

When food is more than nutrition: Understanding emotional eating and overconsumption

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ABSTRACT

This research examines how more proximal or immediate goals of affect regulation impact goals of weight loss and maintenance. Findings suggest that both psychological and social factors play a role in eating behavior and food overconsumption. Specifically, the narratives of self-identified emotional eaters reveal that negative emotion, prefactual thinking, and ruminative propensities play major roles in contributing to food-related consumption. Additionally, emotional eating informants' consumption behavior is greatly impacted by the attitudes and behaviors of others. Several approaches for developing interventions for emotional eaters and furthering transformative research in obesity and overconsumption are discussed.

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INTRODUCTION

Every day I get up with the intention of trying to eat better. I honestly do. I want to eat better. I want to be healthy. . . But food is comfort to me. If I am sad, I want chips, fried food or gumbo. . . I try not to eat these things, but I do. (Margaret)

Margaret is a 44-year-old divorced woman from New Orleans, LA, USA, with two adult children. Currently, Margaret is obese and is aware that her overall health is threatened by her present weight. Margaret has struggled for over 11 years to lose weight, and several years ago following Hurricane Katrina, she watched as even more pounds piled on.

Margaret's battle with food and her weight is not an uncommon problem for many individuals. Food overconsumption has become a growing concern, given the worldwide obesity epidemic. In the USA, approximately 68 per cent of adults aged 20 years and older are overweight or obese (Flegal *et al.*, 2010). Important health concerns including chronic diseases such as diabetes and increased morbidity and mortality are linked to being overweight and obese (Swinburn *et al.*, 2004). The cost of treating obesity in the USA is estimated at \$147 billion annually (Center for Disease Control and Prevention, 2009). Further, obese patients spend over 42 per cent more in medical costs than normal weight individuals. The annual cost of obesity is nearly \$5000 for women and \$3000 for men (Caryn, 2010).

At the same time, Americans spend approximately \$23 billion a year on diet and weight-loss products (Thomaselli, 2007). The lack of success highlights the

need for a better understanding of factors that contribute to individuals becoming overweight or obese. Research suggests that behavioral, social, and physiological factors interact to contribute to the problem (Marshall *et al.*, 2007; Brown *et al.*, 2009).

One key factor, however, which may result in overeating, is emotional eating. Emotional eating, or eating linked to an individual's emotional state, often leads to overconsumption and has been cited as the reason why many diets fail (Kontinen *et al.*, 2010). Emotional eating is a common behavior in response to emotions and is characterized as both emotional relief and a form of dysfunctional coping (D'Arrigo, 2007). Research has shown that emotional eating is related to reliance on emotion-oriented coping and avoidance distraction in both eating-disordered women and relatively healthy women (Spoor, 2007). Specifically, food is used for reward, nurturing, and excitement.

Studies suggests that emotional eating may be one of the factors that contributes to obesity, as emotional eaters have been shown to consume more energy-dense foods in response to negative emotions than non-emotional eaters (Oliver *et al.*, 2000). Moreover, Ozier *et al.* (2008) found a positive relationship between obese and overweight individuals, and emotional eating. Emotional eating is common among many individuals, and those with emotional eating problems do not always recognize it as an issue and seek help (Bekker *et al.*, 2004).

Individuals may approach weight loss as a long-term goal. However, an individual may forgo long-term goals in favor of meeting more immediate needs, one of which may be affect regulation. Such has been the case for Margaret. Although Margaret would like to maintain a healthy lifestyle and has made concerted efforts to engage in healthy eating, more proximal goals such as mitigating emotional distress have disrupted her higher order goal. Margaret engages in eating behavior, not to eliminate physical hunger, but to alleviate negative emotion. Similar occurrences result daily in Americans.

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Situational influences, including allaying emotional distress, can cause individuals to engage in eating activities to achieve short-term gratification at the expense of weight loss or maintenance goals.

Research in marketing has examined consumer choice and decision making regarding food consumption. Specifically, more recent research has focused on overeating and its link to external influences, including package size (Cheema and Soman, 2008), misleading health claims (Chandon and Wansink, 2007), and health references (Scott *et al.*, 2008). However, few studies in the behavioral literatures have offered an in-depth understanding of the phenomenology underlying emotional eating and eating disorders (Axelsen, 2009). The current research addresses this void and provides both theoretical and substantive contributions. First, it examines how more immediate goals of affect regulation and internal processes impact more goals of weight loss and maintenance. Second, the present study examines the role that social factors have in shaping eating behavior. For example, research shows that those individuals that report being frequently offered food to comfort themselves when they were upset as children were more likely to admit to frequent emotional eating as young adults (Brown *et al.*, 2009). Finally, this research focuses on the eating behaviors of women and the role of emotional eating in their lives (Martin, 2001; Synovate, 2009). It is widely suggested that women are under social pressure to restrict food intake, are more susceptible to criticism regarding body image (Pliner and Chaiken, 1990), and report more inherent dissatisfaction with weight (Alexander and Tepper, 1995). Furthermore, economic costs associated with obesity in women are greater than that for men (Caryn, 2010). Thus, understanding emotional eating among women is of particular importance.

More generally, investigating the nuances of emotional eating has significant consumer welfare implications because of high obesity rates in the USA and the failure of most diets (Flegal *et al.*, 2010). The present research offers insight into how programs might be developed to help individuals who may or may not be aware that they are eating in response to emotional states to become aware of such behavior and suggest ways in which healthier alternatives to manage emotions might be promoted.

Affect regulation theory

Convention suggests that individuals would rather feel good than bad (Isen, 1984). Lazarus (1991) proffered that when experiencing negative emotions, people try to improve their emotional state. Negative emotions are the emotions most commonly regulated, with individuals making proactive attempts to “down-regulate” or minimize negative experiential states (Andrade, 2005; Gross *et al.*, 2006).

Cialdini *et al.* (1973) developed the negative relief model, which proposes that one can relieve negative affective states by subjecting oneself to a positive reinforcing state.

Consumption is one strategy used by people experiencing negative emotions to attain positive reinforcement (Mick and Demoss, 1990; Tice *et al.*, 2001). For example, individuals may binge eat to decrease negative affect and subsequently increase positive affect (e.g., foods such as chips and gumbo

make Margaret feel better when she is sad). However, this is in contrast to the normal physiological response to negative affect, which should be a loss of appetite due to the effects of distress, including inhibition of gastric contraction and elevation of blood sugar (Bohon *et al.*, 2009). A segment of individuals consume food in response to negative affect despite normal physiological processes because of a heightened reward response to food intake. Bohon *et al.* (2009) found that self-reported emotional eaters showed greater activation in the parahippocampal gyrus and anterior cingulate (part of the brain’s reward system) in response to the anticipated receipt of a milkshake during a negative mood. Non-emotional eaters, however, showed decreased activation in the brain’s reward region during negative moods.

Subsequently, the drive for reward aggressively asserts dominance over the drive for balance in some individuals. Energy-dense foods tend to be reinforcing both psychologically and physiologically (Bell *et al.*, 2000). Additionally, emotional duress can deplete resources and contribute to a breakdown in self-control, which may make these individuals more vulnerable to eating temptations (Baumeister *et al.*, 1998). For example, some scholars have found evidence to suggest that stress can trigger eating behavior, and those individuals who live in more stress-ridden societies are more likely to be obese (Offer *et al.*, 2010).

In order to better understand emotional eating, and the plight of those like Margaret, an in-depth examination of both the internal and external factors that underlie the emotional eating phenomenon was undertaken in this research. Specifically, the narratives of emotional eaters as well as those who do not emotionally eat were examined to learn about antecedent states and factors that may lead to food overconsumption. By understanding the state of the emotional eater, the power that the tempting stimulus (food) exerts over the individual becomes more salient. Further, the role that normative behaviors play in influencing and reinforcing emotional eating and food overconsumption was investigated.

STUDY

Method

This research employed a hermeneutical interpretive approach to examine the emotional eating phenomenon (Thompson, 1997). Existential-phenomenological interviews were conducted to generate textual data for analysis. Such an approach allowed for a more comprehensive discovery of consumers’ thoughts, feelings, and behaviors, which can be used in designing meaningful interventions.

In order to recruit informants, we posted advertisements on bulletin boards at health clubs, neighborhood community centers, retailers, and social media sites, requesting interviews with women about their eating behavior. In an initial pool, 36 individuals who answered the advertisements were screened for this research by answering open-ended questions about whether they were an emotional eater and how frequently they eat to cope with their emotions (e.g., “How often do you find yourself eating in response to experiencing the following

emotions: sadness, anger, happiness, excitement?"), why they felt they were an emotional eater, and whether they had a desire to lose weight. Individuals were also asked to report their weight and height, which was used to calculate their body mass index (BMI) and weight status (e.g., overweight or normal weight).

We also interviewed non-emotional eaters. These were individuals who did not report that they engaged in eating behavior in response to their emotional state. The narratives of non-emotional eaters were used as a backdrop to better inform our understanding of factors that may distinguish emotional eaters from individuals that are able to exercise control over their eating habits.

Thirteen informants that were diverse in race/ethnicity, occupation, and marital status were selected on the basis of their responses to these questions and their willingness to openly share their experiences and feelings regarding their eating behavior (Table 1). Informants were from several large- to medium-sized cities in the USA. Nine of the participants had a BMI over 25 (overweight) or 30 (obese). Four of the informants (the non-emotional eaters) were of normal weight. Informants ranged in age from 20 to 50 years. Most informants had college degrees or at least some education beyond high school. Each informant was compensated \$10 for participating.

Open-ended and unstructured interviews were conducted face-to-face by using the long interview method (McCracken, 1988) to elicit information from informants. Interviews lasted approximately an hour, and focused on narrative and context when discussing issues related to eating and weight. All interviews were recorded and professionally transcribed. Upon reading of the text, several themes consistently emerged across informants' interviews. After further analysis, the authors arrived at a consensus regarding the identification of metathemes, which embodied the narratives of the emotional eating informants (McCracken, 1988; Thompson, 1997).

Additionally, meetings that were part of weight-loss programs (e.g., Weight Watchers and Jenny Craig) were visited, and the authors immersed themselves in the nutrition and weight-loss media (books, brochures, and websites). This allowed for a more thorough comprehension of the discourses surrounding nutrition, weight loss, and food overconsumption.

Specifically, insight was gleaned as to how emotional eating may play a major role in weight-loss attempts. From these meetings, it became clear that issues that needed to be addressed were ways in which individuals could cope *without* food in order to improve weight loss.

Emotional eating narratives

The narratives of the emotional eating informants uncovered just how profound effect emotions have on their consumption behavior. Many of the emotional eating informants discussed going through great lengths to suppress or shorten negative affective episodes by engaging in food-related consumption. This behavior was not evident in the narratives of the non-emotional eating informants. Three prominent themes emerged from the emotional eating informants' narratives. First, emotional eaters were more prone to consume and even overconsume indulgent or hedonic food products when experiencing negative emotions, such as stress/anxiety, loneliness, and sadness. Additionally, these emotional eaters expressed difficulties in exercising self-control in their eating behaviors when exhausted or depleted, either physically or emotionally. Conversely, non-emotional eaters did not report engaging in food-related consumption to suppress negative affect. Second, emotional eating informants often engaged in psychological processes such as prefactual thinking and rumination before consuming hedonic food products. Impaired by a capacity to resist temptation, emotional eating informants often deliberated about pursuing short-term emotional gratification in favor of long-term health goals. In contrast, non-emotional eaters were able to resist tempting episodes and only ruminated about food when they were hungry. Finally, informants that were emotional eaters indicated that they were engaging in "normative behaviors." They were more likely to have friends and family that consumed hedonic and unhealthy food products with them. These themes are further delineated through the narratives of the emotional eating informants.

Eating to manage negative emotions

A common feature of behavioral approaches to manage affect and emotions is the frequent use of self-reward. These techniques grow out of a tradition that views emotional disorders, especially depression, as being caused by a

Table 1. Informants ($N=13$)

Name (alias)	Age (years)	Ethnicity/race	Employment	Marital status	Place of residence	Eating status
Anne	20	African American	College student	Single	New Orleans, LA	Emotional eater
Margaret	44	African American	Manager	Divorced	New Orleans, LA	Emotional eater
Jennifer	20	African American	Unemployed	Single	New Orleans, LA	Emotional eater
Nancy	50	Asian American	Claim assistant	Married	New Orleans, LA	Emotional eater
Baby Blue	29	Asian American	Nail technician	Single	New Orleans, LA	Emotional eater
Storm	28	Asian American	Hairstylist	Married	Nashville, TN	Emotional eater
Sasha	25	Asian American	Retail	Single	New Orleans, LA	Emotional eater
Virginia	35	Latino American	Purchasing manager	Divorced	Austin, TX	Emotional eater
Barbara	46	African American	Healthcare professional	Single	Indianapolis, IN	Emotional eater
Laura	38	European American	Executive	Divorced	New Orleans	Non-emotional eater
Mae	22	European American	Social service specialist	Single	New York, NY	Non-emotional eater
Candy	42	Indo-Asian American	Educator	Married	Las Vega, NV	Non-emotional eater
Edna	50	Asian American	Educator	Single	Los Angeles, CA	Non-emotional eater

lack of appropriate reinforcing experiences (Cassano and Fava, 2002).

Emotional eating informants consistently cited how the experience of a specific or discrete negative emotion ignited eating behavior. In virtually all cases, informants indicated that they were not eating to eradicate hunger, but to assuage negative emotion.

When I am sad [eating] is the only thing that makes me feel better. My husband tries to cheer me up. . . When I am depressed or sad, I eat. (Storm)

When I am depressed I just eat and eat. A lot of times, I know that I am overdoing it. I am just hoping that the good food will make me feel better. (Jennifer)

I was just anxious and I'm like, I need to do something: I'll just eat. (Baby Blue)

It's easier sometimes to stop and take advantage of a candy bar. If I'm upset, it calms me down. (Barbara)

Eating to allay negative affect was not a behavior that non-emotional eaters enlisted. Many of them indicated that they engage in *other* behaviors when they are nervous or stressed. One informant mentioned that knitting was a favorite pastime of hers, and it helped her relieve stress. Others expressed how eating was the last thing on their minds when they were stressed.

Eating is not really something I consider doing when I am stressed or sad. In fact, there have been times when I have been so stressed that I have thought, "who can eat at a time like this," or I even forget to eat. (Laura)

The literature on self-regulation asserts that emotional duress can result in regulatory failure (Baumeister *et al.*, 1998). Self-regulatory resources operate like energy or strength that helps direct responses (Baumeister *et al.*, 1998). These resources are put into use when an individual attempts to modify, alter, or change his or her behavior. Self-regulatory resources can be reduced with use, and when various demands (some of which may be emotional) deplete these resources, individuals may fail at self-control. On a number of occasions, the emotional eating informants expressed earnest intentions to monitor and control food intake. However, with diminished regulatory resources, their resistance efforts failed.

I work out every day, most days, and I keep a daily diary. I'll start off, every morning and say, "Well this is what. . . in my mind I am going to eat. . . not anything else." I go work out and I'll stick to what I'm supposed to be eating, but then by the end of the day, I've eaten [other] stuff, and I feel guilty about the things I have eaten. (Margaret)

Hirschman and Loewenstein (1991) framed self-control as a struggle between desire and willpower. This conflict is represented by vacillation between impulse and immediate gratification, and forces that are more patient and logical and delay gratification in favor of long-term gains or goals (Hirschman and Loewenstein, 1991). Several of the informants described such a psychological conflict that manifested during

eating episodes. Additionally, as reflected in Margaret's aforementioned verbatim, food overconsumption was typically followed by some form of guilt. This is consistent with previous research on guilt (Giner-Sorolla, 2001) where after indulging in hedonic foods people experience guilt. However, often they will eventually curtail such indulgent behaviors to alleviate guilt and to secure self-esteem. This was typically not the case with emotional eating informants. Emotional eaters would consistently engage in the same guilt-producing behavior.

You know you shouldn't be eating this but you're eating it anyways. I'll open the fridge and I'm like, don't get anything, just close it, but I'll still do it. And then while I'm eating it, I'll keep that mentality like, this is really bad. (Virginia)

When I'm angry I eat and cry. After I eat, I feel stupid. I know that it is going to be bad for me. Then I think back and say, "Well, if I don't eat, I will feel depressed and angry." I feel like if I grab something to eat, I will forget about the moment. (Nancy)

Emotional eating informants, unlike their non-emotional eating counterparts, also referenced specific negative emotions that triggered food consumption. This behavior is potentially destructive because food was being consumed when individuals were not hungry, and research has shown that meals consumed in negative and positive moods are often larger than those eaten during neutral mood states (Patel and Schlundt, 2001). Further, many informants alluded to a breakdown in self-regulation or control, which spurred excessive eating. Even though emotional eating informants admitted to experiencing this failure of control frequently, they also discussed a cognitive awareness as well as thoughts of justification they entertained before emotionally driven eating episodes.

Prefactual thinking and rumination

Individuals may evaluate the consequences of alternatives and outcomes (Johnson and Sherman, 1990). Gleicher *et al.* (1995) referred to such deliberations as prefactuals. Prefactual thinking occurs when individuals contemplate imaginary alternatives to events in terms of the ramifications these events may have in the future. Consequently, people's behavior may be dictated by what their thoughts imply for the future. Prefactuals occur before a decision is made. For example, an individual may think to him or herself, "If I buy this sweater today and it goes on sale tomorrow, will I regret it?"

Prefactual thinking may take on different forms. Two types of prefactual thinking include hedonic rationalization and cognitive deliberation (Moore and Bovell, 2008). Hedonic rationalizations are thoughts that people use to justify conceding to a temptation or a consumption experience. If an individual were contemplating eating ice cream after dinner, he or she might think, "I should have this ice cream because I deserve it." In contrast, cognitive deliberations are thoughts that focus on indulging in a temptation but reflect an individual's resolve not to yield to a temptation (Shiv and Fedorikhin, 1999; Moore and Bovell, 2008). Individuals enlisting cognitive deliberations may exhibit

more long-term orientations and be willing to make sacrifices in the immediate to achieve specific goals in the future. An example of a cognitive deliberation might be, "If I eat this ice cream, I'll consume more sugar than I should have today."

Prefactual thinking, in the form of hedonic rationalizations and cognitive deliberations, can be driven by consumers' emotional response to a stimulus, whether it be the product itself or an advertisement for a product of interest. Prefactual thinking can subsequently influence consumption and purchase behavior. Moreover, consumption experiences can be justified as a reward for hard work or for surviving a bad day.

The non-emotional eating informants also admitted to enlisting prefactual thoughts when exposed to tempting food stimuli. The difference between non-emotional eaters and emotional eaters was that cognitive deliberations were employed more frequently by the non-emotional eaters, which would enable them *not* to succumb to certain temptations.

I think very hard about eating unhealthy food items all the time. I frequently talk myself out of eating something unhealthy. (Candy)

Although many of the emotional eating informants expressed that losing weight was a goal for them, few made comments, which suggested that they engaged in cognitive deliberations regarding food choices when experiencing emotional duress. Instead, their comments reflected feelings of entitlement toward indulgence and suggested that before consuming a hedonic food item, they often rationalized in favor of the product—enlisting hedonic rationalizations.

After the hurricane (Hurricane Katrina), I was going through a very stressful time in my life, and felt that whatever I could eat to make myself feel better, I deserved it. Everybody was cooking great food anyway. (Anne)

Two hundred eighty calories for this little candy bar. . . I wonder if it's worth it? Or maybe if I eat this, I'll eat half of my dinner. (Sasha)

I know it's weird, but it's definitely a mental thing because I'm eating French fries and it's ok, because I deserve it. (Baby Blue)

Many of the emotional eating informants also reported that they had a tendency to focus, in a repetitive manner, on negative feelings and distress. They indicated that it was not uncommon for them to question why they were experiencing negative feelings over and over (e.g., "I feel so down and blue. What's wrong with me?"—Storm). The propensity to focus on recurring episodes or negative feelings and thinking about them in a passive manner is characterized as rumination (Martin and Tesser, 1996). Rumination is the occurrence of *repetitive* and *intrusive* thoughts, and defined as conscious thinking directed toward an object (Martin, 1996). Research shows that the propensity to ruminate varies across individuals (Calmes and Roberts, 2009). Some individuals naturally ruminate more than others. For those who ruminate more than others, research shows that rumination is largely maladaptive and more akin to brooding because it involves repetitive thoughts that are not directed at resolving the problem (Morrow and Nolen-Hoeksema, 1990). Further, studies have

shown that ruminating individuals do not actively engage in problem-solving, and if they do attempt to find solutions to the problem, the solutions they generate are often of lower quality than solutions they might develop if they were not ruminating (Lyubomirsky and Nolen-Hoeksema, 1995). Moreover, victims of interpersonal offenses often ruminate on the specifics of a hurtful situation, which can lead to negative psychological and relational outcomes. Research has found links between rumination, and cognitive and emotional disturbance, including pessimistic thinking, depression, anxiety, and decreased feelings of control over one's life (Just and Alloy, 1997). In particular, women are more likely than men to report greater ruminative propensities (Calmes and Roberts, 2009).

Ruminative propensities may eventually lead to behaviors where individuals fantasize about how eating will allow them to escape negative feelings, and this fantasizing and excessive eating have been argued to serve as a means of avoiding one's true problems (O'Guinn and Faber, 1989; Hirschman, 1992). Whereas the non-emotional eating informants indicated that they only thought about food when they felt hungry, many of the emotional eating informants expressed that they would use food as a solution to numb or distract themselves from their negative feelings. In a number of instances, they expressed ruminative thoughts about potential food consumption experiences. For example:

I have these greens in my freezer, frozen greens that one of my neighbors gave me Sunday. I have been dreaming about when I'm going to cook them. . . thinking about it every day. I got them Sunday and today is Wednesday and it is on my mind. When am I going to cook those greens. (Margaret)

If I'm at home, I will open my refrigerator so often. I open the refrigerator and find anything I can see—it has to be salty, not sweet. Like a piece of meat, like turkey or ham, or something like that. I just ball it up and eat, and then I walk off a little bit and try to watch TV or something to, I guess to keep my mind off it. And then a few minutes later. . . the stress came back again. I go back to the kitchen and I'll find some chips or something salty to eat. (Nancy)

Emotional eaters also expressed that the marketing of hedonic food products played an important role in promoting hedonic rationalizations and rumination. Such marketing stimuli had minimal impact on non-emotional eaters, and some even viewed such advertisements with scorn and disbelief:

When I see some advertisements for food, I think it is misleading and even disgusting. Often the food really does not taste that great, and besides, it is unhealthy for you. (May)

I tend to be skeptical about food ads, especially junk food. (Edna)

In contrast, many of the emotional eating informants described advertisements for food products as especially provocative, convincing, and persuasive.

[Advertising] can be super convincing. The other day I saw a commercial for Dairy Queen, a blizzard, and I was like, I have to have one. (Sasha)

I was really trying to lose weight so that I could fit better in a dress I wanted to wear to an upcoming event, but I was feeling a little down one day, and I saw a commercial on TV for ice cream. I just had to go out and get some. (Anne)

Sonic has like this blizzard ice cream thing. I don't know what it is, but I see it, I'm like I want brownies and I want chocolate and I want cookies... So, I try not to watch these advertisements because I know I'm going to want it when I see it. (Anne)

The emotional eating informants also noted that packaging served as a compelling promotional apparatus for them. However, when asked if they looked at the nutrient content information on the package, which food marketers are federally mandated to provide (FDA, 2009), most indicated a lack of motivation to process this nutrition information. Rather, they expressed a desire to remain oblivious about the nutrient content levels of foods and, instead, enlisted hedonic rationalizations in favor of the food item. This may be because these informants were trying to prevent subsequent feelings of consumption guilt. Consumption guilt occurs when negative emotions or feelings of guilt manifest themselves when consuming a good or service (Lascu, 1991; Kivetz and Simonson, 2002). Part of the marketer's task is often to help diminish guilt by telling consumers that the guilt they experience due to overindulgence is not a cause for torment—that pleasure should take precedence over their conscience. Lascu (1991) proposed that one way to address possible feelings of guilt is to create a state of “guiltless hedonism” in the consumer. This involves getting consumers to anticipate the enjoyment of a product instead of feeling guilty about consuming it. One of the emotional eating informants reflects:

[I don't read information on the back of packages]... Because if I feel like I'm going to eat it, it doesn't matter what it is because if that's what I feel like eating, I'm going to eat it. (Margaret)

Distinct from non-emotional eaters, emotional eaters indicated that negative emotions, cognitive accounting in the form of hedonic rationalizations, and ruminative propensities played a major role in contributing to food consumption. Understanding these internal processes appears essential to understanding the emotional eating phenomenon. However, both types of informants (emotional eaters and non-emotional eaters) revealed that their eating behavior is impacted by not only psychological factors but also normative factors, including the attitudes and behaviors of others. The role of social norms in eating behavior is discussed next.

Social norms

Social norms are the beliefs about behavior that reflect the perceived social pressure to perform or not perform a behavior (Fishbein and Ajzen, 1975). The prevalence of a behavior or perceived approval of the behavior among important reference groups increases the probability that an individual will perform a behavior. Eating behavior is highly subjected to social norms

(Bekker *et al.*, 2004), and social expectations regarding food consumption have changed over the years. Access to, and the promotion of large amounts of high-calorie foods, with minimal nutritional value, is normal in the current marketplace. More often than not, it is such high-carbohydrate and high-calorie foods that many emotional eaters consume when attempting to allay negative emotional states.

There was consensus between both our informant types (emotional and non-emotional eaters) that the focus of many social activities is centered on food. However, the emotional eating informants expressed how such encounters might be outlets for them to engage in emotional eating. Particularly, eating with family and friends appeared to be a pleasurable experience for them. Studies have linked food overconsumption to social facilitation. Specifically, when people are around those whom they feel comfortable (i.e., family and friends), they are “socially facilitated” to eat more than when they eat alone (de Castro, 1990).

I love going out to eat with my friends. Most of our outings involve eating. It makes me feel good. Sometimes we overdo it [with eating], but I am trying to be better. (Anne)

Research has demonstrated that when people eat in groups (particularly among family and friends), they can eat up to 40 to 50 per cent more than when they eat alone (de Castro, 1990; Redd and de Castro, 1992). Overeating may occur because of the duration of the meal, as well as the meal size (Redd and de Castro, 1992). Additionally, a positive association has been found between the number of eating companions (namely, family and friends) and the extent of increased food intake (Redd and de Castro, 1992).

Although our non-emotional eating informants indicated that they enjoyed sharing meals with family and friends, most indicated that they were able to exercise self-control when around family and not overconsume.

I don't usually eat differently around people. (Edna) I eat the same regardless of who I'm surrounded by. (Candy)

In contrast, many of the narratives of our emotional eaters, particularly those who had strong familial relationships, echo the findings of prior research related to social facilitation:

I just love food. My family members were big eaters. We cook big meals. We have a lot of gatherings and we eat appetizers, soups, entrees and we always have dessert. Any gathering we have, we have to have dessert. Somebody's making bread pudding, plum cake, pie, and cookies. (Storm)

During the weekday, I'm okay. Weekends, that's my weakest point because family is coming home and gatherings. It's very hard, very hard on the weekends. (Nancy)

My sister is my eating buddy. I do all the cooking, invite her over and we eat together. (Margaret)

Studies suggest that emotional eating may in fact be a part of early consumer socialization (Marshall *et al.*, 2007). A child's diet and eating behavior is shaped by exposure to specific foods and parental modeling along with parental

monitoring and concerns (Grier and Moore, 2012). Parents can implement rules for snacking and can control a child's accessibility to food. In some cases, parents may reward children with treats like cake and candy to allay negative affect from minor incidents (e.g., scraping a knee). The learning provided by the process of reward and its association may set the stage for emotional eating behavior. Research shows that those individuals who report being frequently offered food to comfort themselves when they were upset as children were 2.5 times more likely to admit to frequent emotional eating as young adults (Brown *et al.*, 2009). Similarly, nostalgia for family experiences, a phenomenon that begins in childhood and can last a lifetime, has been found to influence eating behavior (Moore *et al.*, 2002). Nostalgic bonding, which may include warm memories of eating certain foods at home and with family, can come to be identified as sources of pleasure or may help individuals in overcoming feelings of loneliness and sadness (Holbrook and Schindler, 2003). Findings from our informants indicated that they all had nostalgic eating experiences:

My mom makes this crunchy stuff called Kacharup. I love it. It's like chex mix, but her creation. It makes me feel like a little kid again. (Candy)

However, emotional eating informants were more likely to indulge in nostalgic eating experiences when they experienced negative affect. For example:

I was just feeling lonely. I am in a relationship, but I'm not married. I've been married. So when I am by myself, I'll just eat . . . A tortilla makes me feel very comfortable. I guess because growing up they were always at home, they smelled so good, and my Mother would make them. I would have one when I was upset. (Virginia)

Social factors, including food marketing, can play a crucial role in shaping eating behavior. Social activities may promote and facilitate food overconsumption for some. Additionally, findings suggest that eating to allay negative emotions may be a part of early consumer socialization.

DISCUSSION

This research explored both the internal and external processes that underlie emotional eating behaviors. As suggested by affect regulation theory, our findings show that individuals use food in an attempt to influence the emotions they have, when they have them, and how they express their emotions. Emotional eating informants, unlike their non-emotional eating counterparts, engaged in food consumption to achieve short-term gratification from negative feelings. Negative emotions are the emotions most commonly regulated, with individuals making proactive attempts to down-regulate or minimize negative experiential states. For several of the emotional eating informants, regulating emotional distress took precedence over impulse control. Because of their emotional state, these individuals may have experienced a reduction in resources, which contributed to regulatory

failure. Monitoring and controlling food intake became challenging when experiencing emotional distress.

Also, findings identify two internal processes, namely, prefactual thinking and rumination, as underlying psychological mechanisms that contribute to behavior that promotes immediate gratification. Findings suggest that both informant types engaged in prefactuals before consuming tempting food. For the emotional eaters, these prefactuals often manifested as hedonic rationalizations where justifications were made as to why they should surrender to a tempting food consumption experience. Further, the prevalence of food marketing stimuli contributed to frequent ruminations by the emotional eating informants about food. Many of the emotional eating informants found packaging and advertisements for food products to be especially convincing and persuasive.

Findings also demonstrate that external influences such as social norms and consumer socialization may impact long-term goal attainment. Our informants' narratives illustrate how eating behavior may be supported by social norms, environmental cues, and social facilitation. For the emotional eating informants, this impact was more pronounced. The emotional eating informants indicated that they frequently engaged in large family meals and that the sharing of a meal often served as a form of entertainment. Further, our findings suggest how emotional eating may be learned behavior, because of receiving food as comfort, as a reward, or as a nostalgic memory.

Substantive implications

The insights provided by the present research can assist in understanding and helping to reduce the negative outcomes of emotional eating. Given the link between emotional eating and overconsumption, findings highlight the importance of addressing emotional eating in not only adults but also children. Marketers and researchers should employ both internally and externally focused social marketing strategies. Key internal and external approaches implied by this research, including social marketing campaigns and strategies for improving consumer choice, are enumerated next.

Social marketing campaigns

Emotional eating affects many individuals; however, as noted, most individuals do not seek appropriate help (Spoor, 2007). An important first step in any marketing campaign, whether social or commercial, is the development of consumer awareness about the offer (Rothschild, 1999). Establishing that emotional eating is a serious and important problem worthy of the attention of consumers, social marketers, and researchers scholars might initiate a type of "public agenda setting" that would help in effecting change.

An issue that has received much controversy is the role of marketing in encouraging emotional eating. The ubiquity of food, such as restaurants in gas stations, increased portion sizes, misleading health claims, emotionally based promotional appeals that mitigate consumption guilt, and a culture that promotes snacking are all viewed as important contributors to overeating. However, other than "truth in advertising," there are no restrictions on the type and nature of hedonically focused marketing efforts to adults. Thus, results from our

research highlight the importance of countermarketing efforts. Although countermarketing has been prevalent in tobacco, it is just now starting to be used with food. For example, social marketing activities to counter advertising emotional lure or to demarket fatty foods to emotional eaters might help reduce overconsumption of these products.

Additionally, important marketing tools may assist in the creation of healthier behaviors at a broad level. For example, food marketers are federally mandated to provide nutrition information on packaged goods (FDA, 2009). However, our emotional eater participants noted that they avoided labels and instead expressed a desire to remain oblivious about the nutrient content levels of foods. Identifying the types and nature of food information that support recognition of food content and its potential weight effects can contribute to the development of healthier eating behavior.

Strategies for improving choice

Our emotional eating informants referred to a cognitive awareness before eating episodes, where they engaged in hedonic rationalizations and rumination about food choices. These individuals need to be empowered to confidently make appropriate consumption decisions. Programs such as Weight Watchers encourage individuals to make themselves a priority, to curtail surreptitious eating behavior, and to rethink unhealthy behaviors learned in childhood (Weight Watchers, 2011) in order to combat emotional eating and make better food choices. Furthermore, research suggests that individuals are more likely to make better food choices when they possess high levels of emotional ability (adeptness in managing emotions) as well as high levels of confidence in those abilities (Kidwell *et al.*, 2008). Individuals that have high levels of emotional ability and confidence are said to be emotionally calibrated (Alba and Hutchinson, 2000; Kidwell *et al.*, 2008).

Emotional eaters are biased in making food choice decisions because they often make decisions solely on the basis of emotion, which may lead to overeating. Because research suggests that consumer emotional calibration is an important predictor of food choice, social marketing programs might be developed to support individuals' knowledge about how to enhance their emotional coping abilities. Such efforts to enhance emotional ability and build confidence might include activating deliberations against consuming a tempting, hedonic food product, which might reduce ruminative propensities. Further, individuals that practice temperance in their consumption habits can receive intrinsic rewards such as better health and longer life, and may even serve as role models in helping others combat destructive eating behavior.

Moreover, because many of the informants in this research struggled with an inability to regulate or control eating behaviors, they might be aided in their regulatory processes by not only adopting restriction goals (avoiding foods high in fat and sugar) but also re-categorizing alternatives (Poynor and Haws, 2009). Instead of eating being an option or alternative used to manage emotions, individuals might re-categorize alternatives by engaging in non-eating activities such as meditation, yoga, connecting with others, and distraction to reduce emotional duress. Exploratory research

among obese women has found that relaxation training can be a useful strategy in curbing emotional eating (Manzoni *et al.*, 2009). Additional research may shed light on the effectiveness of such interventions that redirect consumer choice and behaviors.

Restructuring social norms

Our findings also suggest that social norms play a crucial role in explaining emotional eating behavior and underscore the importance of habitual behaviors. Informants noted that they consumed more food when in the company of others, particularly friends and family. They also indicated that outings with friends were almost ritualistic in nature in that they involved eating. These "ritual events" appear to be an important facilitator for emotional eating.

Emotional eating informants might benefit if some of their rituals—getting together with family and friends—might be re-defined to include more healthy behaviors. For example, instead of having a get-together with friends where the primary focus is eating, friends might meet for a non-food-related activity such as horseback riding, canoeing, or a day at the spa.

Emotional eating informants also intimated that their emotional eating proclivities may have in fact been developed during childhood. Research has shown that parents can model aversive eating behavior for their children (Elfhag and Linne, 2005). Programs might be used to help parents cultivate healthier relationships with food. Specifically, increased awareness among adult emotional eaters of the consequences of their behavior, not only for themselves but also for their children's food-related behaviors, is an important starting point. As a result, family meals might be reconceptualized to include healthier foods, as opposed to those which are high in fat and sugar. Parents might also be encouraged to teach their children how to cope with emotions as opposed to anticipating or using food as positive reinforcements.

The findings of the present research show that meanings underlying food-related consumption are multi-faceted. Food is an integral part of culture, and many individuals use it as a source of comfort. Emotional eating is a common behavior that plagues many individuals and can facilitate overconsumption and serious health consequences. Emotional eating is a behavior embedded in internal experience as well as in an external social context. In delineating awareness of the influence of individual and social factors on the relationship between emotions and eating behavior, the present research contributes to the goal of increasing consumer well-being.

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REFERENCES

- Alba JW, Hutchinson JW. 2000. Knowledge calibration: what consumers know and what they think they know. *Journal of Consumer Research* 27 (September): 123–156.
- Alexander J, Tepper B. 1995. Use of reduced-calorie/reduced-fat foods by young adults: influence of gender and restraint. *Appetite* 25: 217–230.
- Andrade EB. 2005. Behavioral consequences of affect: combining evaluative and regulatory mechanisms. *Journal of Consumer Research* 32(12): 355–362.
- Axelsen M. 2009. The power of leisure: I was an anorexic, I'm now a healthy triathlete. *Leisure Sciences* 31(July–September): 330–346.
- Baumeister R, Bratslavsky E, Muraven M, Tice DM. 1998. Ego depletion: is the active self a limited resource? *Journal of Personality and Social Psychology* 74(5): 1252–1265.
- Bekker MHJ, van de Meereendonk C, Mollerus J. 2004. Effects of negative mood induction and impulsivity on self-perceived emotional eating. *International Journal of Eating Disorder* 36(4): 461–469.
- Bell ME, Bhatnagar S, Liag J, Soriano L, Nagy TR, Dallman MF. 2000. Voluntary sucrose ingestion, like corticosterone replacement, prevents the metabolic deficits of adrenalectomy. *Journal of Neuroendocrinology* 12(5): 461–470.
- Bohon C, Stice E, Spoor S. 2009. Female emotional eaters show abnormalities in consummatory and anticipatory food reward: a functional magnetic resonance imaging study. *International Journal of Eating Disorders* 42(3): 210–221.
- Brown SL, Schiraldi GR, Wroblewski PP. 2009. Association of eating behaviors and obesity with psychosocial and familial influences. *American Journal of Health Education* 40(March/April): 80–89.
- Calmes CA, Roberts J. 2009. Rumination in interpersonal relationships: does co-rumination explain gender differences in emotional distress and relationship satisfaction among college students? *Cognitive Therapy and Research* 32(4): 577–590.
- Caryn R. 2010. *Obesity costs women more study finds*. New York Times, Late Edition: New York, NY; 6.
- Cassano P, Fava M. 2002. Depression and public health, an overview. *Journal of Psychosomatic Research* 53: 849–857.
- de Castro JM. 1990. Social facilitation of duration and size but not rate of the spontaneous meal intake of humans. *Physiology and Behavior* 47: 1129–1135.
- Center for Disease Control and Prevention. 2009. CDC Newsroom Press Release July 27, 2009. Available at www2.cdc.gov/podcasts/download.asp?f=4914966&af=h&t=1 [accessed 10 January 2010].
- Chandon P, Wansink B. 2007. Obesity and the calorie underestimation bias: a psychophysical model of fast-food meal size estimation. *Journal of Marketing Research* 44(February): 84–99.
- Cheema A, Soman D. 2008. The effects of partitions on controlling consumption. *Journal of Marketing Research* 45(6): 665–675.
- Cialdini RJ, Darby BL, Vincent J. 1973. Transgression and altruism: a case hedonism. *Journal of Experimental Social Psychology* 9: 502–556.
- D'Arrigo T. 2007. Emotional eating: a sneak attack on weight loss. *Diabetes Forecast* 60(8): 23.
- Elfhag K, Linne Y. 2005. Gender differences in associations of eating pathology between mothers and their adolescent offspring. *Obesity* 13(6): 1070–1076.
- FDA. 2009. Labeling and nutrition. Available at <http://www.fda.gov/food/labelingnutrition/default.htm> [accessed on 4 December 2009].
- Fishbein M, Ajzen I. 1975. *Belief, Intention and Behavior: An Introduction to Theory and Research*. Addison-Wesley: Reading, MA.
- Flegal KM, Carroll MD, Ogden CL, Curtin LR. 2010. Prevalence and trends in obesity among US Adults, 1999–2008. *Journal of the American Medical Association* 303(3): 235–241.
- Giner-Sorolla R. 2001. Guilty pleasures and grim necessities: affective attitudes in dilemmas of self-control. *Journal of Personality and Social Psychology* 80(February): 206–221.
- Gleicher FD, Boninger D, Strathman A, Armor D, Hetts J, Ahn M. 1995. With an eye toward the future: the impact of counterfactual thinking on affect, attitudes, and behavior. In Roese NJ, Olson JM (eds). *What Might Have Been: The Social Psychology of Counterfactual Thinking*. Erlbaum: Mahwah, NJ; 283–304.
- Grier SA, Moore ES. 2012. Tackling the childhood obesity epidemic: An opportunity for transformative consumer research. In Transformative consumer research for personal and collective well-being. Mick, David Glen (Ed.), Pettigrew, Simone (Ed.); Pechmann, Cornelia (Ed.); Ozanne Julie L. (Ed.); New York, NY, US: Routledge/Taylor & Francis Group, 303–332.
- Gross J, Richards JM, John OP. 2006. Emotion regulation in everyday. In Snyder DK, Simpson JA, Hughes JN (eds). *Life Emotion Regulation in Families*. American Psychological Association: Washington, D.C.; 1–34.
- Hirschman EC. 1992. The consciousness of addiction: toward a general theory of compulsive consumption. *Journal of Consumer Research* 19(September): 155–179.
- Hirschman EC, Loewenstein, GF. 1991. Time-inconsistent preferences and consumer self-control. *Journal of Consumer Research* 17 (March): 492–507.
- Holbrook MB, Schindler RM. 2003. Nostalgic bonding: exploring the role of nostalgia in the consumption experience. *Journal of Consumer Behaviour* 3(2): 107–127.
- Isen A. 1984. The influence of positive affect on decision making and cognitive organization. *Advances in Consumer Research* 11: 534–537.
- Johnson MK, Sherman SJ. 1990. Constructing and reconstructing the past and the future in the present. In Higgins TE, Sorrentino RM (eds). *Handbook of Motivation and Cognition Foundations of Social Behavior*. Guilford Press: New York, NY; 482–526.
- Kidwell B, Hardesty DM, Childers TL. 2008. Emotional calibration effects on consumer choice. *Journal of Consumer Research* 35 (December): 611–621.
- Kivetz R, Simonson I. 2002. Self-control for the righteous: toward a theory of precommitment to indulgence. *Journal of Consumer Research* 29(2): 199–217.
- Konttinen H, Mannisto S, Sarlio-Lahteenkorava S, Silventoinen K, Haukkala A. 2010. Emotional eating, depressive symptoms and self-reported food consumption. A population-based study. *Appetite* 54(3): 473–479.
- Lascu DN. 1991. Consumer guilt: Examining the potential of a new marketing construct. *Advances in Consumer Research* 18: 290–295.
- Lazarus RS. 1991. Progress on a cognitive–motivational–relational theory of emotion. *The American Psychologist* 46(August): 819–834.
- Lyubomirsky S, Nolen-Hoeksema S. 1995. Effects of self-focused rumination on negative thinking and interpersonal problem solving. *Journal of Personality and Social Psychology* 69: 176–190.
- Manzoni G, Mauro F, Pagnini A, Gorini A, Preziosa G, Castelnuovo E, Molinari E, Riva G. 2009. Can relaxation training reduce emotional eating in women with obesity? An exploratory study with 3 months of follow-up. *Journal of the American Dietetic Association* 109(8): 1427–1432.
- Marshall D, O'Donohoe S, Kline S. 2007. Families, food and power pester: beyond the blame game? *Journal of Consumer Behaviour* 6: 164–181.

- Martin L, Tesser A. 1996. Clarifying our thoughts. In *Ruminative thoughts*. Wyer, Robert S., Jr. (Ed.); Hillsdale, NJ, England: Lawrence Erlbaum Associates, Inc, 189–208.
- Martin EW. 2001. Emotional eating. *Psychology Today* 34: 20.
- McCracken G. 1988. *The Long Interview, Qualitative Research Methods Series 13*. Sage: Newbury Park, CA.
- Mick DG, Demoss M. 1990. Self-gifts: phenomenological insights from four contexts. *Journal of Consumer Research* 17(12): 322–332.
- Moore DJ, Bovell LJ. 2008. The affective–cognitive model of stimulus-based affect: individual differences in response to the vividness of product descriptions? *Advances in Consumer Research* 35: 695–696.
- Moore ES, Wilkie WL, Lutz RL. 2002. Passing the torch: intergenerational influences as a source of brand equity. *Journal of Marketing* 66(2): 17–37.
- Morrow J, Nolen-Hoeksema S. 1990. Effects of response to depression on the remediation of depressive affect. *Journal of Personality and Social Psychology* 58(3): 519–527.
- O’Guinn TC, Faber RJ. 1989. Compulsive buying: a phenomenological exploration. *Journal of Consumer Research* 16(September): 147–156.
- Offer A, Pechey R, Ulijaszek S. 2010. Obesity under affluence varies by welfare regimes: the effect of fast-food, insecurity and inequality. *Economics and Human Biology* 8: 297–308.
- Oliver G, Wardle J, Gibson EL. 2000. Stress and food choice: a laboratory study. *Psychosomatic Medicine* 62: 853–865.
- Ozier AD, Kendrick O, Leeper J, Knol L, Perko M, Burnham J. 2008. Overweight and obesity are associated with emotion- and stress-related eating as measured by the eating and appraisal due to emotions and stress questionnaire. *Journal of the American Dietetic Association* 108(1): 49–56.
- Patel KA, Schlundt DG. 2001. Impact of moods and social context on eating behavior. *Appetite* 36: 111–118.
- Pliner P, Chaiken S. 1990. Eating, social motives, and self-presentation in women and men. *Journal of Experimental Social Psychology* 26: 240–254.
- Poynor C, Haws KL. 2009. Lines in the sand: the role of motivated categorization in the pursuit of self-control goals. *Journal of Consumer Research* 35(February): 772–787.
- Redd M, de Castro JM. 1992. Social facilitation of eating: effects of social instruction on food intake. *Physiology and Behavior* 52: 749–754.
- Rothschild ML. 1999. Carrots, sticks, and promises: a conceptual framework for the management of public health and social issue behaviors. *The Journal of Marketing* 63(4): 4–37.
- Scott ML, Nowlis SM, Mandel N, Morales AC. 2008. The effects of reduced food size and package size on the consumption behavior of restrained and unrestrained eaters. *Journal of Consumer Research* 35(October): 391–405.
- Shiv B, Fedorikhin A. 1999. Heart and mind in conflict: the interplay of affect and cognition in consumer decision making. *Journal of Consumer Research* 26(3): 278–292.
- Spoor ST. 2007. New life sciences study results from University of Texas, Department of Psychology. *Women’s Health Weekly* 28 (June): 149.
- Swinburn BA, Caterson I, James WPT. 2004. Diet, nutrition and the prevention of excess weight gain and obesity. *Public Health Nutrition* 7: 123–144.
- Synovate Market Research. 2009. A matter of taste? Available at <http://www.synovate.com/news/article/2009/06/a-matter-of-taste-synovate-survey-weighs-food-issues.html> [accessed 10 June 2009].
- Thomaselli R. 2007. GSK diet drug: from failure to blockbuster. *Advertising Age* 78(July): 3–5.
- Thompson CJ. 1997. Interpreting consumers: a hermeneutical framework for deriving marketing insights from the texts of consumers’ consumption stories. *Journal of Marketing Research* 34(November): 438–455.
- Tice DM, Bratslavsky E, Baumeister RF. 2001. Emotional distress regulation takes precedence over impulse control: if you feel bad, do it! *Journal of Personality and Social Psychology* 80(1): 53–67.
- Weight Watchers. 2011. Start living start loosing. Available http://www.weightwatchers.com/util/art/index_art.aspx?tabnum=1&art_id=46211&sc=3046 [accessed 15 April 2011].