

Formative Research for a Campaign to Promote  
Healthy Weight Using Relevant Physical Activity and  
Nutrition Messages for Youth

Healthy Weight, Physical Activity, and Nutrition:  
Focus Group Research with African American,  
Mexican American, and White Youth

# EXECUTIVE SUMMARY

JUNE 2000



## Background

Current trends point to the need for more aggressive strategies to prevent and reduce obesity among young people. Recent studies report that an estimated 15 percent of children 6–19 years are overweight (Ogden, 2002). To counter these trends, the Centers for Disease Control and Prevention (CDC) has begun to develop a comprehensive national strategy to prevent obesity among the youth of America.

This report summarizes a collaborative qualitative research study conducted by the CDC's Division of Nutrition and Physical Activity (DNPA) and by Westat. The activities summarized are a part of a communication effort that will use relevant physical activity and nutrition messages to promote healthy weight among youth.

In July and August 1999, 12 focus group sessions were conducted with selected youth target audiences in Atlanta, Georgia, and San Antonio, Texas. The focus groups were intended to help researchers understand young people's beliefs and issues pertaining to healthy and unhealthy eating; healthy and unhealthy weight, underweight, overweight, and obesity; physical activity/sport behaviors; barriers to engaging in healthy eating and physical activity; and potential campaign messages. The following were additional objectives for these focus groups:

- To gain a better understanding of how, and if, peers, family, and the media influence healthy eating and levels of physical activity among diverse racial/ethnic groups;
- To develop a comprehensive consumer profile of youth related to physical activity and healthy eating;
- To explore how young people process information in a cluttered media environment that contains competing messages about eating, physical activity, and weight management;
- To identify perceived barriers that prevent young people from eating healthy and participating in physical activity;
- To identify perceived enablers for young people to eat healthy foods and participate in physical activity; and
- To explore how school programs and parents affect young people's eating habits and physical activity levels.



## Focus Group Participants

The 12 focus groups included 98 eighth- and ninth-grade students. Groups were segmented by the following:

- Race/ethnicity (African American, Mexican American, and white);
- sex; and
- Weight status (determined by body mass index values for sex and age). A participant was considered to be at a *healthy weight* if he or she fell into the 5th percentile  $\leq$  BMI  $\leq$  85th percentile for sex- and age-specific cutoff points. A participant was considered to be at an *unhealthy weight* if he or she was  $\geq$  95th percentile for sex- and age-specific cutoff points. Individuals whose weight fell below the 5<sup>th</sup> percentile were not recruited for this study. Six groups were composed of young people whose weights were defined as unhealthy and six groups were made up of those whose weights were healthy. These 12 focus groups included 46 girls and 52 boys.

## Focus Group Findings

- **Many of the young people knew the fundamentals of eating healthily, although few reported doing it.**

When participants were asked for their definitions of "healthy eating," responses included eating the types of food suggested on the food pyramid, eating food in moderation, keeping consumption of red meat low, and monitoring fat and caloric intake. However, many of the students said they do not make a conscious effort to eat healthy foods because of a stronger preference for unhealthy foods. Of those who do try to eat healthily, some reported that they read nutrition labels and note the number of grams of fat and carbohydrates in the foods they consume. However, label reading often occurs after the food is eaten or out of boredom. When participants did look at nutrition labels, most were surprised and alarmed by the lack of nutritional value in the foods they ate, especially in fast food.

- **Young people reported learning about healthy eating from their parents, their schools, and sometimes their peers.**

Participants mentioned parents and school health classes as their initial sources of health information, especially when they were younger. These sources also were mentioned as the largest contributors to learning what constitutes healthy eating. Youth reported that they often find themselves



modeling their parents' behaviors and looking at food packaging for ingredient content and nutritional value, which sometimes influences their selection of healthy foods. Eating with certain peers also can influence young people's eating behavior, as they often imitate what their friends eat, consuming either healthy or unhealthy foods.

- **Many of the Mexican American young people mentioned that healthy eating is not a part of the Mexican culture.**

Some participants felt it is hard to eat healthy when they had not been raised to do so. Many of the Mexican American youth reported eating traditional Mexican food, which is often high in fat and starch, at home. Some participants reported that vegetables are not often served as side dishes, but are often used in the preparation of entrees. Mexican American participants also often noted that one or both of their parents work until late evening. Because of this, they frequently eat fast food with their families whenever their parent(s) return from work.

- **Many of the young people reported that they will eat healthy foods if they see an immediate benefit.**

One of the largest barriers to healthy eating was the lack of taste and appeal of healthy foods. Participants do not consume healthy foods because they do not taste as good as the unhealthy foods they prefer. However, participants said they are more likely to eat healthy foods for increased physical performance when preparing to play a sport. Other mentioned benefits of healthy eating were increased energy levels, bolstered self-esteem and self-image, and avoiding of future health problems such as heart disease and diabetes. The young people reported knowing that weight gain could influence the onset of many health conditions as they get older. Many participants did not think that their current behaviors could affect their health at this time in their lives.

- **For the African American girls, remaining attractive to boys is a strong motivator to eat healthily.**

Female African American participants with weights in the healthy range were afraid to gain weight because they did not want to be teased by their peers. African American girls with both healthy and unhealthy weights reported that remaining attractive to boys was a big motivator for them to eat healthy so they would not gain weight, beyond what they consider attractive.

- **For these young people, being a "healthy weight" is not related to measured weight or appearance; rather, it is an attitude, and perceptions of overweight and obesity are vastly skewed.**

Most participants were very hesitant about using physical attributes such as certain body types or measured weight to describe "healthy weight." Overall, participants thought that healthy weight was tied to how people viewed themselves and their levels of confidence and self-esteem.



These students had a distorted view of obesity. When asked for their perceptions of obesity, many thought of someone who weighs more than 500 pounds. Perceptions of obesity appeared to be shaped by talk shows, such as *The Jerry Springer Show*, and by other images on television.

- **The African American and Mexican American participants had different perceptions about "healthy weight" compared to white participants.**

African American and Mexican American participants believed that being a few pounds overweight is acceptable and healthy. Descriptors they used for healthy weight included having "meat" or "curves," and they considered an increased weight as acceptable as long as a person looked "decent" in his or her clothes. Particularly for the unhealthy-weight African American girls, feeling good on the inside and having high self-esteem were more important than being at a healthy weight according to the scale. The white focus group participants were more likely to define "healthy weight" as being thin or fit.

- **Many of the young people participate in sports for popularity and health benefits.**

Participating in physical activities and exercise provides these young people with an opportunity to showcase their talents. Reasons for not participating in sports are low self-efficacy and lack of interest in playing a sport. Unhealthy-weight participants reported feeling embarrassed if they are not able to perform physically as well as their peers.

- **Students do not like physical education classes and the food offered in school.**

Participants reported that they often do not enjoy physical education class because it lacks variety. In addition, some mentioned that they feel uncomfortable changing their clothes in front of peers. These students also mentioned that food offered at their schools may be healthy but is not very appealing, so instead they often eat unhealthy foods such as potato chips and soda from vending machines.

- **These young people want realistic messages that are positive, uplifting, and succinct.**

Participants were asked for their advice on developing a media campaign that would encourage teens to be physically active and eat healthy. Participants, regardless of race or ethnicity, said they want real-life teenagers, not actors, to be spokespersons in future campaign efforts. It was important for these young people to feel connected to the spokesperson and feel that he or she had similar experiences with weight problems. Participants also said that pictures in advertisements should show active, racially diverse, average-looking groups of young people.

In addition, participants thought that media messages should not make anyone



who is overweight feel bad or discouraged. Instead, they indicated messages should encourage young people to be active and eat healthy, but not focus on facts and figures.



# Implications for Communication Strategies

The following statements reflect ideas and strategies that should be integrated into a healthy-weight communication effort targeting young people:

- Encourage parents to influence their child's eating behavior and physical activity levels.
- Build upon existing channels (i.e., parents and schools) to disseminate messages about healthy eating and physical activity for young people.
- Focus on what young people perceive as the immediate positive benefits of healthy eating and physical activity, such as better sports performance, higher energy levels, and maintaining desired weight.
- Carefully craft messages to avoid exacerbating sensitivities about physical attributes, "healthy weight," and ideal body images for boys and girls.
- Consider that young African Americans and Mexican Americans have different perceptions about healthy and unhealthy weight compared with whites. Specifically, a person who is a few pounds overweight is considered to be well-nourished or "full-figured" in the African American and Mexican American cultures, according to these focus group participants.
- Be sensitive to food preparation methods that are traditional in the Mexican American culture.
- Emphasize to young people that the way they currently treat their bodies affects them now as well as in the future.
- Expand upon young people's knowledge about the differences between obesity and overweight and the health implications of each.
- Accompany communication messages with efforts to increase young people's options for engaging in healthy physical activities and to reduce barriers to making healthy food choices at school.
- Create messages that are succinct, realistic, positive, and uplifting.

## References

Ogden CL, Flegal KM, Carroll MD, Johnson CL. Prevalence and trends in overweight among US children and adolescents, 1999-2000. JAMA 288:1728-32. 2002.





For more information, contact CDC's Nutrition and Physical Activity Communication Team, Division of Nutrition and Physical Activity, NCCDPHP, (770) 488-5820.

Acknowledgements: This research effort was funded jointly by the CDC Office of Communications and the National Foundation for CDC, through the DNPA Physical Activity and Nutrition adolescent initiative.

