involved—subjecting themselves to self-imposed marketing regulations and launching family-directed advertising and promotional initiatives.

The purpose of this white paper is to provide food companies, as well as broader youth and family marketers with insight and guidance to address the topic of children’s “healthy eating.”

While much has been written on “kids and nutrition” from the adult perspective—moms, educators and academics—we’ve heard little from the kids themselves. Yet, to effectively reach kids, it is critical to understand them—in terms of attitudes, behaviors and knowledge. That is why this white paper speaks directly about kids, mostly from their point of view.

Drawing on years of foundational research by The Marketing Store and KidSay, this paper addresses three topics:

- 1) Where kids stand on “healthy eating”
- 2) Kids’ awareness and understanding of “healthy eating” fundamentals and principles
- 3) Effective nutrition education, messaging and three strategies to bring about positive healthy changes in children’s eating habits.

The focus of this paper is on kids 5-11 years old and is based on both quantitative and qualitative research. The quantitative piece primarily leverages the proprietary KidSay Trend Trackers, including those surveying kids 5-15 years old and moms of younger kids (5-7 years old). The qualitative piece includes focus groups with hundreds of kids, moms and teachers—conducted by both KidSay and The Marketing Store.

EXECUTIVE SUMMARY

- Moms and kids want to make additional improvements in their eating habits.
- Few kids see their eating habits as poor. Moms agree with them.
- Kids see the world simply and don't strive for perfection. Thus, nutrition messaging and education must reflect this.
- The importance of eating healthy varies by situation. Family dinners and school lunches are on the top of the list of situations where healthy foods are most critical.
- Most favorite foods of kids are those deemed "less healthy", with fruit being the exception.
- Kids are learning about healthy eating mostly from traditional influencers—parents, teachers, and medical personnel.
- Kids' perceptions of healthy eating frameworks are limited, especially with the newest guide, MyPlate.
- MyPlate's concepts need additional texture to be understood by younger kids.
- Kids have a clear understanding of some food categories as healthy or unhealthy (milk, water, fruits, vegetables), but many (including grains, proteins and "kid foods") are less clear.
- While kids are reading labels (even at the younger ages), they seldom understand them. Nor, do they read them for nutritional purposes. They often read them for the sake of reading, or because they are bored. This is an area where we can potentially make a difference.
- Some product nutritional claims are more compelling to kids than others. The strongest claim tested was "Made with real fruit", while others focused on "Less of the bad stuff" (such as reduced sugar) appear to foster expectations that the food will taste worse, be less healthy and lower their interest in trying the product.

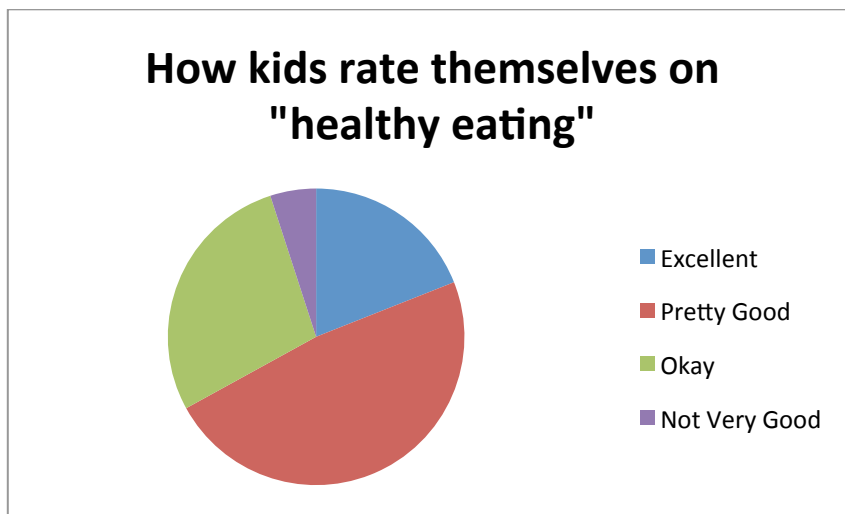
- Moms believe the teaching of nutritional concepts should begin early (pre-school).
- Both moms and kids believe that parents, teachers, medical professionals, and television are the most effective channels to learn about nutrition. Surprisingly, moms rank television higher than their kids do.
- Nutrition education needs to be age appropriate. Younger kids (5-8 years) are literal thinkers and thus, marketers need to be more prescriptive in their approach. Older kids (9+) can begin to understand the nuances of nutrition frameworks and some of the consequences.
- Because nutritional education is not motivating for kids, marketers and parents need to employ strategies to further drive kid demand and consumption. Education alone will not be enough.

I. WHERE KIDS STAND ON HEALTHY EATING

WHEN IT COMES TO “HEALTHY EATING”, KIDS THINK “THEY ROCK”

Self-image: Kids see themselves as “healthy eaters”

Just ask any kid to rate himself in terms of “healthy eating” and chances are he will rate himself positively. Most kids think they eat pretty healthy. This is true across gender and age. For example, about two-thirds of tweens (8-11) say they are “excellent” or “pretty good. Very few will say they are “not very good”.²



In qualitative research, we’ve also found this holds true for younger kids. Kids aged 5-7 rate themselves very positively—mostly “excellent” or “pretty good”. While a few said “just okay”, none of them said they were “not very good”.^{3,4}

Interestingly, from qualitative research (with both kids and their moms), it appears that self-ratings do not necessarily correlate with overall eating patterns. Some of the kids who had moms that were much stricter about their child's food consumption tended to rate themselves a little more critically.⁴ Perhaps this is because greater awareness about "healthy eating" leads to broader perspective on healthy eating and more opportunities for self-scrutiny.

Kids' positive self-image around healthy eating is driven by 2 things.

First, they have a very simple conception of "healthy eating".

To most kids, "healthy eating" means "eating fruits and vegetables" and "limiting too much bad food" (especially sweets or chips) in their daily diets.^{3,4} Accordingly, when asked about reasons for their self-ratings on "healthy eating", typical responses were:

"I eat fruits and some vegetables" Girl, age 6

"I don't eat too much ice cream or candy" Girl, age 8

"I like to eat apples. I'm the king of apples" Boy, age 10

"I say (that I'm) pretty good because I like to eat chips sometimes." Boy, age 7

Second, kids do not strive for perfection.

While they acknowledge there's room for improvement (especially in terms of eating more fruit and less candy/chocolate), kids do not seek or desire to "be perfect". They want to be able to eat some sweets and indulgent foods on occasion. Even those who rate themselves as "excellent", take a moderate view. As one girl aged 8 says:

"You can't eat just fruits and vegetables all of the time."

Furthermore, kids recognize that in certain special situations, including school parties, sweets, chips, pizza and other "bad" foods are a mainstay. Some do mention that this party fare could be healthier or at least include a few healthy items. However, none of them want to jettison all of the treats. After all, is it really a party if there are no "treats"?³ (For more information on situational eating norms, please see "Getting real: expectations vary by situation")

KIDS THINK THEIR MOMS AGREE

Most kids think their moms see them as "healthy eaters"

Interestingly, kids think their moms see them as "healthy eaters" too. When asked how their moms would rate them, virtually all kids (6-12) said she would rate them the same—and in some cases, better

than they rate themselves.⁴ As kids saw it, their moms would be focused on the healthy food they gave their kids to eat...

“She serves me fruits and vegetables” Girl, age 7

“She packs me a healthy lunch” Boy, age 8

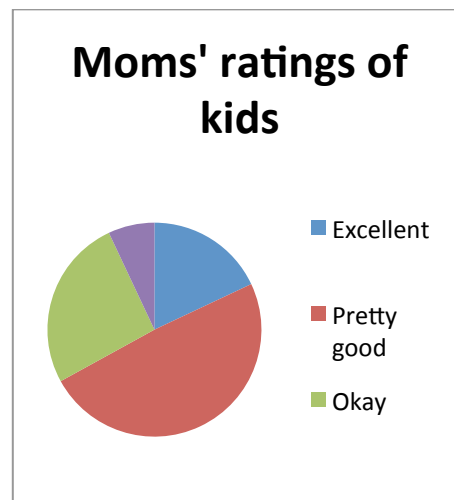
“She doesn’t see me eating junk food, like candy or chips” Boy, age 9

“My mom makes spinach and rice at least once a week” Girl, age 10

AND THEY ARE RIGHT!

Most moms view their kids as “healthy eaters”

It looks like kids CAN read their mom’s minds. In our quantitative surveys, moms (at least of younger kids 5-7) generally rate their kids positively on “healthy eating”.⁵



More to the point, in focus groups, when we ask both kids and their moms to “rate themselves/their child in terms of healthy eating”, their ratings are positive and very consistent. For example, for kids who rated themselves as “pretty good”, chances are that their moms also rated them as “pretty good”.⁴

MANY CLAIM TO BE IMPROVING THEIR EATING HABITS IN SIMPLE WAYS

Most moms tell us that they’re working to improve their children’s eating habits.

63 % of moms with younger kids (5-7) say they’ve “made a change to their child’s eating habits in the past year”.⁵

We also hear this sentiment echoed in our focus groups with moms of older children (8-11).⁴

The most popular changes are: more vegetables, more fruits, less “junk food”, more variety and more organic. Other top changes are: fewer snacks, more water, less sugar, less soda (apparently to reduce sugar and calories) and fewer fried foods.⁶

Looking specifically at organic, about one-third of moms (of kids 5-7) tell us that they “are buying more organic food than last year”.⁵ However, this doesn’t mean that they are totally sold on organic. Most moms report buying organic foods/beverages selectively, more for their kids than themselves. They also report buying organic for products they consider higher risk. One of the products often cited as “high risk” is strawberries because moms have heard that they contain high levels of pesticides. Other fruits like bananas are not. Milk is another “hot button” with many moms, due to its frequent consumption by kids and concerns about the impact of growth hormones on them.⁷

Kids acknowledge their parents’ efforts (to encourage healthier eating) and say they’ve made positive changes.

80% of kids (8-11) say that “over the past year, their parents have changed the types of food they have made, to be healthier for the family”.⁶

And, when asked about their personal eating habits, most kids report taking steps to eat healthier. Granted, these steps may be small. But a sizable minority (34%), report significant changes. And, it isn’t just girls. Over a quarter of boys say they’ve made “a lot” of changes.⁶

How much changed eating habits to be healthier	Total Kids (8-11)	Girls (8-11)	Boys (8-11)
A little	48%	49%	48%
A lot	34%	35%	28%
None	18%	16%	22%

The primary changes that kids say they’ve made are:

#1 More fruit

#2 More vegetables

#3 Less/no junk food

#4 Eat less

#5 Eat less/no candy

The critical thing in promoting healthy eating, moms say, is to be realistic.

According to moms, it is not realistic to eliminate all unhealthy food. They accept that kids (and they) are always going to eat some less healthy foods. These foods are too ubiquitous, convenient and “good-tasting”. So, one of the primary messages moms strive to teach their kids is “balance”.

“You can eat junk, but it needs to be in moderation.”

“Most of your food needs to be healthy.”

“If you eat candy or a cookie, then you have to eat something healthy.”

Furthermore, most moms view some less healthy items as serving an important role as “a treat” that makes people (both themselves and their kids) happy.

“Sure I could serve my kids just water and milk. But, when you pull out the juice boxes, it’s all smiles. The important thing is that they don’t have them every day ”

Consequently, moms strive to position less healthy foods or beverages as “special treats” that are to be enjoyed—while moderating when, where and how often kids consume them.

Moms also recognize that it’s a challenge to get some kids to eat healthy. Within their families, it’s not uncommon to have one child who loves fruit while another child loathes it. Or, they have one child who is more experimental while another sticks to a limited repertoire of “classic kid foods”—like hot dogs, cheese pizza, mac & cheese, chicken nuggets, French fries, baby carrots and apples.

The bottom line for moms is-- getting children to embrace “healthy eating” is viewed as a long-term effort that is best achieved by focusing on incremental improvements. Instead of setting absolute goals (e.g., eat the quantities of foods as dictated by the food pyramid), moms tell us they set smaller, more achievable goals.^{4,7}

“I don’t think 5-a-day will work for my kids; so I work towards 3 (fruits or vegetables) a day”.

“I’m just working on them drinking more water than juice”.

“I’m trying to get them to at least try one bite of new foods I serve”.

Getting real: expectations vary by situation

Part of being realistic about healthy eating is recognizing the power of context. People have different expectations or norms for different types of situations. A Sunday Brunch at a fancy restaurant, a quiet family dinner at home and a quick fast-food lunch—all elicit different expectations. Both kids and moms

clearly see this. As shown below, healthy eating is most valued for “family meals at home” and school lunches. Snacks at parties or meals at fast-food restaurants are less so.^{2,5}

How important is it for you/your child to eat healthy ?

% very important

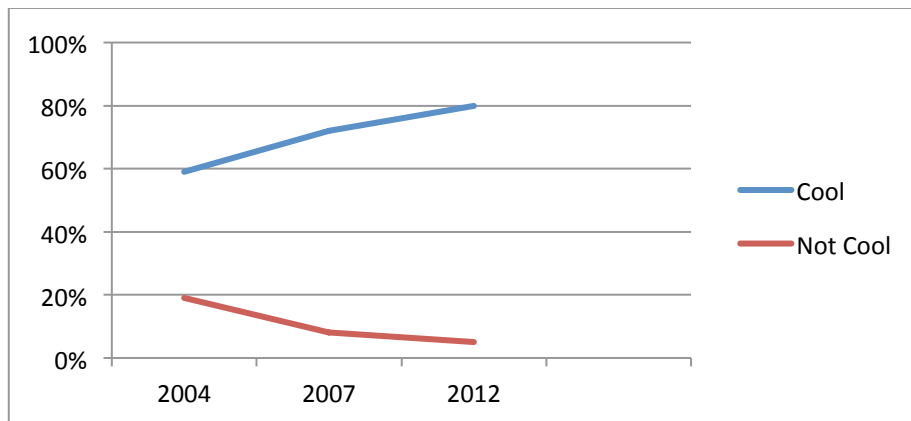
Moms Kids (8-11)

Family meals at home	64%	64%
School lunches	55%	41%
Snacks	37%	28%
Meals at sit-down restaurants	33%	40%
Meals at fast-food restaurants	25%	29%

“Eating Healthy” has become “cool”

Within the past decade, there’s been a shift in kids’ attitudes towards “healthy eating”. And this shift has been pretty dramatic. The vast majority (80%) now think it’s “cool”; up significantly from 59% in 2004. Correspondingly, very few (5%) now view it as “uncool”, as opposed to 19% in 2004.

How kids (8-11) rate “eating healthy”



While healthy eating is now “cool”, it’s important to note that dieting is not. Kids are significantly less likely to rate it as “cool” (33% vs. 80% for healthy eating) and many (39%) think it’s totally uncool. Plus, from interviews with kids, it’s clear that most associate it solely with eating restrictions—and that’s highly “un-cool”.^{8, 9, 10}

Kids also view some “healthier foods” as “cool”.

This positive attitude towards “healthy eating” is also seen in their attitudes towards some foods. In asking kids to rate a series of different items, it’s interesting that some of the “healthiest items” are also viewed as “cool”. Topping the list is fruit, which is on par with candy and chips. Healthy drinks and snacks are reasonably cool, which is heartening because it suggests that kids are open to these types of items. However, veggies, vitamins and energy bars aren’t so cool—likely because they often fall short on taste.¹⁰

Cool ratings for Specific Foods/Beverages (among kids 8-11 years old)

	% Cool	% Uncool
Fruit	82%	5%
Candy	81%	6%
Chips	79%	6%
Healthy drinks	58%	15%
Healthy snacks	57%	13%
Granola bars	51%	19%
Yogurt	48%	19%
Veggies	47%	32%
Vitamins	43%	33%
Energy bars	36%	28%

However, except for fruit, many of their favorite foods are less healthy.

To get a sense for what they like, kids (8-11) were asked a series of questions about food.¹⁰ In classifying their responses of healthy versus unhealthy, it’s clear that many of their favorite foods (besides fruit) are not that healthy. In fact, across a variety of questions about their “favorite foods”, the ratio of healthy to unhealthy foods tended to be 2:3 (2 healthy to 3 unhealthy) or lower. Below are their top 5 responses to some of these questions:

Q: What is your favorite snack?

- #1 Cheez-Its (7%)
- #2 Chips (6%)
- #3 Goldfish (6%)
- #4 Lay’s chips (5%)
- #5 Fruit (5%)

Q: When you go to the grocery store, what food item do you most want to get?

- #1 Fruit (13%)
- #2 Candy (11%)
- #3 Ice Cream (10%)
- #4 Chips (7%)
- #5 Meat (7%)

Healthy to unhealthy ratio: 2/3

Healthy to unhealthy ratio: 2/3

At the same time, when asked what snacks their parents give them, that they don't like, the number one item they mention is "fruit". So, fruit is not a silver bullet. 10 From qualitative, we've heard kids object to specific types of fruit (e.g., I don't like pears) or the lack of variety (e.g., She (mom) always gives me an apple). Sometimes it is just a case of relative deprivation (e.g., I get grapes. My friends get cookies or chips).^{4,7}

Q: What snack item do your parent's often give you that you don't like?

#1 Fruit (11%)

#2 Carrots (9%)

#3 Granola bar (9%)

#4 Vegetables (9%)

#5 Apple (6%)

Implications

Companies and marketers need to help reset the appropriate nutrition benchmarks so that kids and moms can more easily understand and act on them.

Simplify your nutrition messaging to kids, focusing on bite-sized, digestible elements at a given touch point.

Be realistic and encouraging in providing the appropriate nutrition targets.

Identify strategies to make the more healthy options more acceptable to kids. (For specific strategies, please see the section on "strategies to help drive kids demand".)

II. KIDS' AWARENESS AND UNDERSTANDING OF "HEALTHY EATING" FUNDAMENTALS AND PRINCIPLES

Despite high exposure, kids' knowledge about "healthy eating" is limited. Multiple messengers: Kids are learning about "healthy eating" from many sources.

Today's kids (and their moms) report being surrounded by healthy eating messages. In fact, when asked about where they are learning about "healthy eating", kids (8-11) cite many different sources.² Of these, traditional venues (parents, teachers, medical personnel) reign supreme.

Q: Where are you learning about healthy eating?

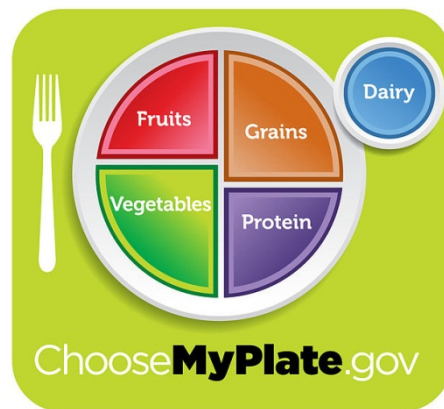
My Parents - 49%,
Teachers - 46%
Nurse/Doctor – 33%
Reading Labels on Products – 20%
TV – 20%
Books/Magazines – 11%
Food Companies – 8%

Despite efforts on the part of so many, kids' knowledge is still limited.

NOT YET THEIR PLATE

In June 2011 the USDA abandoned their almost 20 year effort to teach Americans about healthy eating through the use of the food pyramid. The new framework is MyPlate. As the USDA describes it,

MyPlate illustrates the five food groups that are the building blocks for a healthy diet using a familiar image—a place setting for a meal. Before one eats, they should think about what goes on their plate or in their cup or bowl.



From what we know of the brain's ability to process and interpret information, MyPlate's graphic rendering is far better at communicating what "healthy eating" looks like than the previous Food Pyramid effort.

Awareness and Understanding of MyPlate is low among kids.

Less than half (41%) of kids 8-11 are aware of MyPlate. This is considerably lower than awareness for the Food Pyramid (73%). Even fewer kids really know anything about MyPlate. While they may have heard or seen it somewhere, only 23% of kids say they know anything about it. ²

Q: Which have you seen or heard about?

My Plate 41%

The Food Pyramid 73%

Q: Do you know what “MyPlate” is?

Yes 23%

No 77%

Among those who say they know what “MyPlate” is, knowledge appears to be limited. Virtually all kids (92%) have a general notion that it is related to health and nutrition. But they don’t necessarily know how. For example, some kids think the plate as an organizing template that tells you about where to put your different foods on the plate. ^{4,10}

“It tells you the food groups and helps kids know where the different food groups go. You match your food with the name on the plate. For example, pineapple would go in the fruits column. Carrots would go in the vegetables”. – Girl, aged 9

This is a start. But it will take more than just having a general sense that MyPlate is about “healthy eating” to start to shape kids’ behavior. Kids will have to know what items comprise each of the food groups. Almost all kids can easily identify some foods that fit into the sections labeled fruits, vegetables and dairy. However, our qualitative research indicates that many kids have difficulty identifying grains and proteins. ^{4,7}

- *“A grain is like corn. And umm.” Boy- aged 8*
- *“I don’t know what (protein) is. Maybe yogurt.” Girl- aged 9*

This is important, because while the old food pyramid provided images of different foods comprising the categories, MyPlate does not.

Kids also need to understand that MyPlate reflects portion balance or relative proportions of different food categories. While older kids (8-11) readily pick up on this concept, it can be a difficult concept for younger kids (5-7) to grasp. Proportions, fractions or pie charts all require higher level thinking than younger kids are capable of, and these concepts are not typically introduced until 2nd grade. And, even if they grasp the idea, there’s still often the question of portion size. How much milk should be in that cup—is it a tall glass or a coffee mug?

Kids are confused about the healthfulness of many foods and beverages.

In qualitative research we’ve seen that kids are pretty good at identifying most sweets (such as candy and ice cream) as “unhealthy” and most vegetables or fruits as “healthy”. Even 5 year olds know that licorice isn’t healthy, while apples are. Outside of these categories, however, perceptions are more disparate and cloudy.

For example, during recent focus groups where we asked 50 kids (6-9) to sort 43 products into three piles. healthy, not healthy, unsure, virtually all of the kids identified various fruits, vegetables, water and milk as “healthy”. They also identified various candies and soda as “unhealthy”. However, for many other categories, there was less certainty. Interestingly, many of these items are classic “kids’ foods”.⁴

Top “Healthy” items

	Healthy
Blueberries	49/50
Broccoli	49/50
Carrots	49/50
Tomatoes	47/50
Milk	46/50
Bananas	46/50
Water	45/50

Top “Unhealthy” items

	Not Healthy
Airheads	47/50
M & Ms	45/50
Soda pop	45/50
Fruit roll-ups	38/50
Ice cream	38/50

High uncertainty items (50% or less agreement)

	Healthy	Unhealthy	Not sure
Apple juice	24	12	14
Capri Sun Juice	15	18	17
Cereal	26	7	17
Cheese crackers	21	12	17
Chicken nuggets	17	20	13
Hamburger	22	21	7
Hot Dogs	25	13	12
Lunchables	21	14	16
Pizza	16	22	12
Popcorn	16	21	13
Pretzels	17	16	17
Sports drinks	21	14	15
Tortilla chips	9	20	21
Waffles	19	21	10
White bread	23	18	9
Peanut butter & jelly	22	12	16

KIDS ARE READING NUTRITIONAL LABELS, JUST NOT IN THE WAY YOU THINK

As kids learn to read, they often start looking for opportunities to read words they know—including on food packages. By the time they're 8 years old, many kids (50%) tell us that they're reading the nutritional facts on food labels. Consistent with other research showing girls to be significantly more interested in learning about nutrition, we see that girls are more likely to read labels than boys. But, the fact that almost half of boys say they are reading labels is a bit surprising.⁶

Q: Do you read nutritional facts on food labels?

	Total kids (8-11)	Girls	Boys
Yes	51%	56%	46%
No	49%	44%	54%

The motive for label reading is seldom “good nutrition”.

If you ask them what they are looking for or why they are reading labels, motives vary. The youngest kids (5-7) are typically reading them for the sake of reading. It's a thrill to be able to look for words they recognize; the message is unimportant. For older kids (8+), many report reading nutritional information on packaging to help alleviate boredom while shopping with mom.

“It's sort of boring grocery shopping, so sometimes I pick up things and read the labels.” Boy, age 10

Occasionally, when helping to select a product (e.g., which soda to buy) or trying to convince their mom to buy a specific item, some kids will also look to nutritional information and claims.

“Sometimes when I want to buy pop, I look to see how much sugar there is in different ones.” Girl, age 9

Only rarely (and mostly among older kids 9+) do kids look at nutritionals because they want to select healthy products.^{3, 4}

While Kids may read labels, most are meaningless to them

When asked what nutritional fact(s) they look for, kids tell us...

#1 Calories

#2 Fat content

#3 Sugar content

#4 Serving size

#5 Carbohydrates

Yet, when asked about these facts, few kids had any bench marks. For example, when asked “how much sugar is good or bad” (for categories where kids say they look at sugar content, like soft drinks and cereal), very few could answer. The most common answers were either “I don’t know” or “I look at different ones to see which one has the lower number”. Similarly, when asked about calories, kids struggled to answer what number was “good” or “bad”. When shown packages with “100 calorie” claims, most kids actually thought that this was a lot of calories and therefore, signified that the product was unhealthy.^{3,6}

In another survey, we showed kids a series of nutritional claims – drawn from the marketplace and using terms that kids are familiar with. For each, we asked them “When you see these words on the front of a new food item...1) How good do you think it would taste? 2) How healthy do you think it would be? 3) How much would you want to try it?”

Of the 10 claims tested, the one that resonated most strongly with kids was “made with real fruit”. Other strong claims were: “More vitamins and minerals” and “All natural”. Interestingly, “made with organic ingredients” was rated as lower on taste, health and desire than “all natural ingredients”. Based on qualitative research, this partly reflects kids’ lack of understanding for “organic” as well as their observation that organic produce often doesn’t look “as perfect” as non-organic produce. The weakest claims were those that speak to “less of the bad stuff” (e.g., reduced sugar, no high fructose corn syrup, reduced salt).

*% kids (8-11) rating claim on “top box”**

	Taste	Healthy	Want to try
Made with real fruit	74%	87%	68%
More vitamins and minerals	51%	84%	51%
All natural ingredients	48%	77%	48%
Organic ingredients	36%	68%	39%
More fiber	34%	65%	35%
No high fructose corn syrup	31%	58%	28%
Reduced sugar	27%	42%	27%
Made with whole grains	24%	79%	26%
Reduced fat	24%	47%	23%
Reduced salt	22%	40%	24%

*ratings were 3-point scales, with the top box being the most positive

Implications

To effectively support MyPlate, food and beverage companies:

- Need to assist in building awareness and comprehension (including food groups and portion sizes).
- Consider providing concrete examples of how their product fits into the guide.

Food and beverage companies should consider developing a nutrition labeling system that is targeted to kids and fits within the MyPlate framework.

Companies should take care to craft their nutritional claims, using child-friendly terms and when possible, focus on what the product has (or offers), rather than what has been taken away (e.g., reduced salt).

III. EFFECTIVE NUTRITION EDUCATION, MESSAGING AND MARKETING STRATEGIES

Clearly there's room for improvement in the area of nutritional education and motivation for kids. This is a huge topic, so we will focus on a few key points that are particularly important.

Nutrition education should begin early

According to moms, kids should be learning about "healthy eating" during preschool years. In fact, 90% of moms (of kids 5-7 years) think that kids should be taught about "healthy eating" by the age of 5 years. And, almost two-thirds (65%) believe the teaching should begin at 3 years or younger.⁵

While these numbers represent moms of younger kids (5-7), we hear the same sentiments in our focus groups with moms of older kids (8-11).⁴ As they tell us...

"You should start teaching kids (about healthy foods) from the get-go...around 3. At that age they are old enough to start learning". Mom of 9 year old

"Start (teaching kids about healthy foods) in preschool". Mom of 9 and 11 year old

"I would say in kindergarten. That's when they start bringing snacks to school". Mom of 6 and 8 yr. old

Traditional learning channels are more desirable, though TV ranks ahead of "nurse/doctor" for moms.

Given that moms want teaching to begin so early, it's not surprising that they expect parents to be the primary educator for healthy eating. The next best educators are "teachers" and "TV"—ahead of

medical professionals. This may be surprising, but moms are well-aware of TV’s huge presence in kids’ lives and its powerful ability to shape attitudes and desires. At the same time, interactions with their child’s nurses or doctors are generally quite brief and in a sterile setting.⁵

Kids’ preferences are similar. Moms are #1. Teachers and TV also rate highly. But, “nurse/doctors” actually rate #2. While this may reflect deference to their authority, kids are also probably factoring in the role that their school nurse plays in their school’s health curriculum.²

Where would you most like (your child) to learn about healthy eating?*

Source	Moms		Kids (8-11)
	Top 3 favorites	#1 choice	Favorites
Parents	96%	87%	38%
Teachers	79%	6%	28%
TV	45%	4%	24%
Nurse/Doctor	39%	1%	30%
Books/Magazines	17%	1%	17%
Food Companies	12%	1%	18%
Reading labels on products	11%	0%	16%

Nutritional education needs to be age-appropriate

Despite who does the educating, it is critical to ensure that it is developmentally appropriate. While this may seem obvious, many educational efforts and messaging are not geared towards kids. Our research clearly shows that kids do not understand most of the popular nutritional claims made by food and beverage products. The reason is simple. They lack the vocabulary. Words like “artificial”, “preservatives”, “additives” or “sodium” are unfamiliar to them.^{3,4}

From 6 to 11, there are also huge differences in children’s cognitive abilities and knowledge, which need to be taken into consideration. Younger kids (6-7/8) tend to be more literal thinkers and struggle with abstract concepts such as “healthy eating”. To them, foods tend to be “good” or “bad” and healthy eating is mostly a matter of eating the “good foods” while avoiding the bad ones. As kids age, their brain’s ability to understand concepts and juggle variables improves. By the time they are 9-11 years old, they have a deeper, more nuanced understanding of “healthy eating”. Instead of classifying foods as entirely “good” or “bad”, they are able to consider them in the overall balance of their diet and lifestyle. They begin to express interest in caloric content, as they understand it’s something that is linked to becoming overweight. And, they begin to entertain notions of how they can modify their food to “make

it taste better”, but still maintain some of its health benefits (e.g., cheese sauce on vegetables, sugar on grapefruit).

Nutritional education is not necessarily motivating to kids

Thus far, we have been talking about nutrition education as pivotal in encouraging kids to eat healthy. The assumption is that if kids know what foods are healthy, they will eat them. Or, if we teach kids to “make good choices” for eating/drinking, they will do so. But, as many health professionals, educators, marketers and moms know, this is rarely enough.

One common recommendation for making nutrition education more meaningful to kids is to teach them about the benefits of healthy foods. The idea is if kids understand the concrete benefits of specific foods, they will want to eat them. Want kids to clamor for spinach? Tell them “Spinach makes you strong”. Unfortunately, the interchange sounds something like this:

Interviewer: *“If I tell you ‘Spinach makes you strong’ or ‘Carrots are good for your eyes’, does it make you want to eat those foods?”*

Kids: *“No!”*

So, why the disconnect? Often “bad taste” is cited. If food doesn’t taste good, kids don’t want it. But in our research, we also find that many of the benefits being touted, simply don’t register with kids. Yes, they want to grow up to be strong. Yes, they want to have energy, have good eyesight, run fast, play hard, avoid diabetes, have a healthy heart and so forth. But, for the most part, these are things that kids take for granted. Kids don’t worry about these things. Plus, many of them are not immediate enough for kids to worry about. So, while they may like learning these things, it is unlikely to impact their food choices.^{3,7}

Strategies to help drive kid demand for healthy foods: Nudge, Camouflage and Play

Yet, there is reason for hope. Aside from nutrition education, there ARE strategies that both moms and food companies can use—to help drive kid demand for healthier food and beverages.

Two strategies that are often used in the kid realm are: “making it cool” (by tactics such as celebrity endorsements) and “reward” (where kids are given prizes or benefits). Obviously, these can be used to help drive kid demand for healthier items. However, there are other effective strategies. Three powerful strategies that are less well-known are: NUDGE, CAMOUFLAGE and PLAY.

NUDGE

One of the simplest strategies involves structuring the environment to make healthier goods/beverages more salient. The underlying premise is that people tend to be attracted to and select items that are visually prominent or the ones that are most convenient. Essentially, healthy options are made “front and center” so that kids are drawn to them. Or, they are automatically given (i.e., set as “the default”) so that kids have to make an extra effort to get non-healthy options.

Using this strategy, one can employ various tactics to make healthier options more salient to kids. Moms who place bowls of cherries or pretzels on their kitchen counter for kids to grab are using nudge. School cafeterias that place fruit at the beginning of the lunch line or desserts on the top shelf (above the direct line of vision) are using nudge. Grocery stores that position pre-sweetened cereals at a child's eye level and food manufacturers that package their products in vivid colors or with a cool promotion, are using nudge. Fast food restaurants that provide fruit as a default in their kids' meals, are also using nudge.

In all cases, the goal is simple: increase the likelihood that kids will choose healthier options by making them salient and/or setting them as the default.

CAMOUFLAGE

The second strategy, we call "camouflage". This strategy usually involves "hiding" a healthy food (that kids don't like) within another food (that kids do like). Mixing spinach into a fruit smoothie or pureed carrots into spaghetti sauce are examples of camouflage. One retail product that successfully leverages this strategy is V8's V-Fusion, which mixes vegetable juice with fruit juice. Another variation involves coupling a disliked healthy food with another food or sauce that kids do like. One of the most popular instances with moms is pairing carrots or broccoli with Ranch dip. This combination is now available at retail by Earthbound Farm Dippin' Doubles Carrots and Ranch Dip. Though simple, it "works miracles" in terms of getting kids to eat vegetables. In fact, a recent study conducted by Temple University, found that kids 3-5 eat about 80% more vegetables when given a dip.

PLAY

The third strategy involves bringing play into food. Through our extensive work in the area of play, we know that kids are driven to play and look for opportunities to do so. Some moms and marketers may cringe at this strategy because they envision "food fights" or "kids playing INSTEAD of eating". While these are legitimate concerns, we are not talking about food fights or distracting kids from eating. Rather, we are talking about leveraging play to motivate kids to choose healthier foods.

To see evidence of this power of play in kids' products, look no further than to some of their favorite foods—Oreos, M&Ms, Goldfish, Fruit Roll-ups, Lunchables and String Cheese. All of these provide the opportunity for play. Oreos offer the physical play of unscrewing them and deciding whether to eat the filling or cookie first. M&Ms let kids count, compare, and trade different colors—or create colorful tongues to show off. Goldfish can be used for fantasy play, such as fishing (where you use a peanut buttered straw to pick up the crackers). A fruit roll-up lets kids play by unrolling it, twisting it or punching out shapes. Lunchables allow kids to build their own sandwiches or to "play airplane" by dipping chips into nacho sauce. String Cheese lets kids pull it apart into pieces and eat it "like worms".

While most of these examples involve playing with the food, it's important to note that sometimes the play can be provided through the packaging. One example of this would be GoGurt (which kids have the fun of squeezing the yogurt out, reading jokes/trivia and sometimes pretending the tube is a snake or a light saber). Another example is "Go Buddies" (an applesauce in a squeeze bottle with a curvy shaped

body) that kids enjoy the sensation of squeezing, pretending it's a headless body and after it's eaten, blowing it up with air and then tossing it around or stomping on it to see if it pops.

Implications

Food and beverage marketers should develop age-segmented nutrition education efforts, beginning with their youngest consumers (pre-school).

Marketers and companies are certainly part of the solution. However, rather than focusing all education efforts through traditional marketing channels (television, packaging, etc.), leverage traditional influencers, including parents and teachers, to help with the nutrition education effort.

Marketers should look to employ the strategies of nudge, camouflage, and play to encourage kids to demand the healthier options.

This research was conducted in partnership between KidSay and The Marketing Store. For more information on this research, please visit <http://www.kidsay.com> or <http://www.themarketingstore.com>.

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