The Safeway at Georgia Avenue and Randolph Road in northwest Washington, DC is just one block from the Petworth Metro Station, in an up-and-coming but transitional neighborhood of low-to-middle-income families and working professionals. The blighted store is in the capital of the most powerful nation in the world, but its customers have no deli, salad bar, or bakery; fresh produce is limited. “I will starve on the curb before I go to that Safeway,” one resident wrote online.
On the next block, a Wendy’s and a Pizza Hut beckon; other restaurants have closed doors and shuttered windows. Gatorade bottles and soda cans litter the sidewalk. A Yes! Organic Market recently opened nearby, but higher prices mean its goods are not affordable for all. The Safeway is slated for a massive renovation that will leave the community underserved for the next three years. Even so, the overhaul comes not a moment too soon, “if the neighborhood that relies on it. The simple decisions that take place there have high stakes. American waistlines are expanding; rates of heart disease and cancer are on the rise. At the recent unveiling of the US Department of Agriculture’s new MyPlate graphic, created to replace the food pyramid, Agriculture Secretary Tom Vilsack noted that two-thirds of American adults and one-third of children are overweight or obese. There are many factors that contribute to weight gain, but for most people obesity is simply the result of consuming too much and exercising too little. Thus, the products consumers place in their shopping carts have an impact long after they leave the store—an impact that extends to public health, the economy, and social relationships. Yet although the decisions we make in the grocery store have lasting consequences, we have not been trained to make good ones, nor to fight off the marketing onslaught that awaits us on every aisle. The grocery industry is big business: there were 59,742 grocery stores in the United States as of 2008, not including convenience stores and discount warehouses, according to the Bureau of Labor Statistics. In the grocery store aisle, the question becomes: “Are parents more likely to buy unhealthy food products for their kids than their Caucasian peers, even when controlled for income and other differences.” In 2004, $5.6 billion was spent marketing to African Americans and Hispanics—an attractive market because of their projected demographic growth, increased purchasing power, and role as cultural trendsetters. They also spend more than four hours per day interacting with media than their Caucasian counterparts do. Of the many alleged causes of the obesity crisis, food and beverage marketing is among the most controversial. And it is a life-or-death issue with a huge bottom line, affecting the future workforce, the censuses, and costs to taxpayers. In the first phase of a three-phase deliverable through 2012, the professors dispersed “mini-grants” to four field sites—Chicago, Durham, Baltimore, and Birmingham—to gain qualitative data on African Americans’ perceptions of marketing. “For a long time, the biggest social marketing campaign in the United States was ‘5 A Day,’ fruits and vegetables. Well, many communities don’t have access to fruits and vegetables. So you’re spending all this money to tell people to eat five servings a day, and some people simply can’t,” Grier explained. “Understanding those realties on the ground is what they’re trying to do.” In the second phase of the study, they examined what happened when the aggregate effects of these interventions were revealed to consumers. They frequently exists a personal perception that, as individuals, we are not affected by marketing—but other, anonymous groups are. Grier and colleagues see this lack of awareness as a barrier that may prevent community members from taking action. Now in the third phase of the grant, the professors are building a counter-marketing campaign that they hope can be replicated throughout the United States and increase consumer demand for healthier food in needy areas. That’s why the diverse field sites are so critical—they are getting different perspectives from African Americans in different situations. “If the one doesn’t explain, then you don’t know if people are going to buy healthy food after you’re gone,” Grier said. “But because she continued, “you got the sense pretty strongly that it’s an unhealthy food marketing environment.” And some barriers are structural: neighborhoods left behind, without supermarkets, farmers markets, or affordable fresh produce. Alisha’s World Grier and co-author Guillaume Johnson won the Dark Side X Case Writing Competition at the 2010 Academy of Management Conference with a narrative told from the perspective of Alisha, a 12-year-old African American girl living in an urban center. Grier and Johnson asked readers to imagine that they are Alisha. Alisha’s product preferences are driven by functional, social, and cultural interactions with marketing aimed at her and her peers. The examples used in their case are based on actual research findings. Grier says, “Alisha gets ready for school while watching a half-hour television program. The show is interrupted four times with advertisements; more than half of them promote soft drinks or fast food. As Alisha rides the bus to school, she passes 10 billboards, most promoting food-related products, cigarettes, and alcohol. The bus passes eight fast-food restaurants. Alisha’s school cafeteria offers dense, calorie-packed foods; her local library may have exhibits sponsored by fast food companies. Alisha is actively filling the gap in research on African Americans and targeted marketing. In a separate grant from the Robert Wood Johnson Foundation, she and Professor Kathryn Montgomery of AU’s School of Communication are examining digital marketing metrics. “When it’s a community that I’m a part of, and I see the negative implications, it makes me want to do something that has an impact on the real solutions,” said Grier, herself an African American. In the first phase of a three-phase deliverable through 2012, the professors dispersed “mini-grants” to four field sites—Chicago, Durham, Baltimore, and Birmingham—to gain qualitative data on African Americans’ perceptions of marketing. “For a long time, the biggest social marketing campaign in the United States was ’5 A Day’ foods and vegetables. 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ucts for their kids because they repeatedly have been led to believe consumption of these products is normal.

**APPLIED UNDERSTANDING**

We often think that exposure to marketing and advertising affects other people, but not us or our children. At a young age, children begin to understand the components of a shopping trip: the process of events, store layouts, the exchange of money for goods and services. But how sophisticated is their knowledge? Determining children’s limitations is especially vital given that the youth demographic is gaining more and more spending power. And the industry recognizes this trend: US food and beverage companies spent approximately $1.6 billion in 2006 promoting goods and services.

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**Comparing shopping:** Across from Alisha, in the frozen foods aisle, her neighbor David is struggling to compare two products based on their nutrition labels. Which one is healthier?

**Sugar-sweetened**

Suppose Alisha and her mother are in a grocery store and turn their cart down the soda aisle. It’s a place to tread lightly for nutritionists and policymakers are increasingly concerned about Americans’ consumption of sugar-sweetened beverages (SSBs)—soda, fruit juices, energy, and sports drinks that are flavored with caloric sweeteners. In fact, a May 2011 report in the journal Pediatrics recommended that parents only give children water or low-fat milk to drink, saying that all other nutriti-

**Sodium**

In 2008, the food and beverage industry took action to persuade Congress to enact labeling reforms. The National Advertising Review Council did establish the Children’s Advertising Review Unit of the Better Business Bureau in 1974, which has published guidelines—not require-

**Nestle**

As the years went on, Hastak was curious about whether the Nutrition Facts Panel could be improved. If the FDA were to consider improving the panel, what would it do? Hastak knew it could be refined further to make it easier for consumers to read. With his co-author, he examined how consumers compared multiple products in the same category—such as cereal brands—within a single label?

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**PepsiCo**

Not surprisingly, intake is highest among youth, according to an analysis of NHANES data by the US Department of Agriculture. But adult black women—who Alisha’s mom—for outpace women of other races, consuming 9.2 percent of their total daily calories from SSBs. Caucasian women consumed half that at 4.6 percent. It’s a straightforward cause-and-effect situation: SSB consumption has been linked to weight gain, and the cessation of drinking SSBs has been associ-

**Unilever**

In 2008, a group of food and non-alcoholic-beverage companies formed the International Food and Beverage Alliance to help implement the World Health Organization’s 2004 Global Strategy on Diet, Physical Activity and Health. To reduce childhood obesity, the companies have undertaken multiple initiatives, such as attempting to make nutrition information easier to understand; shrinking product sizes; promoting healthy (flavorless) beverages; adding flavors and fiber; and reducing sodium, fats, and sugars—or increasing nutrients and fiber—in their products. Here are a few examples of some of the actions the 10 companies have taken.

**Coca-Cola**

Committed to front-of-package calorie counts on most of its packaging by the end of 2011.

**Ferrero**

maker of Nutella and Tic-Tacs, introduced small-size packaging for two ice-tea beverages and for one iced-tea beverage.

**General Mills**

has reduced (by 2 percent to 33 percent) the sodium content of more than 100 of its products. For example, 60 flavors of Progresso soup saw a 10 percent decrease in sodium.

**Grupo Bimbo**

a Mexico-based baking company, made all of its products 100 percent trans-fat free in 2010.

**Kellogg’s**

added fiber to many ready-to-eat cereals.

**Kraft Foods**

will more than double the white grain content in its Nabisco cracker brand by the end of 2013.

**Mars**

began to discourage consumers from eating an entire king-size candy bar in one sitting, by splitting candy bars into two servings and packaging them in a reusable wrapper.

**Nestle**

plans to reduce sodium content in its prepared products by 10 percent, including the Stouffer’s, Lean Cuisine, Butter Pats, Hot Pockets, and Lean Pockets brands.

**PepsiCo**

Frito-Lay swapped cottonseed oil for canola oil in 2006, reducing saturated fat content in Lay’s and Ruffles potato chips by 10 percent.

**Unilever**

removed partially hydrogenated vegetable oils from all spreadable fat brands such as I Can’t Believe It’s Not Butter, Country Style, and Bluebonnet & Brown, eliminating artificial brain fats. Source: The International Food and Beverage Alliance’s 2009-2010 Progress Report

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Anusree Mitra, Professor

Low-literate consumers

David has a hard enough task determining which frozen dinner to buy—but what about a fellow shopper, Nancy, who has the same goal but is functioning at a lower literacy level? Imagine how much more intimidating her experience is, having attained only a sixth-grade reading level. Unlike Nancy, David is motivated to buy a nutritious product, whereas Nancy, who is low-literate, is driven by price and a need to fill her empty stomach. Nancy is tough to access and doesn't trust doctors or nutritionists to interpret labels. "There's a proliferation of symbols and icons out there. More than likely, they are confusing the consumers," Mitra said. "At the same time, we have a serious obesity problem."

Among the projects she worked on at the FDA, Mitra was a visiting scientist at the FDA, where she saw firsthand the issues with which regulators and policymakers were grappling. "You want to be helpful to the industry, and you don't want to create an environment where practitioners are scared to participate," Mitra said. "At the same time, we have a serious obesity problem."

"There's a proliferation of symbols and icons out there," said Mitra, who serves as chair of the Marketing Department. "More than likely, they are confusing the consumers."

"Whether [our work] has an impact on the FDA's decisions is a hard thing to say," Hastak admitted. "But having a dialogue with them, and seeing that there is interest in looking at alternative formats and how they could communicate better, is rewarding."

Low-literate consumers have proved to think more visually than abstractly. For example, it is hard for them to picture an ounce of food and what that looks like while preparing a meal. They also have difficulty relating one piece of data to another. Sometimes, these consumers will rely on the presence or absence of single ingredients—say, sugar—without taking into account portion size or other nutrients. What they don't know can, and will, hurt them.

Taking these factors into consideration, the researchers designed more pictorial labels, with bar graphs and other visual representations of the nutritional data, and found these mockups to be much more effective with low-literate consumers. They were inspired by the EnergyGuide labels that the US government does not currently regulate. They probably see similar claims posted all over the front of food packages elsewhere in the store, each brand trying to appeal to them by promising to make them healthier than the competition will. But which one should they choose? Which one is really "better"?

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Professor Mitra is trying to clear things up—from a regulatory perspective. "There's a proliferation of symbols and icons out there," said Mitra. "More than likely, they are confusing the consumers."

Mitra's relationship with food packaging labels extends as far back as Hastak's, to the mid-'90s and the NLEA. "Before the Nutrition Facts panel was instituted, it was chaos," she explained, saying that the front-of-pack labels—which are not currently regulated—are the same way now. "It was really a wild, wild West."

During a sabbatical in 2005, Mitra was a visiting scientist at the FDA, where she saw firsthand the issues with which regulators and policymakers were grappling. "You want to be helpful to the industry, and you don't want to create an environment where practitioners are scared to participate," Mitra said. "At the same time, we have a serious obesity problem."

In 2009, Mitra was invited to join a prestigious Institute of Medicine committee of marketers, doctors, and nutrition scientists in reviewing front-of-package nutrition rating systems. The committee was funded by Congress and supported by the FDA and the CDC. Members heard from representatives of government agencies, manufacturers, and study sponsors, as well as the public, to determine how current labels were developed. "This is an opportunity to affect public policy very quickly," Mitra said. The US government does not currently regulate systems used by manufacturers to apply these health labels to their products, making it hard to compare products “apples to apples.” Kraft, General Mills, the American Heart Association—all have deployed their own individual systems, in a perhaps misguided but well-intentioned effort to help the consumer. So the committee explored the possible benefits of creating a system regulated by the FDA and how to ensure its effectiveness, and also studied the nutritional underpinnings to determine what should go on the front of the pack.

In its Phase I report, released in October 2010, the committee asserted that food companies should highlight the nutrients responsible for obesity, diabetes, and heart disease in their products rather than highlight only positive nutrients. The latter practice, which incentivizes food
companies to unnecessarily fortify their products in order to score points, has resulted in labels claiming that products like sugary cereals or salty frozen dinners are “healthy”—sending mixed messages to consumers. Labels extolling a product’s high level of protein were a good example: “We don’t have a protein deficiency in this country,” Mitra said. “We really need to focus on the public health issues of today.”

The members instead advocated front-of-package food labels that provide information on the nutritional “Big Four”: calories, saturated fats, trans fats, and sodium—the nutrients most closely related to obesity and chronic disease.

In Phase I of the report, the committee is researching research on consumer responses to front-of-package systems and will issue recommendations regarding the ideal characteristics for a front-of-package label. The committee’s hope is that a new front-of-package standard will change consumer behavior and also encourage the introduction of healthier products. These recommendations, along with implementation guidelines, will be presented to the FDA and Congress in October 2011.

In the meantime, the food and beverage industry has tried to circumvent possible regulation, with companies themselves proposing front-of-package “package labeling.” The keys draw attention to saturated fats, and calorie content; the proposed guideline would allow companies the option of including two additional keys, promoting nutrients such as fiber or potassium. Academics and others, however, are concerned that such measures are merely preemptive strikes against the Institute of Medicine’s final recommendations for front-of-package labeling.

Until an ideal labeling system is established, Alisha and her mother will have to navigate the highly cluttered front-of-package labeling themselves.

**POINT OF SALE**

On the way home from the grocery store, the pair realize they forgot to buy milk. They stop at a convenience store and Alisha runs inside. As she reaches the checkout counter, she’s exposed to colorful advertisements for cigarette brands.

“It’s the first time she’s seen these ads. In fact, point of sale is the biggest form of marketing works on children. It works except for the FTC. It works exceptionally well on minors; teens who regularly visit stores that feature cigarette ads are at least twice as likely to try smoking as those who do not, according to the Stanford Prevention Research Center.

“It’s a hot-button issue, and the FDA took aim at it with the sweeping U.S. Family Smoking Prevention and Tobacco Control Act, which took effect in June 2010. However, a provision that would have restricted the ads to black-and-white and text-only at point of sale, outdoors at least 1,000 feet away from schools and playgrounds, and in adult-only publications was overturned.

Assistant Professor Wendy Boland knows that marketing cigarette products to children is not just a domestic issue. Children in the United Kingdom are seeing a lot less of the Marlboro Man, thanks in large part to her work. Boland was one of four authors of a paper that British antismoking advocates used to help successfully push for a ban on point-of-sale tobacco advertising. The measure passed both houses of Parliament in late 2009.

Boland and her colleagues published the paper in the journal *Addictive Behaviors*; it argued that cigarette advertisements do indeed prompt some adolescents to start smoking. The tobacco industry has long maintained that its ads aim only to entice smokers to switch brands, not to prompt nonsmokers to pick up the habit.

The study showed print advertisements for cigarettes and other products to a group of 7- to 12-year-olds. Researchers asked the children if they understood the product, understood the brand, or understood both the product and the brand. When they were shown cigarette ads, the majority was aware only of the product, not the brand.

“While cigarette companies have been saying for years that advertising only causes people to switch from one brand to another, our research showed that this wasn’t the case,” Boland said. “They remembered things like Tropicana orange juice, but they didn’t remember Camel cigarettes; they just remembered cigarettes.”

Martin Dockrell, director of policy and research for the UK-based nonprofit Action on Smoking and Health (ASH), read the paper and used it to lobby for the legislation to ban point-of-sale tobacco advertising.

“This is a very illuminating study; it illustrates powerfully how even very young children respond to tobacco marketing,” Dockrell told AU in 2009. “When the Health Act was in its committee stage, ASH sent members a summary of this and a small number of other studies to illustrate the strong and rapidly growing body of evidence on how cigarette marketing works on children.

“When the bill returned to the whole House every member of Parliament) was sent a briefing highlighting the new evidence in this study. In this study the tobacco industry’s main line of attack on the bill had been that there is no evidence that tobacco promotions lead young people to smoke. This study helped to nail that lie.”

**THE TOBACCO INDUSTRY’S MAIN LINE OF ATTACK ON THE BILL HAD BEEN THAT THERE IS NO EVIDENCE THAT TOBACCO PROMOTIONS LEAD YOUNG PEOPLE TO SMOKE. [BOLAND’S] STUDY HELPED TO NAIL THAT LIE.**

**MARTIN DOCKRELL, DIRECTOR OF POLICY AND RESEARCH, ACTION ON SMOKING AND HEALTH**

“It’s important for me to do research that has long-term benefits,” said Boland, who came to AU in 2008. Kogod’s Department of Marketing was the perfect fit, she said, because of the priority it puts on socially responsible research.

“It was exciting to see that our research has made so much impact, and that this legislation could make a big difference in preventing smoking,” she said.

For its part, the US legislation has led to some change in the last year: it’s prohibited tobacco brands from sponsoring athletic, musical, or cultural events; disallowed the distribution of promotional items (hats, T-shirts) in exchange for cigarette sales; and barred audio ads from using music or sound effects. Yet several provisions—including point-of-sale advertising—are unimplemented and await appeal at press time.

Whether or not Alisha becomes a smoker, she and her mother are exposed to potentially deadly dietary items every day in the form of sodium, calories, saturated fats, and trans fats. They remain vulnerable to heavy targeted marketing from food and beverage companies that entice them to believe eating fast food is normal for their community. Because of what she will eat and drink, Alisha will likely grow into an obese adult and spend much of her life combating disease. But the research being done by these Kogod faculty—and their peers at esteemed institutions—aims to help eliminate that probability.