Institute of Education



Fast Food and Childhood Obesity: Evidence from the UK

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Excess weight in childhood and adolescence, by gender



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overweight obese



- Fast food outlets incl. chip shops, burger bars and pizza places account for more than a quarter (26%) of all eateries in England
- 34% increase in fast food outlets from 2010 to 2018 in the UK
- England's poorest areas have 5 times more fast food outlets than the most affluent



Research Question: does proximity to fast food restaurants affect childhood obesity rates?

Challenge - associations between the two may reflect socioeconomic deprivation rather than the presence of fast food outlets

Most papers based on cross-sectional data, or v local/small scale studies - must be interpreted cautiously ...



Takeaway clampdowns 'may combat obesity epidemic'

By Helen Briggs BBC News

3 14 March 2014





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Restricting the number of fast-food outlets around offices and homes could help combat the obesity epidemic, UK researchers say.

Research Question: does proximity to fast food restaurants affect childhood obesity rates?

 Longitudinal, nationally representative data combined with highly granular geographic data provide unique opportunity to provide causal evidence for effective policy



Data

- 1. Very detailed geo data on availability of fast food outlets across Great Britain:
- OS 'Points of Interest' 4 million+ commercial and public (non-residential) organisations over 600 categories including fast food, supermarkets, green food stores etc. (2005 -)
- OS 'MasterMap' including road networks, building polygons, aerial photography and building heights (enabling 3D analysis) datasets (1997 -)

2. Millennium Cohort Study - BMI measures over time throughout childhood/adolescence, plus rich data on children's backgrounds from birth

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Geo Data

The local food environment around secondary schools in central London



1 Kilometers

0.25

0.5

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OS MasterMap Crown Copyright Data downloaded September 2019 from Edina Digimap

Methodology

- Fixed effect methods in longitudinal data are better than OLS to estimate causal relationships because control for unobservable time-invariant confounders.
- Control for time-varying characteristics (e.g. physical activity, skip breakfast, etc.)
- Fast Food: McDonalds, KFC, Burger King, Wimpy, Subway, Pizza Hut, and Dominos' Pizza, Fish and Chips shops, Kebab shops, and Chicken shops.

Model 1:
$$Y_{it} = \alpha_i + \beta F_{it}^{k} + \rho X_{it} + \varepsilon_{it}$$

Model 2: $Y_{it} = \alpha_i + \gamma_1 F_{it}^{400} + \gamma_2 F_{it}^{400-800} + \gamma_3 F_{it}^{800-1600} + \rho X_{it} + \varepsilon_{it}$

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Preliminary Results

- A significantly positive association between the number of fast-food restaurants located near children's households (and children's schools) and Body Mass Index (BMI) and Body Fat
- Estimates are higher among those children whose parents have relatively low levels of education, exacerbating inequalities
- At ages 11-14, estimates are higher around cohort members' schools, consistent with transition to secondary school



Effect of Fast Food Restaurants on BMI

FE and OLS

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- Controlling for unobservable timeinvariant confounders
- OLS overestimate effects

Model 1

0-800m 0-1600m

0-400m



BMI

Effect of Fast Food Restaurants on BMI



- An additional fast food outlet within 1600m of home increases cohort members' BMI by 0.04 points, a 0.19% increase over the sample mean of 19
- Positive and significant effect between 400-800m distance of cohort member school

Differences by Maternal Education



 Estimates are higher and statistically significant for those from less educated backgrounds (NVQ 0-3, versus NVQ 4-5)





Differences by Age

BMI

7-11 years



Higher effects among cohort members in the 11-14 age period – consistent with move to secondary school, increased autonomy







- Increase in the number of fast-food restaurants located near children's households (and children's schools) is associated with increases in Body Mass Index (BMI) and Body Fat.
- Buffers between 400m and 1600m matters
- Small effects, consistent with existing causal evidence (mainly in the US)
- Exposure to fast-food restaurants throughout adolescence could exacerbate socioeconomic inequalities in health outcomes
- Transition to secondary school is a relevant period