De-Marketing Obesity:
Win-Win-Win Strategies for State Governments, Industry, and Citizens

Today’s Agenda

The Theme: 2-sided coin
The Metaphor: Yogurt
The Tactics:
-- Nutrition @ home
-- Nutrition @ school
-- Where to start
The End

The Food Industry’s Response to Obesity Criticism is Evolving

• Stage 1. Deny It & Redirect Blame
  “Exercise more?”
• Stage 2. Appeal to Consumer Sovereignty
  – “We only give people what they want”
  – “Enjoy it in moderation & exercise more”
• Stage 3. Think Win-Win Solutions
  – Long-term view toward consumers
  – Overeating leads to burnout & longer repurchase periods
  – One firm realized 57% will pay a 15% premium for solutions (including portion-controlled packaging)

Two sources for today’s talk:

The Theme:
We Can’t De-Market Obesity in Our Communities
Without “Marketing Nutrition”

“De-Marketing Obesity”
Brian Wansink & Mike Huckabee
California Management Review
Some Nutrition Facts

- Growing health concerns
- Demand for healthy foods with acceptable taste
- 90% of consumers say taste is by far the most important factor in selecting food
- In reality, most consumers prefer the taste of less healthy foods
- Is all lost? No. We but need the right metaphor

A Yogurt Metaphor for what Future Success Might Look Like

(1975) "Do you want to eat a Bioactive dairy-based culture in a cardboard dish?

(2005) "Do you want to eat a Lemon Silk Yogurt?

What Happened in 30 Years?
The Triangle of Growth

(1975) "Do you want to eat a Bioactive dairy-based culture in a cardboard dish?

(2005) "Do you want to eat a Lemon Silk Yogurt?

Improved Product
- More flavors & options
- Better taste
- Smarter marketing

More Competition
More Demand

What Companies are Doing and Where it Might Lead

- 25 years from now...
  - Some = brilliant
  - Others = misguided
- Today, we don’t know which will be which
- Communities need to ...
  - Support, not attack
  - Give room to experiment
  - Think cooperation

What Communities can inexpensively do to . . .

- Improve nutrition at home
- Improve nutrition in the schools
- Take initial steps
Improving Nutrition at Home

Secret Food Lessons from WWII Food History

- 60 years ago . . . 1942-1946
  - Meat shipped to soldiers and for Allied relief
  - On homefront . . . Concern of sufficient protein intake
  - Not an issue of calories – issue of the right calories

- Where can people find inexpensive protein?

Organ Meats: “Beef Brains, Anyone? Anyone?”

- The Problem?
  - 1. Negative perceptions
    - “Bad Taste” and it’s “Gross”
    - “It’s for a different type of person than me”
  - 2. Not part of the routine
  - 3. Unfamiliar with preparation

- Over 200 sponsored research projects revealed...
  - Top Secret
  - Classified by Dept. Of Defense until 1998

What Can We Learn from History . . . and Organ Meats?

- What we did . . .
  - Obtained declassified files from Pentagon
    - In basement. Turn left at the Ark of the Covenant

- Three Findings for Today
  - 1. Incremental introductions are easiest
  - 2. Target the Nutritional Gatekeeper, forget the family
  - 3. In particular, focus on influential cooks

Target the Nutritional Gatekeeper

- Nutritional Gatekeeper = Person who usually shops & cooks
- Our Study of 1004 North American Gatekeepers
- One finding: Gatekeepers believe they influence 71% of the eating decisions of their family members
  - Either directly (in-house), or in-directly (out-of-house)
  - Either for the good, or for the bad
- Implication --> Target the person who makes the decisions

Who are the Most Influential of the Nutritional Gatekeepers?

- 88% fall into 5 segments
  1. Giving Cooks (22%)
  2. Healthy Cooks (20%)
  3. Innovative Cooks (19%)
  4. Methodical Cooks (18%)
  5. Competitive Cooks (13%)

Which 3 segments can be most easily convinced to use a “Healthy” food?
What 3 Types of Cooks are Most Willing to Try a “Healthy Food” like Soy?

- 1. Healthy (20%) --> Yes, it’s an end in itself
- 2. Innovative (19%) --> Yes, but it’s a means to an end
- 3. Competitive (13%) --> Yes, but only if it’s cool
- 4. Giving (22%) --> Never
- 5. Methodical (18%) --> What is it? Can it fit in Jell-O?

These 3 Segments all Have Different Marketing Implications

- 1. Healthy (20%) --> Yes, it’s an end in itself
- 2. Innovative (19%) --> Yes, but it’s a means to an end
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No 1 message will persuade all 3 segments. 3 segments = 3 messages

Summary: Improving Nutrition at Home

- Save money by focusing education efforts at the gatekeepers (not the whole family)
- Different types of gatekeepers have different types motivations -- one message does not fit all

Improving Nutrition in Schools

A Problem: Many Children (just like most adults) Don’t Like Foods They Think are “Healthy”

- We Taste What We Think We Will
- If We Think it is Healthy, We Think it Tastes Bad
- A Quick Example With Adults . . . “Soy Inside”

People Taste What They Think They Will Taste - The Curse of “Soy Inside”

- Can Labels make us taste what we believe we will taste?
  - To the untrained palate, taste can be subjective
- Phantom Ingredient Test
- Two Identical PowerBars
  - One says “contains 10 grams of soy protein”
  - One says “contains 10 grams of protein”
- Taste This New Product
  - 70 adults taste and rate “soy” label
  - 70 adults taste and rate “—” label
Aaah, Our Youthful Memories of Soy . .

We Taste What We Think We Will Taste

• Phantom Ingredient Test
  – Exact same PowerBar
  – No soy in them

• “Bad News”
  – People “taste” the non-existent soy and rate it low

• “Good News”
  – They think it’s healthy (but they still hate it)
  – Differences across segments

• “Scary News”
  – It gave an unmerited “health halo”
  – “It counteracts junk food”
  – It helps eliminate cancer & birth defects

“How Can You Make Kids Think Healthy Cafeteria Food Tastes Good?”

• Don’t Tell Them its “Healthy”

The Study . . .
  – Elementary Schools 154 students
  – New menu item—Labeled in 3 ways
    • 1) Mandarin Salad
    • 2) Healthy Mandarin Salad
    • 3) Fresh Mandarin Salad
  – Asked to rate the taste of the menu item

What to Smart Hot Lunch Programs Do?

Best Healthy Practices of Food Service Providers

• Web-survey -- (part of an FDA-commissioned Task Force)
  – Pilot-tested last week
  – Presented to FDA Task Force 2 weeks ago

111 Responses -- 85% on-site contract feeding

Objectives
  – What makes a healthy menu change successful?
  – What good advice can we give operators?

What Influences the Success of a Healthy School Menu Item?

• What Influences Success?
  – Taste 8.6
  – Value 7.5
  – Positioning 7.2
  – Promotion 6.8

• Best Positioning?
  – Freshness 8.2
  – Taste 8.0
  – Health 6.7

What Strategy’s Most Successful for Lowering Calories?

• Sometimes What We Think is a Good Idea, Can Backfire
  – It’s “healthy” --> People don’t eat it
  – Here’s an “endorsement” --> People overeat

What Could Possibly be Wrong with Giving People More Nutrition Information?
  – The McSubway Project

Beware of Unintended Consequences of Well-Meaning Interventions

All items measured on 9-point scales (9 is better than 1)
The McSubway Project

• Different Levels of Nutrition Info are Provided
  – Subway: Selected facts on napkins, glasses, wrappers, and signs
  – McDonald’s: Offers a nutritional poster in 14 pt font
• Nutrition Info: Do they read it; does it really help?
• 500 People were intercepted after lunch in 10 cities
  – Let’s consider a matched subsample of 250 from Subways & 250 from McDonalds
  They were asked . .
  – Name a nutritional fact you learned today about Subway/McDonalds?
  – What did you eat? How many total calories did you eat?
  – Calories were then calculated based on what they ate

The McSubway Results:
Calorie & Nutrition Labels May Not be Whole Answer…

• Recall . . .
  – Lots of general statements, “Subway’s healthy”
  – Participants generally recalled less than 1 nutritional fact from either Subway or McDonalds. It was usually wrong.
• People underestimated their calories by . .
  – 12% at McDonalds
  – 41% at Subway
  – “You actually were eaten”
  – “You actually were eaten”
  – “You actually were eaten”
• Can’t rely only label information (we ignore it)

Where Do We Start?

Two Approaches

All or Nothing Approach
• Daunting
• Discouraging
• Long-term
• What plan?

Incremental Approach
• “The best way to eat an elephant is one bite at a time”
• “Today’s battle, tomorrow’s war”
• Small, easy victories get and keep the momentum for the bigger ones

Summary

• De-Marketing Obesity necessitates Marketing Nutrition (to fill the void)
  – Yogurt’s Taste Triangle: Success breeds success
  – Support well-intended industry efforts; think partners
• Improving Nutrition at Home
  – WWII Secrets – Encourage Incremental Adoption
  – Target Nutritional Gatekeepers (they control 71% of all food decisions)
  – Focus Limited Resources on Gatekeepers – Different messages to different gatekeepers
• Improving Nutrition in the Schools
  – Make it Healthy, but Don’t Call it Healthy
  – Beware of Unintended Consequences that Could Lead to Set-Backs
• Start with Small Steps that Build Victories and Momentum

Thank You
We Gain Weight Because We Move Less and Eat More Than We Use To

- Kids exercise less (Hill & Peters 1998)
  - No State-required gym class in 49 states
  - Cable TV, internet, Playstations

- Kids eat more calories (NPD 2005)
  - They eat caloric foods
  - They eat larger portions

- The 100 calorie difference
  - “Should do it” vs. “We can help them”
  - Start with the Portion Predisposed Segment

Hey, let’s go run around outside.

OK, Wally. I’ll grab a couple apples.

40 years ago