Food Purchasing Decisions in a Grocery Store Setting

by

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Abstract
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The items that find their way into our shopping carts and subsequently, into our homes are selected for a variety of reasons. A great deal of research has been conducted on consumer habits around fast-food consumption and take-out, and the role of each in the obesity epidemic, but little is known about how grocery-shopping decisions are made or the extent to which health is a part of that decision-making process. Using participant observation techniques and semi-structured interview, the investigator accompanied 31 residents of Brooklyn, NY while they shopped. The participants, who came from two neighborhoods of contrasting socioeconomic status, Downtown Brooklyn and East New York, spoke of the importance of a number of factors including cost/value, health, quality, taste, location/access, class and culture; and how these factors affect decision-making. Two interesting themes emerged from the data that are reflective of historical and social influences on the foodscapes of two generations of shoppers. Older study participants, held to a certain set of values, beliefs, and attitudes regarding food, which differed substantially from those of their younger counterparts in the sample. Among the youngest of participants, the data revealed that they fell into two groups; shoppers for whom time and convenience were of primary importance and shoppers for whom food purchases were a reflection of their social and political identities. Also emerging from the data was evidence that, in general, participants' knowledge of food is shallow and the decisions they make in the grocery store are largely based on inauthentic knowledge. Based on this sample, a depth of knowledge around the food system produced more authentic knowledge that led to healthier purchases.

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Introduction

The foods to which we have access and that we prepare at home are an important part of preventing obesity and diet-related disease. If we can understand how shopping decisions are made, we may be able to develop health-promoting interventions to stem the tide of obesity. The items that find their way into our shopping carts and subsequently, into our homes, are selected for a variety of reasons. Quality, culture, access, and cost are some of the factors that influence the selection process.[1-3] In recent years, Americans were estimated to have spent nearly half of their food budget on prepared food and restaurant take-out.[4,5] This increase in consumption of take-away food has coincided with an increase in obesity and it is believed that the one directly influences the other.[5-7] A common strategy suggested for developing a healthy diet, achieving and maintaining a healthy weight, and/or managing diet-related disease is to prepare food at home, avoiding take-out as much as possible. In terms of obesity prevention and the prevention of diet-related diseases such as diabetes, this strategy might appear, on the surface, to be a good one; however, interventions and education intended to support this dietary change have been marginally successful, at best.[8-11]

A great deal of emphasis is placed on nutrition education as a means to prevent or address obesity and obesity-related disease, but to what extent and in what ways does health knowledge play a role in the selection of grocery items and what other mechanisms are at play in that decision-making process? Perhaps, part of the reason that these interventions have not been very successful is that we intervene ***after*** the food has already been purchased. Learning how to shop for groceries, how to put meals together in a way that is appetizing, affordable, and perhaps culturally appropriate, requires a skill set that public health has not developed the means to foster or support. As the link between diet and disease is explored, the public is inundated with health

information meant to aid it in making wise food choices, perhaps reducing their risk of obesity and diet-related diseases, but food is a complicated topic. It serves as sustenance, satisfying a tangible, physical need, but it can also be symbolic, medicinal, a vice, or a disease-promoting agent, and for many, it is some or all of these things at once.[1,2] Studies have been conducted examining food purchasing and consumption, particularly when away from home, and interventions have been developed to modify behaviors around consumption, but what exactly is going on in the grocery store? What kinds of foods make it through our front doors and into our cupboards and why?

This study seeks to identify the factors that influence grocery-shopping behavior among residents of two Brooklyn neighborhoods and determine what role, if any; dietary knowledge plays in the process by asking:

What are some of the factors that influence food acquisition?

a) What role do cost, familiarity, culture, and access to various types of grocery retailers play in the process?

In what ways does dietary knowledge play a role in food acquisition?

a) What is understood/believed regarding the relationship between food and disease/health?
b) How accurate is this knowledge?
c) How and when is this knowledge applied?

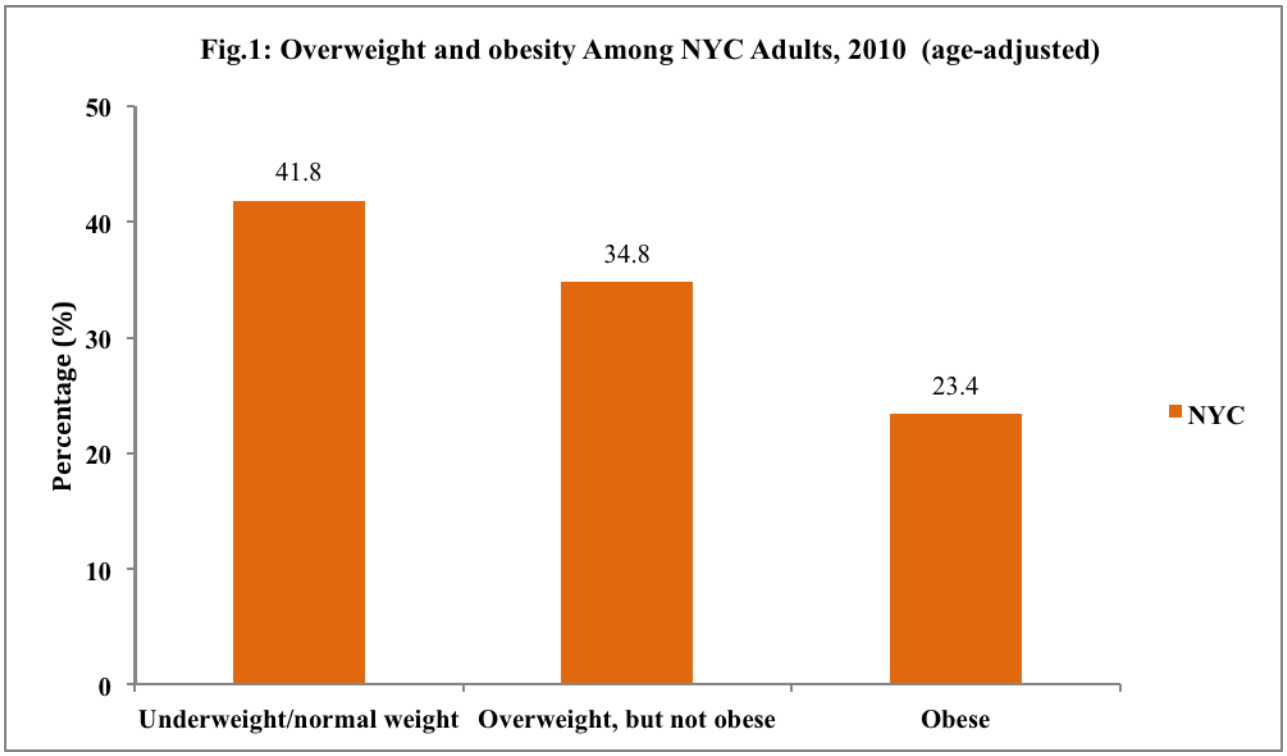
Background and Significance

Why study shopping? It is, for most people, a tedious activity, although a growing minority treat it as an excursion. The grocery store, supermarket, farmers market, bodega, convenience store, warehouse clubs, and all the other venues wherein we gather food represent what is likely the first step in addressing obesity and obesity-related disease. The Centers for Disease Control and Prevention (CDC) website is home to a dynamic map of the United States (U.S.) illustrating the growth of our now overwhelming obesity problem. Over the course of some 30 years, Americans have become overweight and obese to a degree never before seen. Hand in hand with obesity, the incidence and prevalence of cardiovascular disease, diabetes, and hypertension have risen at alarming rates.[4] The response to this health crisis has been to develop and implement a host of interventions based largely on two things, nutrition education and behavior change. We teach people about micronutrients and then tell them stop eating take-away food and prepared foods, sending them into their kitchens to roast, broil, poach, and steam their way to good health, but what are they cooking?

A great deal of research has gone into studying the effect of take-away food and restaurant meals on body weight and health and rightfully so, given that more than 30% of our daily caloric intake comes from foods prepared outside of the home, nearly twice what it was 30 years ago when obesity rates started to rise. Add to that the fact that research confirms that foods prepared at home are more nutritionally sound and less damaging than those prepared outside. Foods prepared outside of the home tend to be higher in saturated fat and sodium than homemade meals. Additionally, these same prepared foods are lower in fiber than their homemade counterparts.[12] Given that Americans spend *nearly* half their food dollars, more than a $1 trillion/year, to be exact, on take-away food items, it makes sense that so much time and effort

should go into finding ways to help consumers make wiser choices and in encouraging the corporations that produce these items to do so with fewer disease-promoting ingredients. However, *more* than half of our food dollars are spent on food consumed at home, signaling that this is an area warranting equal attention, which leads us to the shopping cart.[12] After all, how else does the food reach the kitchen except that it is bought and carried home?

Obesity and overweight

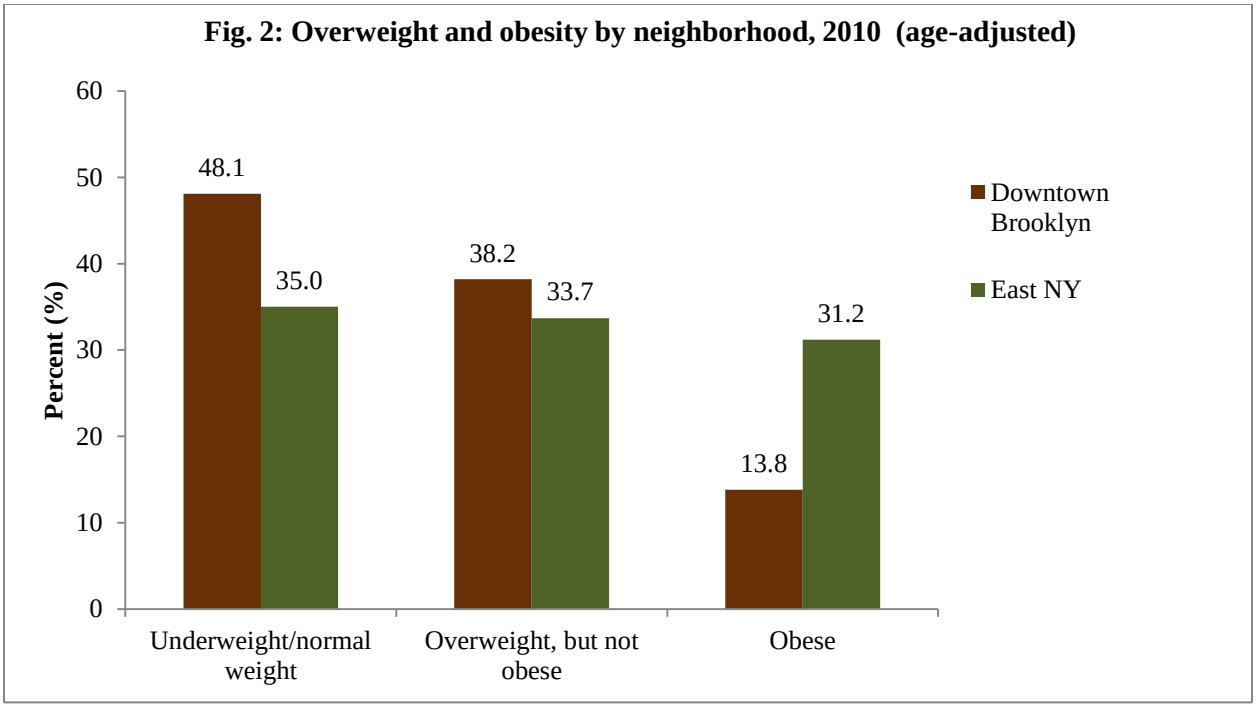


Source: NYC Dept. of Health and Mental Hygiene Community Health Survey

Nearly 1 in three New Yorkers is overweight or obese. (Fig.1) At the neighborhood level, 52% of Downtown Brooklyn residents are overweight or obese compared with 65% of East New York (ENY) residents. More than half of New York City (NYC) residents surveyed by the New York City Department of Health and Mental Hygiene (NYCDOHMH), using their Community Health Survey were overweight or obese. (Fig. 2) This is consistent with national figures that have hovered around 60-66% in recent years.[13] Disparities in overweight and obesity have emerged across New York City neighborhoods, two of which are featured in this study.

Overall, nearly 65% of ENY residents are overweight or obese compared to 52% of Downtown Brooklyn residents. In comparing overweight and obesity rates for Downtown Brooklyn and East New York (ENY), we find that while both neighborhoods have similar rates of overweight, 38.3% and 33.7%, respectively, the prevalence of obesity in East New York is more than twice that of Downtown Brooklyn at 31.2% and 13.8%.[14]

Fig. 2: Overweight and obesity by neighborhood, 2010 (age-adjusted)



Source: NYC Dept. of Health and Mental Hygiene Community Health Survey

Sociodemographic profiles

These two neighborhoods, though fewer than 10 miles apart in geography, are worlds apart economically. Downtown Brooklyn is a gentrified neighborhood that has experienced tremendous growth over the past 10-15 years, due in large part to the Metrotech Business Improvement District, established in 1992.[15] Minutes from lower Manhattan; it has become a haven for young professionals, which has changed its soiciodemographic profile drastically. Recently, the hotly contested Barclay Center, the first sports arena of its kind in Brooklyn,

opened, drawing patrons from across the tri-state area to sold-out music and sporting events. In stark contrast to Downtown Brooklyn, East New York is an impoverished community of color that has seen little in terms of economic growth since the opening of a retail mall on the outskirts of the neighborhood in the early 2000's and the short-lived housing boom of the late 1980's. The density of poverty in East New York is staggering comapred to Downtown Brooklyn. In a comparison of safety net benefits provided to residents of each community, the utilization of government assistance in East New York is 3.5 to nearly 6 times that of Downtown Brooklyn for benefits such as cash assistance, SSI, and Medicaid.[16-18]

Social determinants of health, such as educational attainment and income, influence health outcomes like obesity and diet-related diseases. The social gradient has indicated for centuries that people who have fewer material resources tend to have less positive health outcomes than people who have greater material resources.[19] Prevalence of diet-related diseases, such as diabetes, hypertension, and cardiovascular disease in East New York far exceeds that of Downtown Brooklyn. There are structural inequalites that have functioned together to produce a food desert in East New York, where people are forced to choose between a few poorly stocked grocery stores or travel, in some cases up to an hour, in order to find better quality, affordable food. A quick comparison of income and educational attainment demonstrate just how different these communities are from one another.

Table 1: Income and Educational Attainment by Neighborhood

	Downtown Brooklyn	**East New York**
Median Household Income	$68, 272	$31, 762
Educational Attainment, *highest level of education attained*		
Less than 9th grade	5.7%	10.8%
9th-12th grade (no diploma)	7%	16.2%
High school graduate	13.4%	38.5%
Associate's degree	4.6%	5.9%
Bachelor's degree	28.4%	8.3%
Graduate/professional degree	28.6%	4%

Source: New York City Department of City Planning

Downtown Brooklyn, located within Community District 2 (CD2), is well resourced and its community leaders are attuned to the needs of their constituency. They have political currency and economic standing and therefore, they have the power to change circumstances within their community. *Excerpted from CD2 Statement of District Needs FY 13:*

> In addition to direct services, we realize that outlets for physical activity and access to healthy food are important components of building a healthy community. For this reason, we encourage the continued development of bike paths in our district, the permissible placement of green carts and farmers markets and the sponsorship of festivals and outdoor events. There is an opportunity for our district to benefit from further dispersion of fresh produce and quality food items. We hope to see an analysis of the opportunity for expanding the Green Carts and FRESH markets programs in our community. Providing resources for healthy living is the best preventative care. We hope to be a place where necessary care is accessible and leading a healthy lifestyle is possible.[16]

The excerpt above was taken from a 17-page statement of various community needs that discusses everything from transportation issues to workforce development and is demonstrative of the degree to which Downtown Brooklyn residents exert their political power, interact with community stakeholders, and effect change within their community. The document often makes reference to Mayor Bloomberg's PlaNYC, which is described as a plan to improve infrastructure, strengthen the City's economy, preserve and improve our environment and by extension improve

the quality of life of city residents. Community District 2's leaders seek to align their plans with those outlined in the Mayor's document.[20] Compare this excerpt to the one below from the four page Statement of District Needs submitted by community leaders of Community District 5 (CD5), where East New York is located. *Excerpted from CD5 Statement of District Needs FY13:*

> Health and Social Services continues to be one of our highest priorities. There is an increase in "demand use" at our Health and Hospital facility located at 2094 Pitkin Avenue due to the fact of new housing; shelters housing a large homeless population in need of specialized care.
>
> Our Social Services programs continue to be compounded; currently 42% of our total population received some sort of income support, such as SSI, Public Assistance, Medicaid, AFDC, etc.
>
> We are still in need of a Day Care and an additional Health Care Center west of Pennsylvania Avenue.[16]

Community District 5's Statement of District Needs covers nine areas of community need within its brief four pages, with most issues commanding little more than a paragraph of space. Concerns over hazardous conditions are presented within the document, however very little is offered in the way of description of these issues beyond naming them. Biohazards, such as the presence of raw sewage on main thoroughfares following heavy rains, are mentioned, but there is no description of the impact of this hazard on community safety and human health. Despite the fact that East New York is among the neighborhoods with the worst health profiles in Brooklyn, if not citywide, only four sentences are allotted to the discussion of health and social services. Despite the fact that more nearly two-thirds of the population is overweight or obese and therefore at increased risk for obesity-related disease, no mention is made of overweight, obesity, or chronic disease rates. There is also no mention of supermarket scarcity, although East New York is a food desert. Nor is there any mention of Green Carts in the document or the need for them to be present within the community. Bike lanes, which are mentioned in CD2's Statement

of District Needs as a very small part of a much larger discussion on physical activity, are not only conspicuously absent from CD5's Statement of District Needs, but they are also largely absent from CD5's streets as well, despite the fact that representatives from the Department of Transportation attended a CD5 Community Board meeting in June 2012 to inform the community that bike lanes were planned for early 2013. There has been no further discussion of the issue and while bike lanes and paths already exist within Highland Park, which is located in the Cypress Hills section of East New York, these bike lanes do not extend beyond the park or connect to any other bike paths within the community. In fact, bike paths are not seen again until the Belt Parkway is reached, more than four miles away.[21] In a community where obesity rates are high and incomes are low, biking could be an ideal solution to both obesity-related morbidity and economic constraints on travel, yet, neither community leaders nor local government seem to see this as a priority.

It is clear that Downtown Brooklyn and East New York have very different needs and priorities, and that particularly in the case of East New York, grocery shopping may not rank among these needs and priorities; however, the fact remains that despite their differences, more than half of the residents in each of these communities are overweight or obese. Addressing grocery shopping behaviors in conjunction with efforts such as increasing access to fresh, healthful food, and increasing opportunities for physical activity can lead to substantial change in the health profiles of both communities.

Literature review

Factors that influence food acquisition

As mundane an activity as it is, grocery shopping is an experience that is fraught with emotion and memories, because our connections to food are rife with the same.[2] To a great extent, our attitudes regarding food, what we eat and why, are socially constructed and associated with cultural and societal norms, and by extension, our identity.[2] From the time we are born until the time we die, we receive messages from our caretakers, the media, and our peers regarding the value or significance of various foods. An item may be held in high esteem because it reflects elevated social status or it may be held in low esteem for reflecting the opposite.[2] Social status, identity, history, and culture may each influence our decision-making in this area to some degree. [2, 3]

Exposure and familiarity are another set of factors that influence us daily.[22] Some of that exposure and familiarity is attributable to current advertising, images from our youth, the foods that most frequently appeared in our meals, and the occasions with which we associate them. Oftentimes, jingles and slogans heard in childhood can be easily recited, verbatim, in adulthood. The logos of defunct brands are easily recognized and may even cause us to become nostalgic, reminiscing over some long forgotten event or person. The commercial advertising world has worked diligently to ensure these things and they have been successful in doing so. Brand recognition and brand loyalty, two of the reasons that we can recite that jingle or recognize that logo from decades past, are the result of these advertising efforts.[22,23]

Social Determinants

Social determinants such as income, social class, and environment can also play a role in the choices we make regarding food purchases. One such determinant is access. In New York

City, a decline in the number of full service supermarkets has been associated with increasing rates of obesity and diet-related diseases.[24] Local 1500, the United Food and Commercial Worker's union, reports that only 550 supermarkets of at least 10,000 square feet exist in New York City, approximately one-third fewer than existed 10 years ago.[25,26] The absence of supermarkets within many communities leave few shopping alternatives, chief among them are bodegas, small grocery stores that carry convenience items and grocery staples, usually at substantially higher cost than supermarkets. Bodegas, which are densely sited within low-income communities, have proven to be poor substitutes for supermarkets in that they stock little in the way of low-fat dairy, fresh produce, whole grains, and lean meats, as compared to supermarkets.[27]

Assuming one can find an appropriate venue in which to shop, income strongly influences what we are able to purchase. According the Food Bank for New York City, approximately 35% of New Yorkers reported having difficulty covering the cost of food in 2011, up 25% from figures reported in the Food Bank's first survey conducted in 2003. This translates into 2.9 million New Yorkers who are finding it difficult to cover the cost of food, many for the first time. Food insecurity, the limited availability of nutritionally adequate, socially appropriate, safe food, is more common among people living below the poverty line and within communities of color, populations that are resident in great numbers within New York City. [28] These groups experience food insecurity at 2-3 times the national average.[28] In metropolitan areas like New York City, food insecurity is more than three times higher for blacks and nearly four times higher for Latinos than for their white counterparts.[29] In recent years, a new demographic has been counted among the city's food insecure, the middle class, many of whom are well-educated

and earn greater than $50,000 per year.[30] With these kinds of financial limitations, do consumers consider shopping for health a luxury?

Bodily Memory

Bodily memory, whether of pleasant or unpleasant associations, is what ties our food preferences and opinions to our life experiences. It is this process that causes us to associate certain foods with certain life events or emotions. Bodily memory is often associated with trauma, where the sensory memory of a traumatic event is stored, allowing or causing the holder of said memory to relive, to some extent, the experience given the presence of certain triggers; but pleasure can also be memorialized in the same way. There are certain foods and aromas that can elicit a visceral response. A particular confection might transport us back to the arms of a favorite relative, while the mere mention of a distasteful dish might cause one's face to crumple into a disgusted grimace, as if actually tasting the offensive item. Sights, smells, and flavors in conjunction with certain experiences can cause us to memorialize not just events, but foods associated therewith. Chen and Sutton describe the way in which everything from family events, such as the return of a loved one after a long separation, to major political events, such as a change in regimes, can become intertwined with our food memories and later dictate our preferences and aversions.[2,31]

The connection between food and memory may cause our food choices to become "naturalized," such that an unhealthy food habit or behavior might become grafted into culture and traditions, requiring conscious thought to override it.[2] Chen's research indicated that collective social experiences, such as discrimination or oppression can lead whole populations to adopt or naturalize a particular habit or behavior in response to such experiences. In his research, he found that certain oppressed ethnic groups among the Taiwanese were deprived of

sugar as a cooking ingredient, while under Japanese rule. Once liberated, sugar became symbolic of the shift from oppression to liberation and as a result, typical Taiwanese dishes are very sweet, even several generations later. Another implication of this research is that long-term deprivation may lead to overindulgence becoming a social norm, which would logically extend to the shopping experience.[2] How much of what shoppers decide to purchase is related to memory and associations with pleasant or unpleasant experiences? Are they even aware that this could be directing their purchasing behavior?

Dietary Knowledge

Knowledge acquisition is complex and multifaceted. With respect to health, it has long been established that increases in educational attainment and socioeconomic status (SES) are correlated with positive health outcomes.[19,32-36] The same holds true for nutrition or dietary knowledge and food consumption, where those with greater knowledge make healthier food choices; however, acquisition of dietary knowledge, a subset of health knowledge, may be less straightforward than the acquisition of other types of health knowledge for a number of reasons.[37, 38] Food has many different meanings and functions beyond nutrition. A complex web of influences illustrates some of the various contexts in which food is considered. For some, economic factors such as income might influence exposure and therefore create or limit opportunities to learn about new foods or new uses for foods, including their nutritional value. For others, culture may dictate that certain foods be eaten or abstained from in order to promote spiritual growth or prosperity, and those messages may be in direct contradiction to popular knowledge or nutrition guidelines.[3] Under what circumstances does health override these factors, if at all?

In a search of the literature, surprisingly few articles focused on dietary knowledge and most were linked to dietary knowledge in the context of chronic disease rather than general knowledge.[37] A more focused search of the literature was required in order to identify research conducted around the various aspects of knowledge acquisition, in general and of dietary knowledge, specifically. We know, from nutrition label studies, that people living with chronic diseases, such as hypertension or diabetes learn how to utilize food labels to make healthier food choices, but only as it relates to their specific health issues, meaning that hypertensives use nutrition labels to assess sodium content, but little else and diabetics use nutrition labels to assess sugar content, but little else.[39] While each may be limiting their intake of a particular ingredient or nutrient for the purpose of disease management, they may be completely ignoring things like fat and fiber content, which also impact overall health outcomes. They have not actually learned how to eat more healthfully; rather they have learned how to prevent certain consequences related to dietary intake and their specific health conditions.

According to the developmental and educational psychology literature, health knowledge may be acquired in several ways starting first, with our earliest teachers, our parents, caregivers, and elders, who not only demonstrate for us various health behaviors and practices, but explicitly inform us about what they believe will promote health and what may be deleterious.[40-42] When children accompany caretakers on shopping trips, shopping behaviors, including decision-making, are demonstrated or modeled. Knowledge may also be acquired from passive and active messaging, such as advertising, stories in the popular media, and food labels.[43,44] Additionally, some health knowledge is directly communicated in formal educational settings, such as school-based health education classes, however, the quality and content of these can vary substantially from state to state.[45]

Media

Today's consumer is bombarded with media-interpreted science, health claims on food labels, and government-issued nutrition recommendations.[46,47] Added to this list are public education campaigns and food policy changes that send yet more messages to an already beleaguered public. A person attempting to eat healthily must be able to distinguish the good science from the bad and the bogus messaging from that which is valid. Moreover, they must possess some basic knowledge of nutrition in order to be discerning. Some of the most recent and widely publicized nutritional issues, messages, and claims have included debates around whether or not high fructose corn syrup is detrimental to health, the Corn Refiners Association's efforts to rename it "corn sugar," the proliferation of functional foods (e.g., orange juice infused with omega-3 fatty acids normally found in cold water fish), and the nutritional value of exotic fruits, berries, and seeds (e.g., acai and chia) which are currently marketed as superfoods with nearly magical restorative and protective properties.[48] In the face of all of this messaging, reporting, and advertising, one must question whether consumers have the skill to determine what is "hype" and what is "healthy."

The media, in all its forms, can be an effective tool for disseminating health information, but the quality of the nutritional information disseminated and the amount of information incorporated into the nutritional knowledge of consumers are unknown. An Academy of Nutrition and Dietetics (AND, *formerly the American Dietetic Association*), survey of American consumers found that in 2000, television, magazines, and newspapers were the leading sources of nutritional information for consumers, followed by books, physicians, and friends to equal degrees.[43] A 2008 administration of the same survey found that while television (63%) and magazines (45%) remain among the most frequently reported sources of nutrition information for consumers, newspapers (19%) have been replaced by the Internet (24%). Very often, consumers

reported using more than one of these sources of information.[49] Not only are there many, and often conflicting, sources of nutrition information available to the general public, but much of this information can be accessed instantaneously and without the assistance or guidance of experts in the field. Findings from the 2008 administration of this survey indicate that there has been a two-fold increase in consumers who actively seek out information on nutrition and healthy eating from 19% in 2000 to 40% in 2008.[43,49] Of those surveyed by the AND in 2000, more than 20% reported being confused by the various reports providing nutritional information.[43] This figure more than doubled (41%) in the findings of the 2008 administration of the survey.[49] A series of surveys conducted by the International Food Information Council from 1995-2005, found that media reports of nutrition information lack context and provide only a fraction of the information consumers need to make truly informed decisions around nutrition.[50] Moreover, these reports often fail to provide accurate and practical applications of findings.[50]

Government Guidelines & Recommendations

Government has taken a role in advising Americans on dietary behavior since the early 1900's. This advice was formalized and packaged for public consumption in the form of Dietary Guidelines for American (DGAs), which have been updated every five years since 1980.[51] Intended to help Americans develop and maintain a healthy diet, DGAs

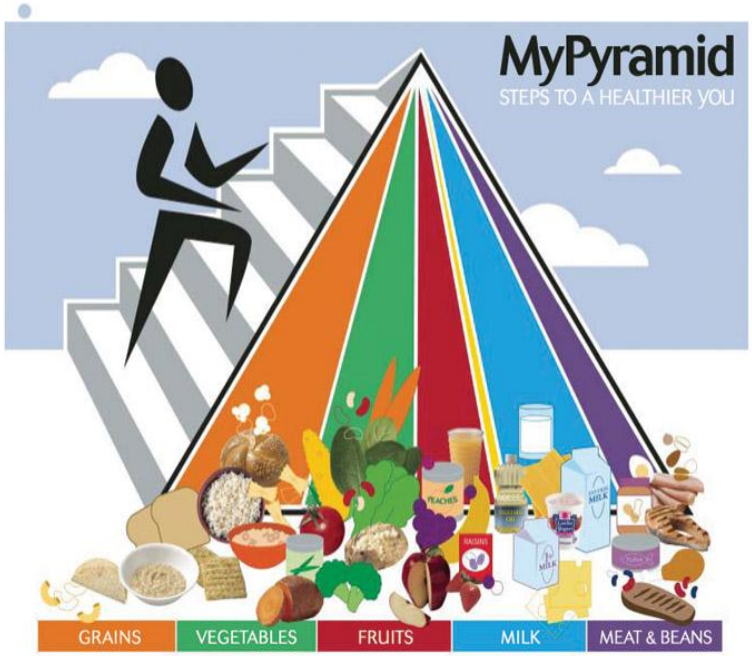


Figure 3: MyPyramid Mini Poster, USDA, 2005

describe the components and proportions of a healthy diet, but how well is the information disseminated and do Americans actually utilize this information when selecting food items while grocery shopping? Some of the difficulties around DGAs become obvious when new guidelines contradict previous guidelines, fly in the face of nutritional knowledge handed down from parents, caregivers, and elders, or seem to conflict with the latest media reports.[52] The Food Pyramid, for example, a staple of nutrition education, has changed several times since its implementation in the late 1980's.[53] The most recent version has been severely criticized by nutrition educators and experts, who fear that it will be difficult to interpret.[23,54] The various food groups are represented by vertical bands of color, the width of which is meant to represent the proportions in which that food group should be incorporated in the diet. (Fig. 3)

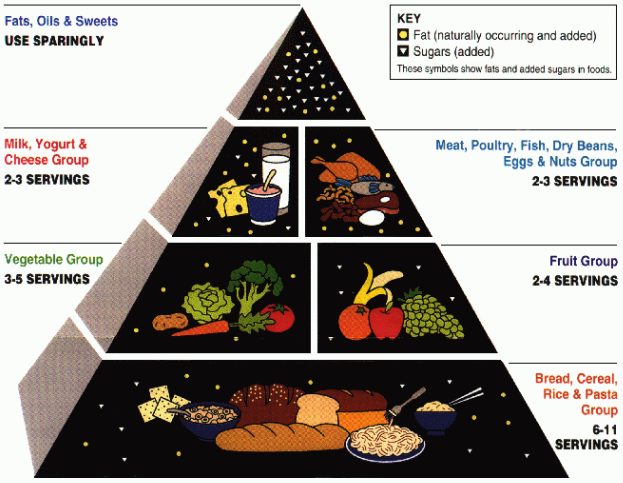


Figure 4: Food Pyramid, 1994 Version

The food groups had been previously represented by levels or blocks, with food groups that should be incorporated into the diet in the greatest proportion located at the base of the pyramid and those that should be incorporated sparingly at the apex of the pyramid. (Fig. 4) It is believed that this visual representation is more easily understood and interpreted by the public than the current one.[54,55] In fact, many consumers are not aware of the new food pyramid, what it represents, or how to use it in making decisions around food consumption. Therefore, it is logical to assume that it is not considered in the context of grocery shopping.[56]

Design & Method

How and when do consumers employ health knowledge in the context of grocery shopping? Do they act on the health knowledge they possess and if not, what is it that trumps knowledge? Do people go out of their way to find healthy food items? Why do they purchase certain items and leave others on the shelf without a second thought? Complex and challenging questions such as these are best handled using qualitative inquiry, such as participant observation and interview. Typically, studies around diet, whether of knowledge, consumption, or food preparation, are retrospective in nature and depend upon participant recall, often conducted in a setting other than where the activity of interest takes place. Rarely do the instruments used, dietary records, food frequency questionnaires, and 24-hour recalls, allow for participants to relate their actions to other parts of their lives or histories. These studies are often rigid in design and may not permit participants to reflect on their behavior or explain the thoughts behind their prescribed or categorical responses.[57] Furthermore, these kinds of studies focus on consumption, rather than shopping.

The purpose of this study was to explore and characterize the various factors that influence the making of shopping decisions within the setting of the grocery store and to assess whether or not and the degree to which health knowledge plays a role in the decision-making process. The neighborhoods selected for this study were East New York and Downtown Brooklyn. I was interested in examining the differences in decision-making between shoppers within the two neighborhoods and the factors related to that decision-making, as well as how the differing food landscapes might influence the selections made by participants. The methods selected for this study, participant observation and semi-structured interviews are designed to examine participant behaviors within their natural environment and context, while recognizing that the behaviors do

not occur within a vacuum, but are influenced by social and cultural norms, the unique composition of urban space, and the contexts and events that have led up to the observed experience. The primary methods used for this study were participant observation and qualitative interview. I accompanied shoppers on what they identified as a typical shopping trip and asked a series of questions, using a question guide to facilitate discussion.

Qualitative methods are appropriate for the study of food selection and the influence of factors associated therewith such as taste preference, product familiarity, and health knowledge, which are embedded within culture, environment, and societal norms, areas in which qualitative methods have proven particularly useful.[2, 40, 43, 44, 46, 58] Participant observation and qualitative interview are well-suited to examining variables of interest within a natural setting, where they routinely occur or are found. These methods, which explore the *whys* and *hows* of human behavior within a social context, allow researchers to go beyond what has been learned through quantitative research and determine pathways of dietary knowledge acquisition and operationalization within the context of grocery shopping. Qualitative methods generate a depth of information, uncovering important themes and providing explanations of what has been found using quantitative research, yielding a more complete and compelling story, as well as revealing areas for further study.[59]

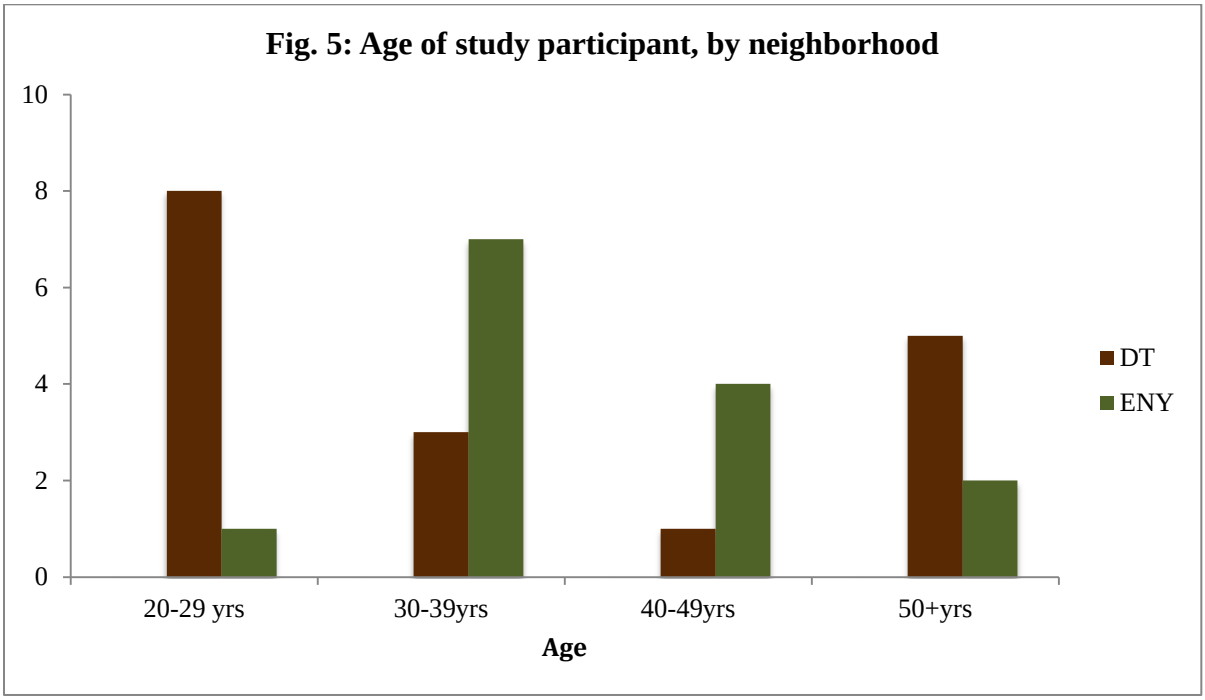
The emerging field of food studies has given rise to newer qualitative methods such as food-centered life histories and *charlas culinarias* (culinary chats) which have been used to explore the history and culture of food, gendered experiences related to food, and the social context of food, but little has been done using qualitative methods to explore dietary knowledge and its influence on shopping decisions.[58, 60, 61] A qualitative approach provides the researcher with a chance to learn about how food and nutritional knowledge develop and where they fit and

intersect within the lives of participants. Allowing participants to talk about what a particular food item means to them, where it fits in their culture, what role it plays in the meal, as well as whether or not and how food might be viewed through the lens of health, may provide insights as to how and why some foods are easily incorporated into our diets while others are not. In the battle against obesity and diet-related disease, it is imperative to determine where opportunities exist to influence choices in food selection.

Sampling and recruitment

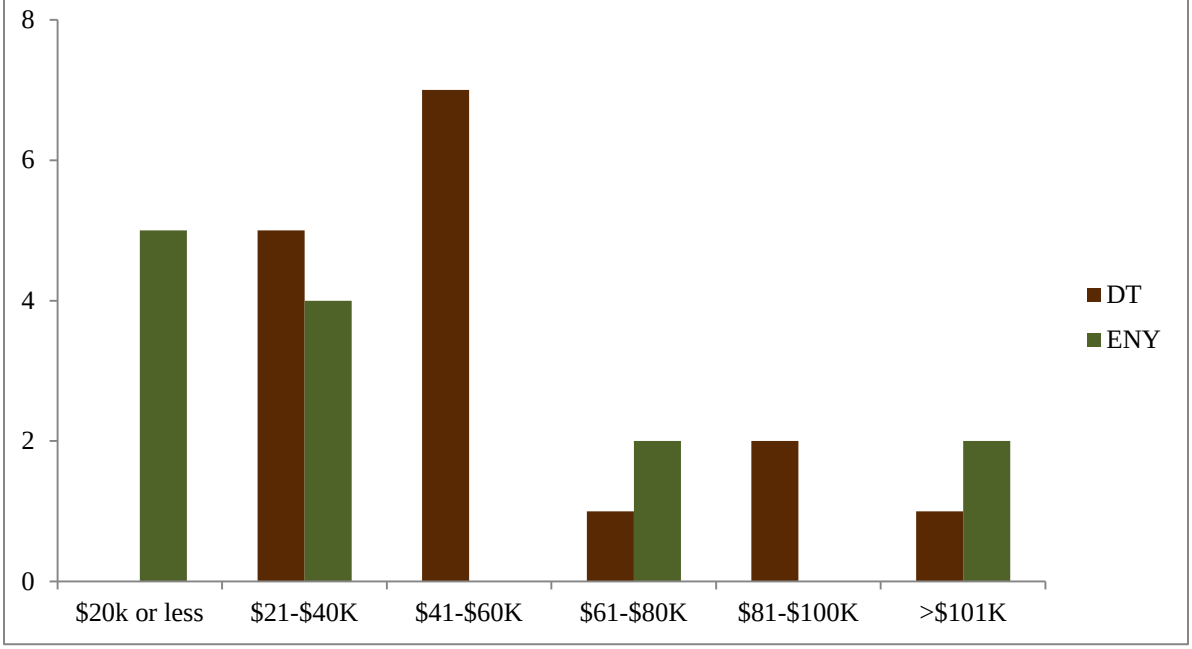
Thirty-one participants from four zip codes participated in this study. The sample consisted of 25 women and 6 men, who ranged in age from 25 to 69. (Fig. 5) The majority of participants, 19 of the 31,were under 40 years of age. Racially, the sample had nearly equal numbers of black and white participants, 11 and 13, respectively. Latinos (4) and Asians (3) comprised a smaller proportion of the sample.

Fig. 5: Age of study participant, by neighborhood



Participant incomes ranged from less than $20,000/year to more than $100,000/year. (Fig. 6) The average income for Downtown Brooklyn residents was $52,150/year compared to $42,377/year for East New York residents. A greater number of Downtown Brooklyn residents held undergraduate and graduate degrees compared with East New York residents.

Fig. 6: Participant Income, by neighborhood



Site selection

In choosing study sites, I attempted to reach a cross-section of the population within each neighborhood. To this end, I selected sites where there was considerable foot traffic and where people gathered for a variety of reasons that were not directly related to shopping. Primary recruitment sites included the sidewalk area directly in front of the YMCA and public libraries in each neighborhood. Additionally, participants were recruited in front of post offices, courthouses, transportation hubs, and polling sites on Election Day. While many sites may have facilitated recruitment, these locations were selected because they offered services that were

likely to attract a mix of people rather than a specific demographic (e.g., similar age, race, interests). For example, YMCAs were selected as a recruitment site because of their role as community centers, drawing neighborhood residents for a wide variety of purposes. While programming varies to some degree from branch to branch, in addition to its fitness programming, most YMCAs host afterschool programs and summer camps for children and teens, continuing education classes for adults, and various community meetings, as well as social and political functions. Similarly, libraries serve the general public and appeal to a wide range of interests including music and film. Libraries offer a variety of free programs across a range of topics and they provide free meeting space for community groups. The variety of activities that take place at YMCAs and libraries makes it likely that participants recruited at these institutions will represent a cross-section of neighborhood residents.

Participants were selected from two Brooklyn neighborhoods, East New York (zip codes 11207 and 11208) and Downtown Brooklyn (zip codes 11201 and 11217). A purposive, convenience sample of 31 participants was recruited to participate. A brief screening instrument (Appendix A) was used to determine eligibility of potential study participants, using inclusion/exclusion criteria. Individuals who were willing and eligible for study participation were provided with a consent form (Appendix B) detailing the study purpose, duration, procedures, risks, and provisions for voluntary withdrawal.

Study participation was limited to adults over the age of 18, who held the primary responsibility for grocery purchases for the household, and who could communicate comfortably in English. It is unusual for individuals under the age of 18 to have primary responsibility for the grocery purchases of a household. Although a teenager might be sent to the store with a list of items to purchase from time to time, this activity does not represent the norm. For the purposes

of this study, it was important to speak with the person who did the majority of the grocery shopping for the household, as this person would be instrumental in dictating the diet of his/her housemates. It is this group whose decision-making process is of interest. In the case of the teenager sent to the store with a shopping list, it would likely be this person who compiled the list and made the decision as to what was included or excluded.

Inclusion of non-English speakers was not feasible, although it would have been desirable to include Spanish speakers, as they comprise a sizeable segment of the East New York population. Limited resources for the translation of study documents required that study recruitment be limited to English speakers. Another qualification for participation was that participants come from a household of not more than three adults and with no children under the age of 16 in the home. Given the small sample size, it would have been difficult to analyze so many variables within such a small group and reach a meaningful conclusion. As to the limitation of children under 16 in the home, there are numerous studies that document the influence of children on parental grocery shopping decisions. The study sample was too small to allow for stratification by either of these factors.

Human Subjects Considerations

Given that study recruitment was conducted on public thoroughfares, permission to conduct the study on the premises of the institutions mentioned previously was not necessary. An informed consent form (Appendix B) was made available to participants. This form ensured that all participants were made aware of the nature of the project and the anticipated amount of time involved, that they understood that at no time would their name be used in the data resulting from their participation, that the interview recordings will be erased at the conclusion of the study, and that any participant could withdraw from the study at any time without negative

consequences, and without needing to provide a reason or explanation for withdrawal. The consent form included my contact information, that of my dissertation sponsor, and the CUNY Institutional Review Board. The form was read to potential participants and they were invited to ask questions before making a decision to participate. All participants were provided a copy of the consent form for their records.

Data collection procedure

The methods of data collection used in this study largely integrate the techniques for qualitative inquiry described by Ely and colleagues, and Cresswell. [59, 62] At the beginning of the interview, I took some time to remind participants that they could refuse to answer questions or end their participation at anytime. Some of the participants had questions about my coursework, others were interested in what I would do with the information I learned from the study. A number of participants apologized in advance, saying that they didn't have much money to spend or that they take a long time to shop. I reassured each of them that whatever their process entailed was fine and that there was no minimum or maximum amount of money they needed to spend in order to participate in the study.

A digital recorder was used to capture interactions with participants and pictures of specific items were taken using a cell phone camera however, no pictures were taken of the study participants themselves. I made a conscious decision not to make written notes during my encounters with the participants, lest they feel judged or otherwise uncomfortable. Instead, I wrote copious notes immediately following each interview, noting things not captured by the digital recorder, such as body language and of course, my own impressions. As recommended by Ely and colleagues and as others suggest, it is sometimes best to simply be in the moment than try to capture every word and gesture on paper.[59, 62] A field log with researcher notes,

observations, and partial transcriptions of interviews was kept. Participants were assigned unique identifiers in the following manner: [chronological#] + [neighborhood code], e.g. 1DT0117 is the code for the first participant from the DT area, where the target zip codes are 112***01***and 112***17***. Participants were later given pseudonyms. In the field log, participants are referred to only by their assigned number. Data was collected through observation and semi-structured interviews. This log of researcher observations and comments and interview transcripts composed the primary source of data for analysis.

Qualitative Interview

The single most important tool for data collection in this study was qualitative interview. The interview permitted me to ask about what I observed and learned about how, where, and when participants developed certain ideas, and gained or applied specific knowledge. Without the opportunity to hear directly from participants, their opinions or perspectives, my observations would yield a very incomplete picture. Interviewing allowed me to collect and sift through the various layered meanings of a particular phrase or term offered by the participant. [62]

I accompanied participants on shopping trips, talking with them about their selections as they went about their task. A number of participants seemed almost grateful for my company and mentioned how boring they usually find this task. At the start of the project, I was concerned that talking while shopping would be disruptive or distracting to participants, but with the exception of a handful of shoppers, they seemed to enjoy the conversation and more than a few invited me to have coffee with them at a later date. No participants withdrew from the study once we began the shopping trip. In order to facilitate discussion, I utilized a question guide that included questions related to nutrition knowledge, shopping habits, food costs, cultural preferences, and product familiarity such as *"What kinds of foods do you prepare at home?"*

"How do you recall your family doing the grocery shopping when you were a child?" "If you could make changes in the grocery store where you shop, what changes would you make?" or "What are some the different stores where you shop for food?" Based on the participant's responses, additional probing questions were asked such as, *"Have you ever heard of a program called the Food Guide Pyramid?" "Have you heard about health problems caused by eating too much fat?"*[63, 64] Participant responses dictated which prompts and probing questions were used to follow up. Questions intended to assess dietary knowledge were taken from validated survey instruments such as the Panel Study of Income Dynamics (PSID) and the Diet and Health Knowledge Survey (DHKS).[63, 64] The discussions had during these shopping excursions often triggered memories or gave the participant pause. Questions about the shopping habits of parents or where they picked up a specific bit of information would lead to comments such as, *"I haven't thought about that in years"* or *"I really have to think about that for a minute."*

Interview transcription closely follows traditional guidelines, but allows for pauses and utterances that would normally be corrected or edited out of the text. Patai, in her work with Brazilian women in the late 1980's asserted that neatly edited and transcribed speech is neither an accurate nor trustworthy representation of data. She opted instead to use a form of transcription in which participant speech is presented in full, with all of its idiosyncrasies, including unintelligible utterances, stutters, extended pauses, etc.[65] While not exactly the same as Patai in its form, the transcription style offered here proves to be richer than traditional transcription, in that the pauses and utterances normally disregarded may carry meaning and were therefore be included in the transcription as they communicate emotion and are a valid part of the interaction. I have found that in some cases, the colloquialisms used by participants are the only means they have of describing a particular thought or feeling and if not the only means,

certainly the most familiar. Is it my place to edit their expressions and experiences so that they fit neatly within an academic context or is it my obligation to accurately document these expressions and experiences in a way that reflects the honesty with which they were shared?

Data Analysis

Analysis of qualitative data is an iterative process that begins in part, even before the first data are collected. The questions asked, the unit of analysis, and the data collection methods used determine the method of analysis and are already discussed in the proposal that precedes the dissertation.[59, 62] Field notes and transcription are in themselves, a sort of analysis, providing an opportunity for the researcher to revisit emerging themes a number of times before conclusions are drawn.[66] Ely suggests that the researcher employ the analytic memo as a means of cataloging observations and warehousing questions to be further researched or discussed. The analytic memo is a tool that allows the researcher to identify and examine his/her own biases, opinions, questions, and stance without tainting the data.

As suggested by Miles and Huberman, I applied a two-pronged approach to the coding, implementing a structured coding scheme by assigning to categories, responses to the interview questions and utilizing an open-coding process, in which key words or comments were assigned codes. The open-coding analysis captured emergent themes and concepts that were identified during the interviews. I developed and reviewed the codes and implemented a "check-coding" mechanism, also recommended by Miles and Huberman, for evaluating the reliability of qualitative research and ensuring code definition clarity.[67] The data was then analyzed for themes and cataloged by research question in an attempt to answer the main research questions.[59]

Data was analyzed using inductive and deductive coding. Deductive coding was used for items more easily quantified, such as those related to discrete dietary knowledge and access (e.g.,

the number of stores used for grocery shopping on a regular basis; and; the number of miles from door to store, minutes of travel from door to store, and trains and buses used). The observed shopping trip and interviews were inductively coded using the constant comparative method.[59, 68] Qualitative data analysis is an iterative process and therefore, repeated checks of coding consistency were conducted with an assessment of inter-coder agreement.[59] I coded all of the interviews and a research assistant also reviewed each of the recordings, independently and applied the same coding processes, identifying key words and comments. The research assistant and I identified nearly identical themes using key words and comments, indicating that our coding system yielded consistent results.

Study Strengths & Limitations

The design of this study allowed for participants to offer opinions regarding the behavior I observed that I would not have known about without their statements. They, in fact, raised issues from time to time that surprised me and which I had not previously considered. For example, several middle class or formerly middle class participants said that they utilize food pantries or in some way supplement their shopping because of a reduction or gap in financial resources. This was very unexpected. Some of the cost-saving strategies described by participants spoke to more than maximizing financial resources, and touched on generational characteristics that had not entered into my thinking at all prior to conducting this study. Qualitative study is particularly useful in uncovering these sorts of issues as the researcher can modify their inquiry during the course of research, based upon their ongoing observations and participant responses. I might never have asked about age-related factors and their role in decision-making had it not been raised by a participant early in the data collection process. The study sample was relatively large for a qualitative, exploratory study, and provided me with a

large enough sample to identify patterns and trends. Comparing two neighborhoods that are very different from one another allowed me to examine whether or not contrasting neighborhood characteristics would make a difference in my results.

The study also had important limitations. Non-English speakers were excluded from this study, as were consumers with children under the age of 16. These exclusions may have led to results that are not reflective of reality, particularly in East New York, where Spanish speakers comprise a substantial portion of the population and where it was more likely that there were be young children in the home, especially in the homes of young participants. Non-English speakers in either neighborhood may have had interesting insights to contribute to the study findings. Along these same lines, immigrants and men may not have been adequately represented in the study sample and their experiences may not be accurately captured or reflected in the data collected.

Finally, it is likely that my presence during the shopping trip may have resulted in the manifestation of Hawthorne's Effect of Social Desirability, or observer bias, wherein participants may have altered their choices to some degree in order to appear healthier or more knowledgeable in my eyes. In an attempt to control for this bias, I had requested that participants send me shopping receipts for subsequent shopping trips and provided them with self-addressed stamped envelopes in order to facilitate this request. Several months following the close of the data collection period, I still had not received a single receipt. One means of addressing this limitation might have been to accompany shoppers on multiple shopping trips over a period of several months. If there were major differences in their shopping behavior because they were being observed, over time, it is likely that shoppers would have reverted to their normal shopping behaviors, despite my presence.

Results

Over the course of five months, from September 2012 through February 2013, I shopped with 31 people, residents of the Downtown Brooklyn and East New York sections of Brooklyn. I visited grocery stores on Smith Street, Montague Street, Flatbush Avenue, Fulton Street, and Jamaica Avenue, in Brooklyn. Several shopping trips took me into the Queens neighborhoods of Ozone Park and Douglaston. I spent an average of an hour speaking with these shoppers about the reasons behind the choices they make in the grocery store and observing their shopping behaviors. We discussed everything from how they get to the store to budgeting and food preparation. Though the neighborhoods represented in this study could not be more different, so much of what I heard and observed was the same or very similar.

Class

The commonalities across neighborhoods may be attributable to the 2008 recession and its effect on the middle class which was evident in the sample, with many being pushed towards the low end of the income spectrum and some experiencing true need for the first time in their lives. The middle class in New York City is unique in many ways when compared with the rest of the country. The cost of living in New York City is among the highest in the United States and it is not uncommon to find middle class New Yorkers struggling to meet the most basic of needs.[69] A report recently released by the New York City Council, *The Middle Class Squeeze*, spoke to the fact that, what would be considered middle class income in other parts of the country would be considered low income in New York City and middle class in New York City would be considered upper middle class, bordering on wealthy elsewhere, which it certainly is not in a city with some of the highest housing costs in the country. For example, using the annual median income (AMI) for NYC as the basis for categorization, it might seem reasonable and valid to say

that the range for middle income is 100%-200% of the AMI, which in NYC would be equivalent $66,400 - $132,000 for a family of four; however, given the high cost of living in this city, families at the lower end of this range would likely struggle to meet expenses, such as housing, transportation (for each family member), health care costs, and of course, food. Families at the higher end of this range, while perhaps not struggling, would not necessarily enjoy a standard of living equivalent to a family of four with the same income in an area where the standard of living is considerably lower in comparison.[69] For the most part, participants in this sample, according to this measure and adjusted for family size, are far and away low income to lower middle income, with only a handful exceeding those limits and resting firmly in the middle to upper middle income categories, equivalent to "middle class." Given this unique situation, we find that people who, according to the formula, are not categorized as "middle class," self-identify as such and consistently behave according to class status.[69]

One-third of study participants, across both neighborhoods, are middle class New Yorkers, three of them from East New York. Based on the New York City Council's report referred to previously, although only one-third study participants would be classified as middle class, closer to one-half of participants would *self-identify* as such, based on characteristics such as education, occupation, values, and aspirations they deem consistent with middle class status.[69] They extol the virtues of education and home ownership. Several of them are the picture of civic mindedness, attending community board meetings, keeping up with local politics, and taking responsibility for their small section of the neighborhood. With the data collection coinciding with the 2012 Presidential Election, there was plenty of talk about voting and making one's voice count. They also talked about things like planning for retirement and trips they'd taken to various places throughout the world, indicating that they have means and resources to support

leisure travel. Taken together, these characteristics describe values and expectations consistent with the middle class.[69]

Middle class or not, the people in this sample were largely concerned with cost and what kind of value they're getting for their money. They talked about strategizing to ensure that the money they've allotted for food is maximized. This often translated into stocking up on sale items and finding the store with the best prices on pasta. They expressed anxiety around not having enough to eat during lean financial times and almost no one assumed that they were immune from experiencing a significant reduction in income at any given time.

Culture

While not completely absent, it was surprising how little ethnic culture appeared in each of the interviews. Interestingly, it did not seem to drive decision-making, but cultural foods did make an appearance in the cart when they were on sale; however, more than once, they were passed over in favor of foods that were not traditional for that culture, but cost less. In a few instances, these foods were considered staples, but also happened to be consistently inexpensive. Also interesting is the way in which foods from other cultures were incorporated into participants' shopping. With the exception of pasta, which may well be regarded as culture-neutral rather than Italian, because of how widespread the adoption of this food is, items like couscous and a variety of seasonings like curry and adobo were purchased by shoppers for whom these were not traditional foods. Oftentimes, exploration into or adoption of these items was inspired by a combination of influences from social networks, e.g., *"My friend's mom made this dish (Aloo Palak – curried potatoes and spinach), it was so good. I want to make it for myself. It was so quick and it's good for you."* and price, e.g., *"I wanted to try this (Adobo) for so long and it wasn't very expensive, so when I found it my store, I took a chance and I was hooked. Plus,*

it's like all the seasonings in one bottle, so I don't have to buy all the other ones anymore and that makes it totally worth it."

Mary, East New York, on cultural foods

Mary is a 48 year old, Trinidadian woman. She identifies primarily as Trinidadian and secondarily as Indian or Asian. Mary has lived in East New York since coming to the U.S. from Trinidad, 20 years ago. She lives with her elderly mother, who is diabetic and Mary, herself, has food allergies. She is a holistic healer, trained by her church, whose healing tradition is rooted in prayer and nutrition. Mary has a high school education and makes approximately $18,000/year.

What are you picking up now?

Plantain.

What are you going to do with it?

I fry it even though I shouldn't.

Why shouldn't you fry it?

(Sheepish) Because my mother is diabetic, but sometimes I have to treat her, I can't give her bland food *all* the time, and she loves these. It's something from back home, like this (bok choy).

Chinese cabbage.

We're part Chinese, so this is something, in Trinidad, we eat. This too. (motions to item) You all, here, call it Yucca. We call it Cassava.

Are these things part of your normal shopping?

The plantains, only once in a while because of the sugar, and only when they're on sale. The other things are cheap all the time, so I usually get them. Since it's only two of us, it's very cheap to eat this way and they're healthy foods, so I don't feel bad to eat them.

Taste preference

Any study of food behavior would be remiss in overlooking the issue of taste as an influencer of choice. In this sample, taste often emerged as a mitigating factor in item selection. It was one of the factors most likely to trump cost and health, although that was not universally true. Participants selecting items for their healthfulness drew the line at products that offended their sense of taste. Tofu and other "faux meat" were most often eschewed in favor of lean meat, chicken, or fish. Items made of whole grains were also among the least likely to be purchased solely because of price or healthfulness. Finally, low-fat dairy products; milk, sour cream, and cheese, were often passed over for their full fat or "real" counterparts, coupled with a vow to eat smaller portions of the full fat item. Several participants talked about their reluctance to try some of the more healthful versions of their favorite foods because of the possibility that it might be unpalatable and they might have to discard it, wasting both food and money, two ideas that were unappealing across the sample. Participants were more likely to try a less expensive version of a product they would normally buy, if the brand was reputable or the ingredients were the same, but there were some items for which brand loyalty won out every time.

Luke, East New York, on taste preferences and shopping in different neighborhoods

Luke is a 37-year old Texan transplant to New York. Originally from Austin, he's been living in East New York for 2 years. He maintains two residences, one in lower Manhattan, where he works as an artist and the other in East New York, where he lives with a friend. He describes his shopping as "bi-polar." "When I'm in Manhattan, I shop one way. When I'm out here, another." He holds very strong views on government, race, and economics, which he credits to his upbringing in the progressive city of Austin. He points out that as the product of a Mexican mother and a white father, "[his] view of the world is bound to be just a little bit different.

"I shop for certain things in the city, Whole Foods, like, cheese, chocolate, beer. It's just not out here. And if it was out here, they wouldn't buy it if it was. Like, two days ago, I bought a 24-ounce bottle of beer for $16.99. So, (snickers) good luck with that. (snickers) In ten years? Absolutely, but today? No. It's just not there yet. It's coming. And the steak? Oh my God! What they call steak here. I don't care how fucking cheap it is, I'm not eating that shit. I'd rather pay an arm and a fuckin' leg to get a really good piece of steak. For fuck's sake, I'm from Texas! I could never eat this shit. My body would go into fucking convulsions or some shit." (laughs)

Luke's comment, *"It's just not out here. And if it was out here, they wouldn't buy it if it was. Like, two days ago, I bought a 24-ounce bottle of beer for $16.99. So, (snickers) good luck with that."* Speaks to his frustration with the limited variety of certain products at this East New York neighborhood market. He expresses similar frustrations with Whole Foods and their prices. Specifically, here, he's making reference to a specialty beer that is costly. He contends that even if the East New York market stocked the item, community members are unlikely to buy it because of the price.

Mary, East New York, on taste preferences

Why whole milk rather than skim, 1%, 2%?

It tastes horrible! It's like having cereal with water! (laughs) I think I can splurge a little on the fat. (laughs)

Adela, East New York, on taste preferences

So, the Kashi?

For my husband; (smirks) I can't eat it.

No? Why?

Ay, I can't. It tastes…it…it tastes like hay! I don't even know what hay tastes like, but I'm guessing that's it. (laughing)

Alicia, Downtown Brooklyn, on price vs. taste

"Price is probably most important thing to me when I shop. I'm on my own and I told you about my job. I try to buy the cheapest thing, but taste…I mean I wouldn't buy something that I know I don't like because it's cheaper than something I do like. But if I could try something that was really similar for a few dollars less, I might give it a shot."

Quality

Quality in one form or another was mentioned in many of the interviews. Shoppers were concerned with the quality of the products they purchase as well as the venue in which they shop. For the most part, Downtown Brooklyn residents spoke of quality in terms of food purchases and getting the best quality for the price, while East New York residents talked about both quality of products and quality of venue.

Jackie, East New York on quality, particularly with regard to venue

Jackie is a 37 year-old black woman who recently moved to East New York following a separation from her husband. She has an older child, age 17, with a wheat allergy. A New York City public school teacher, for the past 12 years, she specializes in the sciences and teaches middle school biology, chemistry, and physics. She describes herself as a "wannabe, pseudo-vegetarian," citing that so much of what she eats is already consistent with a vegetarian diet, but she can quite give up on seafood and chicken. She holds a bachelor's degree in pharmacy science and had one semester left to complete a master's degree in education.

What would keep you from shopping in a particular store?

If it was not clean. If I felt that the food or the meat, the fresh meats weren't fresh or sanitary. If I look at the produce and, and they don't look fresh. If—they look rotten, or just not being clean, overcrowdedness.

Overcrowded with customers?

Overcrowded of products where you don't even have space to put things. Cluttered.

Okay.

And the customers being overcrowded is a good sign because that means that, you know, it's a good

place to obviously shop.

What's the connection between there being a lot of people and it being a 'good place to shop?'

To me a lot of customers means—well it could be that they don't have another choice but it could also mean for me that if there was another choice—they wouldn't shop there. A store that has a lot of customers, there's a reason why a lot of people are going there. Because people ultimately make a choice of where they want to shop. Even when they feel like they don't have another choice.

You think that the fact that that store is crowded isn't just evidence that it's the only option?

Exactly.

Because, you said, people make a choice.

Exactly.

So if you didn't have an immediate alternative, what would your choice be? What do you think people, *how* do you think people make that choice or where do you think they go?

People will make arrangements, like they would take the bus. They would take even a cab, I have.

Tell me about that, you have what?

There have been times when just on my own, I have lived in areas where I'm not favorable of the supermarket and it seemed as if it would be the…convenient way out to go and I have been inconvenienced by my choice not to go there because I wanted quality food.

Ah, okay, and what—how do you define quality? What's quality?

Quality, like fresh. Clean. Something that, you know, you're not scared or nervous about eating. Quality, like things, certain products that you look for that you shop. Nothing against, no frills, but just, you know… something that has a good reputation and is known to be good.

So you said 'clean' a lot in describing the shopping uh, situation.

Uh-huh

Define clean. I know that sounds, like, obvious but how do *you* define clean?

If the floors are clean, there are no visible pests, the door or the shelves are clean, there are no visible like, dysfunction like, in the— or on the shelves like— like meaning, like, things are not turned over, they're in order, it's presentable, it's just something, it makes you—
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Clean describes me, to me—comfortable. It's just like sitting on someone's floor in their house. If it's clean then you'll feel comfortable doing it. If it's not clean you won't sit there.

Uh-huh.

So it's the same thing with me, if it's not clean then I would not want to shop there.

Beth, Downtown Brooklyn, on quality

Beth is a 25-year old white woman from New Jersey who relocated to New York for school. She recently completed a master's degree in public health and works in medical research, earning $50,000/year. Her parents, both physicians, converted to a vegetarian diet when she was very

young and she continues to maintain a vegetarian diet today. She exercises "religiously" and while she enjoys food, she says that it doesn't occupy an "enormous part of [her] life."

"I feel like, like if you're going to eat something, it should be really g—the best quality and if it's expensive, just buy less of it. I don't spend a lot on groceries and I think it's because I don't buy much meat, but when I want something, if I can't get the best, I'll just pass altogether. What's the point?"

Olivia, East New York, on quality and shopping venue

Olivia is a 42-year old, Jamaican woman who identifies as black, but not African-American. A force to be reckoned with, she says of identity, "I hate that term. I really and truly hate it. How can I be African-American, when I'm not American? I'm black. Period." Olivia was born in Jamaica, but came to the U.S. before she was two years old. She holds a master's degree in education and works for a government agency. She has lived in East New York for nearly 15 years, with her husband and their 17-year old daughter.

What store are we shopping in today?

Fairway—in Douglaston. I usually go to the one in Red Hook, but it's closed because of storm damage.

Is this the first time you've been to the Douglaston store?

No, I've been here once or twice before.

Will you go back to the Red Hook store when it opens?

I might, you know. Not sure. This one feels bigger, and it's closer. A lot closer. But there's a vibe that I don't like.

A vibe?

You know the vibe. (laughs)

Explain the vibe. (laughs)

The vibe is, I don't belong, or at least that's how I'm made to feel. I *belong* wherever I damn well and want to go.

What makes you feel that you're not wanted?

There are looks and you just, come on, you know what I'm talking about.

I need you to explain it.

(Sighs) Fine. When you move through the aisles, some of them act like they've never seen a black person before. Or maybe they've never thought black people shopped at places like this. I really can't tell you what ignorant foolishness is going through their heads, but it's obvious that they're uncomfortable with my presence.

But you still shop there?

To hell with them. Why should I have to shop in ghetto supermarkets when I can afford better? If the staff were rude, then maybe I would shop elsewhere, but I've never actually had a problem with the staff and they hire blacks to actually be on the floor (laughs) where they can be seen. (laughs). I won't give my money to stores that don't hire blacks. If we can't work for them, in a visible capacity, they don't need our money either.

Understood. So, why Fairway?

The selection. Trust me, you're not seeing the same kind of selection in the ghetto. I would come all the way out here for the bread alone. (laughs) Girl, you have to pick up some bread. So good.

Do you shop in your neighborhood at all?

(Shakes head) I'm not accustomed to the foolishness that these people carry on with. The cursing and yelling. And they're so nasty. No upringing. None. So, no, not really. I might pick up a loaf of bread or some eggs, but even that is rare. Those stores don't carry quality items and then you have to worry about how long it's been on the shelf. The refrigerator is not functioning properly, so when I have my morning coffee, I'm putting my life at risk. (laughs) I'm serious. Those places. (disdainful face) No, not me. Sometimes, I'll go to Pathmark. And mind you, that's sometimes.

Which one?

Cityline? Ozone Park. But even that. Lately, just really low class people. The customers, the staff. Even the managers. Low class. (laughs) I know, I'm terrible, right? I don't care. Call me *stush* (stuck up). I really couldn't care less.

Location and Access

The location of the store, in many cases, was a determining factor in where people shopped, which then influenced the selection of items to which they had access. In this area is where the two neighborhoods differed most. For the most part, in Downtown Brooklyn, participants walked to the store where they shopped for the interview and except in instances where special purchases had to be made, e.g. bulk purchases or specialty items, participants walked to all of the

stores in which they shopped. Even with most specialty purchases, they were able to remain within the neighborhood because of the density of specialty shops on the various major shopping thoroughfares, e.g. Court Street, Smith Street, and 7th Avenue. On each of the downtown shopping trips, I passed cheese shops, bakeries, nut shops, fish markets, confectioners, and retailers who carrying an abundance of imported goods from all over the world. Supermarkets in this neighborhood carried a large variety of Asian and British goods, compared with East New York supermarket stock that was reflective of the area's large Latino and West Indian populations. Asian and British products were also available in ENY; however, the selection of products was much smaller and aside from bakeries and fish markets, there were no specialty food shops in the immediate area surrounding the shopping venues where interviews took place.

In East New York, the college educated and relatively high earners (i.e., in relation to their neighbors) reported that they traveled regularly outside of the neighborhood, whether by public transportation or by car, up to an hour and as far as 15 miles to the retail outlet of their choice. This bears a stark contrast with the their less educated, lower earning counterparts in the neighborhood, who travelled, in most cases, no more than 10 city blocks, approximately one mile to their nearest market. My findings were consistent with the literature, which indicates that shoppers who are elderly, disabled, have been unemployed for an extended period of time, and/or are single, female heads of household are more likely to rely on neighborhood or local retail outlets to meet their grocery shopping needs.[70] The point should be made that while some of these shoppers are crossing neighborhood boundaries, they are not traveling great distances to their destinations. Most of the East New York participants indicated that they shopped in venues they could easily reach by walking and seemed to believe that was true of their neighbors as well. Many made the point that neighbors with cars probably ventured outside of the

neighborhood and said they would do the same given those resources. East New Yorkers who used public transportation also developed strategies to reduce transportation costs associated with shopping, *"I take the train there and then shop quick and take the bus back. That's one fare!"*

Audrey, East New York, on traveling to the grocery store

Audrey is a 57 year-old black woman who lives in East New York, but shops in Downtown Brooklyn. She's originally from the south, but has lived in New York for more than 30 years and in East New York for most of that time. She has a high school diploma and extensive professional training in administration. She lives alone and is on a fixed income comprised of SSI/SSD. Serious injuries sustained in a car accident almost 10 years ago, left her unable to work, reducing her income by nearly 85%. Since then, she's relied on her son to help her with the grocery shopping, both financially and physically. She reports that the combination of physical impairment and a fixed income has left her unable to eat the way she once did and to afford the kinds of foods she once enjoyed.

Alright, now we're on. Technology failed us for a moment, so I'm going to recap and you tell me if I got it right. You were saying that you live in 11207?

Uh-huh.

But you shop in this neighborhood, which is in 11201.

Yeah, me and my friend, we were down here going to school, and we found this place.

Do you shop in the neighborhood at all?

No, un-uh. There's an Associated near me, but I don't go there no more. It's all the way down that hill. You know, the big one? By Highland?

Yes, it's very steep

Yeah, and I can't do that hill no more. My leg. (shakes her head) I just can't do it.

So you shopped there before the accident?

Tell the truth, not really. The prices, their prices are too high. Their stuff is not so fresh. I like down here because things are a little greener, more appealing, you know? And they have a good deli department too. The deli department at Associated is just sad. I like my macaroni salad and stuff. I would never buy it there. It looks nasty.

How do you get here?

I just catch the 25 at Broadway Junction.

But don't you have to come down the hill to get to the Junction?

Un-uh, (laughs) I found me a short cut. I can walk out like I'm going to the Parkway [Eastern Parkway] It's a walk, but it's not too bad. Better than that hill, that's for sure.

How long does it take to get to this store?

It's a 35-minute ride down here. I have to wait a while for the bus to come.

What's "a while?"

Sometimes 5 minutes, sometimes 25 minutes. It depends, but it's fine with me because it gets me out of the neighborhood.

Where else do you shop?

I try to spend my money smart, you know? Catch the sales and stuff. I read all the circulars, CVS, Walgreen's, this one [Key Food], and I check at Trader Joe's sometimes, but it's too crowded for me with this leg and I really can't afford that place. And Shop Rite, but Shop Rite is too far for me because I don't drive and I can't always depend on my son.

Is all of your shopping in this neighborhood?

Yup, all of it, uh-huh. I shop a little every day because I can't carry much. So I go to different stores every day. Key Food today, CVS tomorrow, like that.

Where did you shop before the accident?

Pathmark. That one on Atlantic.

Atlantic Center?

No, un-uh, the one out there, um, I think it's Queens. The one out near Aqueduct.

Cityline?

Yeah, that one. I used to drive, so it was no problem. That's a big store and the prices are good, but I can't get there.

The Q24 goes down there.

I thought they stopped that bus.

No, I don't think so. I took it last spring. It stops about a half

a block from the shopping center.

I didn't know that. I really thought they got rid of it. Remember when Bloomberg was cutting buses. Him and the MTA. Okay, now I know. Thank you.

Your welcome. Do you think you'll take the bus there now that you know it's running?

Maybe. See, when I come down here, my son will meet me after work and drive me home. Maybe. You know, in the winter, probably. I usually go down by Cadman Plaza and sit on the benches and wait for him, but I can't do that in the winter and I usually just have to depend on him for everything, which I hate. He has enough to do. So, yes, in the winter, I think I will. Thank you.

Cost

A number of common factors emerged that appear to have influenced food acquisition within this sample, chief among them is cost. Common to nearly all participants was the issue of cost. At every income level, comments were made regarding the increasing cost of food, lack of adequate financial resources to purchase food, or means by which to supplement grocery shopping in order to avoid food insecurity. Regardless of income, financial uncertainty was a universal concern, reflecting the current American economic climate. Participants, employed and unemployed, spoke about maximizing their budgets, limiting spending, and planning for lean financial times by stocking up, shopping the sales as much as possible, and utilizing alternative means for food acquisition, e.g., food pantries and feeding programs. With the exception of the highest earners in the sample, price drove most of the decision-making in this setting.

Adela, East New York, on cost

Adela is a 36 year-old Latina. She's married, college educated, owns her home, and has a household income of $105,000/year. She recently returned to working in social services after several years of working as a hair stylist in an elite salon. Her usual shopping venue is the Pathmark in Cityline, on the border of Brooklyn and Queens, which she gets to and from in her late model SUV. When we entered the supermarket, we found ourselves in the produce section. This is where she usually begins her shopping trip, citing that it's convenient to do so. She comments that most stores are laid out this way these days, with the produce close to the entrance. She browses the selection of fruits and vegetables, inspecting them and returns them to their place on the shelf, before moving on to the tropical items. She seems to be drawn to items that are brightly colored, such as lemons, oranges, and peppers. No attention is paid to green, leafy items or root vegetables. She heads to the back of the produce section and hones in on the item she's seeking out. She consults the circular twice, comparing the contents to what appears on the sign above the bin containing various types of bananas and plantains. She nods her head once and reaches into the bin, retrieving a bunch of green bananas and unripe plantain.

So, you're looking at green bananas and plantains now?

They're on sale 4/$1. They're green now, but they'll turn yellow and then I'll make *piñones.* Not something you make every day, but…(shrugs) everything is so expensive. (shrugs) They're on sale.

Do you normally base your meals on what's on sale at the store?

Not really. It depends. Sometimes. It's really…it depends on whether or not I have something in mind already. If it's already part of my list. If I see stuff that's on sale, I get it and then build around. Like in this particular case, I saw that the plantain was on sale 4/$1 and I've been thinking of making that [*piñones*] for some time, so…I guess, yeah, I do. I have in my mind what I'd like to make and if the stuff to make it isn't on sale, oh well.

Oh well?

> Oh well, I'm probably not going to get it. I have enough things in here (points to head) that I can always pull something together from what's on sale. I guess I just never really thought about it like this before. You just do *lo que tiene que hacer*. (*what you have to do)* You know?

Adela, like most of the people in the sample, whether consciously or unconsciously, spent time determining where various sale items, with the exception of staple items fit into their budget and how best to utilize items that were on sale. She said more than once during this shopping trip, "I guess I just never really thought about it like this before." It surprised more than a few participants that they'd been making so many of their choices based on cost. This was particularly true of relatively high earners like Adela, whose household income is well above the median annual income for her community, which is among the lowest in Brooklyn at approximately $30,000/year.[71,72] *"I never really thought about it before."* This phrase and variations thereof was repeated over and over again by participants from every demographic in both neighborhoods. They were often surprised at the "why" behind their actions, having never been asked to examine them before.

Unsurprisingly, cost was a major factor in driving choice among the lowest earners. Participants in both neighborhoods talked about living on reduced or fixed incomes, citing sources such as Supplemental Security Income (SSI), Social Security Disability (SSD), unemployment benefits, and income assistance (TANF, SNAP, etc.) and describing the difficulty of meeting basic expenses, including food. Across both neighborhoods, participants included people who worked seasonally or described their employment situation as "unstable." Many reported working as consultants or cobbling together several jobs to equal the income generated by a single full-time job. People in both neighborhoods talked about budgeting for food. More often than not, they had an idea of what they could reasonably spend on a shopping trip rather

than a fixed, budgeted amount, *"I try to spend less than $100 on each trip. I'm hoping not to go over $80 today."* Even well-earning participants walked into the store with an idea of what they wanted to spend and tried not to deviate from it. Only among the highest earners in the sample was no mention made of a budget. Rather, they focused on quality and value for the dollar.

Alicia, Downtown Brooklyn, on unstable employment

Alicia is a 28 year-old bi-racial, black, woman who shares an apartment with two roommates in a particularly expensive area of Downtown Brooklyn. She characterizes her work situation as "potentially unpredictable, but mostly, consistently intermittent." Working in the entertainment industry means that her employment is tied to time-limited projects. She describes herself as "luckier than [her] peers," who work in film and may not have a job in their field for a year at a time. She's found her way into television and is thankful that she's assure a season or two of work at a time and working on successful shows means that she's called back to work fairly consistently after the shows return from hiatus. She laments the fact that she doesn't qualify for unemployment, but also makes it clear that unemployment would not be enough for her to live on.

"Right now, I'm working as a research assistant at [NYC Hospital]. It doesn't pay much, but it covers me when, um, when my like, real work is shut down. It's kinda crazy, because for most of the year, I'm good. It's just like at the end of the fall season there's like two months of downtime and then at the end of the spring season, there's the whole summer, so like 3 months. Huh, I never really counted it out, but I guess that's almost half a year with like, nothing coming in. Crazy. I usually make enough to float me for like a month or a month and a little bit after then end of the season, so maybe that's why I didn't notice? (laughs) It's kinda like a school schedule, semester break and summer break. That's probably why. I've been working in entertainment since I graduated, so I guess my schedule never really changed and then I always got these little part-times to, you know, like cover…but New York, that's different. I had to get two roommates, just to find a decent place to live that I could like, afford. I don't like it…living with strangers. I don't like it."

Myrna, Downtown Brooklyn, on unemployment, and fixed incomes

Myrna is a 61 year-old Jewish woman who describes herself as a "secular reformist, [which means] I observe and go to temple, but I might have a bacon cheeseburger from time to time." She lives alone in the co-op she's owned for more than 10 years. She has a graduate degree in finance and once earned in excess of $100,000/year, but since being laid off two years ago, hasn't been able to find more than a few very short-term temporary positions. She struggles with the issue of taking temp jobs because it could lead to her losing her unemployment benefit

altogether. She also dreads the day the unemployment statistics are released because a reduction in the unemployment rate could mean the end of benefits altogether and she has no contingency on which to depend for housing, food, and the like. "Every time those numbers come out, I just hold my breath and ask God to keep it above 8%"

"I had a brief hiatus, but basically [I've been unemployed] since March 2011. I'm too old to be hired and too young to be retired…but nobody says I'm too old to pay my mortgage. It's like my mortgage goes on and my heat and hot water, well that's included, but my cable and this, that and the other thing… The money is just not there. I used to be part of a ladies group, you know, that got together every month? And now I'm on hiatus. And we would go out and eat and our shares would come out to $50. But I'm on hiatus. Cuz I'm trying to live on $100/wk or less. Now, instead of lunch with the ladies, I'm stopping by that church on Atlantic for a bag of groceries."

Participants in both neighborhoods reported instances of food insecurity mitigated by the use of pantry services or feeding programs of some kind in the last two years. This finding is consistent with food insecurity data and pantry utilization date reported by leading emergency food providers, such as the Food Bank for New York City. According to their 2012 report, *Serving Under Stress Post Recession: The State of Food Pantries and Soup Kitchens Today,* nearly half of their Brooklyn-based soup kitchens and pantry sites reported an increase in the number of employed people utilizing their services and approximately 80% reported an increase in patrons who are unemployed.[73] It should be noted these statistics reflect utilization prior to Hurricane Sandy, which has lead even more Brooklyn residents to emergency food programs and while these neighborhoods were largely unaffected by the storm, the impact on the emergency food system will surely be felt for some time to come. In East New York, even employed middle-income participants mentioned frequenting local pantries to supplement regular shopping. Use of pantry services was more common in East New York; however in neither neighborhood was this restricted to the poorest participants or those without employment.

Approximately 1.4 New Yorkers are food insecure, meaning that they do not have access to enough of the kind of food they need in order to meet their nutritional needs. Food insecurity is 2-3 times more prevalent in poor communities and communities of color, particularly among people living below the poverty line, single-parent and female-headed households. [74] Given that those characteristics essentially define the population of East New York, it is no surprise to find food insecurity among the East New York participants in this study, but what may be surprising is that even among the very small population of middle class ENY residents who comprise approximately one-fifth of the population, there is need.[72] New York City's middle class, hard hit by the recession of 2008, is feeling the pinch.[71] Like Downtown Brooklyn residents, Myrna, who is currently dependent upon unemployment benefits and Alicia, whose employment is intermittent and unstable, some middle class East New York residents are also struggling with underemployment and a lack of financial resources.

Sarah, East New York on food insecurity

Sarah is a 37 year-old Latina who has lived in East New York for most of her life. Raised by her grandparents, she inherited their house and continues to live there today with her fiancé. She holds a graduate degree in early education and recently transitioned from teaching into writing and acting. She is an example of the hidden middle class in ENY. Educated and once a relatively high earner, she owns a home as well as property abroad, and she conforms to the values, expectations, and ambitions of the middle class; however, her 2012 income would say otherwise. As a single woman, she went from solidly middle income, earning upwards of $50,000/year to earning less than $20,000/year when she chose to pursue writing and acting, resulting in inconsistent income, at roughly 60% her previous salary. Because she lives with her fiancé who earns approximately $40,000/year, as a household, they just make it into the lower middle class.

> I shop here [Junior's Food Outlet] and there are certain things I pick up at Whole Foods, you know, in the city. Little things, special, special things.

What's the distinction between what you buy here and say, at Whole Foods?

We just, just certain things that are like, whatchacallit, like special cider, like, for a special occasion. This place, it's okay for like, cheap stuff. Like, if you want things that are no brand. If you want the good no name brand stuff, it's there but harder to find. I go to Key Food too and sometimes when I forget something it's, 'oh, the bodega around the corner' and when—and—this is confidential, right? (hushed tones)

Absolutely.

And when there's a food insecurity (nervous laugh) like, 'wait I'm waiting for the check from my other gig to come in but it's arriving at the end of the week, but I still gotta eat,' so I stop by one of the food pantries. The CSA ended, which was awesome. It ended the week of Election Day because that was it, right? The season ended so the church (points at the building we're passing en route to the supermarket) had the food pantry and you just take what you get (laughs) so I had all these potatoes and onions (laughs) which is great (sings in an operatic voice, while laughing)

Do you have any idea where the pantry food comes from?

Um, I know the—there's—the CSA, you know everything comes from the farm in [New] Jersey and when there's extra, they give—and the rest, um, I think it's City Harvest. Over here, last Saturday, I was coming from the gym and I decided, 'let's see what the pantry has.' They had potatoes and onions and I was like, 'eh, uh okay.' (shrugs shoulders)

You asked if this was confidential and you seem kind of nervous.

Yes (laughs)

So, what is the purpose of a food pantry and why don't you think you should be

using it?

(Laughs sheepishly) It's just one word—hubris (laughs)—pride.

Why are you prideful about this?

I don't—well, I *know* why. You know why, right? It's just like, you're like, 'oh my God! I'm a food pantry person.' (nervous laugh) I going to sound like one of those people who says, (in a deeper voice) 'not that there's anything wrong with that.' (laughs)—Seinfeld (laughs) You're in the closet about it. I've never used a food pantry before.

So, before using this pantry, you hadn't gone to a pantry before?

No, I mean I think, um, probably, well, I—someone else picked stuff up at the Catholic church, yeah, and their food pantry was much better because they a variety of stuff (laughs)

Thomas, East New York, on food insecurity

Thomas is a 48 year-old, Latino man who has lived in East New York for 12 years, in the house he owns with his wife. He started a bachelor's degree program after high school, but withdrew from the program within the first year to help support his aging parents. After several stalled attempts, he recently completed his first semester of college in more than 20 years. He describes this time in his life as his "second wind," saying that he plans to do all the things he couldn't do when he was younger, like taking more vacations and finishing his degree. Eventually, he says he would like to open his own business and invest in real estate.

> "There's a shelter or something in my neighborhood and sometimes when I'm driving home from work, I would see them distributing food, right? At first, I paid it no mind. I figured, that's not for me, but then some unexpected expenses came up, a leaky roof, a flooded basement, it adds up. Just cuz you can afford the mortgage doesn't mean the maintenance won't get you. Man, people see you got a house and they think you're rich. (laughs) I pay less in mortgage than most people pay in rent and I'm glad because I wouldn't be able to afford rent these days. So, we had all these repairs to make and it was expensive. I was coming home from work and my wife had just said to me that we were probably going to have to skip grocery shopping and I was like, 'oh, hell no. I'll be damned if I can't provide

in some kind of way.' I saw them distributing food that same night and I pulled the car over. Now, let me just say, I drive an SUV, so I was ready for someone to come at me questioning why *I* need a handout, but they didn't. The reality is that, yeah, I have an SUV and I have a house and I even have a little bank account, but I can't eat the house or the car and the little bit that I have in the bank is for real emergencies, like light and gas or plumbing and what not. Yo, if they're willing to give me a bag of potatoes and some pasta, I'm happy to have it. Every little bit helps. That's a few bucks I don't have to spend at the store. It's not going to make me rich, but that's not what it's for, right? It's supposed to help make the ends meet. Keep you above water. They have some good stuff too. Once, they gave out sandwiches from, what's that place in the city? I wanna say—it's like a movie title. My wife made me see it with her (rolls eyes) It's French, I think. Pret-, um Prat. Something like that. At first, I was looking at it [the sandwich] kinda sideways, but they were sealed and stuff, so I took a bunch and they were my lunch for the next two days. Boom! Fancy lunch for free. (laughs) They were just gonna have to throw it out anyway and I ***hate*** to see food wasted, so they did me some good and I did them some good."

Value was a common concern across neighborhoods and goes hand in hand with cost. Even participants for whom price did not dictate choice, there was a consciousness regarding the value for their dollar. Many mentioned that they felt they were getting less for their money with shrinking package sizes and expressed concern over increasing food costs. Oftentimes, value was assessed by cost/unit (e.g., ounce, pound, etc.) There was a good deal of comparison across brands and stores toward this end. Linked to this concept was what appears to be a fear of lack; fear of not having enough food to get through the lean times, e.g. interrupted income or disaster.

Thomas, East New York, cost-saving strategies

Oh, good. It's on sale.

What is?

The crushed tomatoes. My wife is going to be happy about this. (laughs) Hold on, wait, I gotta check something.

What are you checking?

See that price there? The one that says ‘per ounce?’ That’s what you compare, not the actual, you know price, price. See, it could be cheaper, but only because it’s like a smaller container or it has less in it. So you compare this way and it’s, you know, equal or whatever. Yeah, it’s cheaper. Yeah, she’s gonna be happy.

Why is that?

I used to think she was a little (points at head and makes a circular motion with his finger). That was before I was unemployed for like, six months. Every time we would go shopping, she would find certain things on sale and then she would go nuts. She’d buy like, 20 boxes of pasta or a case of crushed tomatoes. Crazy, right?

Just those items?

No, a few things. Um, canned broth, ah Carnation [evaporated] milk, not that one so much, but here and there. Um, let me see. What else? Um, I guess those are the big ones, pasta and tomatoes.

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Oh, and beans. She’d stock up on beans too and tomato paste for making rice and stuff.

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Oh, now I’m remembering. (laughs) She used to go crazy at the holidays too. She’d buy like, giant bags of chocolate chips and nuts and sugar, uh and butter. The first time, I was like ‘What the hell is she doing?’ I thought she was going to give some of it to her mother or something, but no. When we got home, she started putting it in the freezer. She said it was cheap because everyone was baking for the holidays and that after Christmas the price was going to go back up. (laughs) She was right. Now, I just do what she says. (laughs)

So, you don’t think she’s crazy anymore?

(laughs) Not about that. If she tells me to get a case of whatever, I might just get two. (smiles and holds up two fingers)

You said you doubted her before you were unemployed.

Yeah, I was out of work for months. It was a long time ago. We were really young and just got married. Things were really tight, you now, financially. I mean, we were making ends meet or whatever, but there were a few times when—it was just—scary. If she wasn't the way she is with this—stocking up and what not? I'm not sure we'd have made it. I do the shopping now, but she trained me. She calls me 'grasshopper.' (laughs) You're too young. It's from a TV show. Thing is, I should be sick of pasta after that, right? Six months eating the stuff she stockpiled, but no. We had beans, rice, pasta, corn, oh, oh, and corn muffins, you know, the uh, the mix. I remember that, she made this stuff, like shepherd's pie, but with cornbread and chili. Slammin'! She does it with meat too. She'll tell me to pick up like, four packages of whatever's on sale. We have a freezer and she puts it all in there. I don't know, it's like she makes magic or something. Every day is something a little different. (Smiles) She's real *tacaño* (cheap), but I can't complain. It's something—feeling like you won't go without. I grew up not knowing, you know? Some weeks we had, some weeks we didn't. I never want to live like that again.

Do you know if she grew up that way too?

That's the really funny thing. She didn't. Like, never. They weren't rich or anything, but way better off than my parents. I don't know where she got it from, but that's how she is. She's always saying, 'for a rainy day.' Now I know, even

something like [Hurricane] Sandy won't shake us. (laughs) She's on it, me too.

I actually did speak with Thomas' wife (age, 46), when she met up with him outside, and she relayed as similar accounting of the events of the period surrounding her husband's unemployment almost 20 years ago. She credited her mother with teaching her how to shop.

He's right. I have no idea what it is to be hungry or uncertain. We grew up very differently. I remember my brother-in-law talking about catching crabs for dinner in Puerto Rico, because there was no money for food. It sounds like it's not so bad, but what happens when the crabs are uncooperative? (laughs) It's not like they're jumping into the pot. Americans are spoiled. Sure, it sounds like it's great to have fresh caught crab for dinner, but not when it took you hours to catch the little bastards and then to have that every day for weeks on end? No thanks. They did the best they could with that they had.

So tell me about your mom and shopping.

Oh, right. Sorry, that's what you wanted to know about. Right. Um, well, she, she just always had us with her in the supermarket, you know? Well, not just the supermarket. She would go to the butcher, the deli, and *theeeen* the supermarket. She never liked to buy meat in the supermarket. I think she's right, but buying from the butcher now? It's expensive. We're planning on joining a co-op. It's just finding the time to work, you know? Anyway, what were we? Oh, yeah, so she would study the circulars at home (laughs). She studied like it was for an exam or something. She'd have us cutting coupons and then she'd figure out which store had the best buys. So that's the first part.

Do you use coupons?

I used to. It's not worth the time and energy and most of what I buy, you can't get coupons for anyway. I try not to buy too much processed food. You don't get coupons for fresh fruits and vegetables, so… My mother didn't do a lot of processed food either, but more that I do. She was religious about those coupons. Um, okay, so about the stocking up, yeah we do that. When we bought our house, man, we were broke after that. I saw crushed tomatoes on sale at Stop n Shop and it was crazy cheap, so I bought the limit and then I went back three or four times that same week. That was the best (laughs). We had tomatoes for months. Turns out it was a good thing because he lost his job not too long after that and we wouldn't have been able to do normal grocery shopping. We moved with lots of beans and pasta, some um, canned corn and cornbread mix, canned milk, oatmeal. Lots of canned goods and um, dry goods. All I really had to buy was like, eggs and occasionally meat, but even that, I had a lot of in the freezer. You just have to know how to stretch it.

And you learned this from your mom?

Yeah, she would do the same. I remember her buying a ton of chicken when it was on sale and then it would just be in the freezer for when we needed it. We didn't eat chicken every night, but there was a ton of it in the freezer. She'd buy a big roast and then after dinner slice it up and freeze the leftovers for other meals. I do that too. I never thought about it before, but you remember that blackout a few years back and now [Hurricane] Sandy?* I just think, you should have enough in non-perishables to hold your family for a while.

Even without electricity, we would be fine for weeks.

How's that?

Gas and charcoal. We have both kinds of grills. We'd be fine. These days you have to be prepared. My mom, I think she did it because she knew what it was to poor as a child and she never wanted us to know. For me, I think it's about being prepared for the worst, whether that's unemployment or a natural disaster, whatever. There's also—it makes me happy when I outsmart the food companies. When I get their product for half price and I stock up so I don't have to deal with their crazy prices for a long time. (smiles) Makes me feel good, like I won something. If I can get it on sale and have a good supply for a long time, that's money.

**Hurricane Sandy (October 2012) was one of the most destructive storms to hit New York City in decades. It caused massive damage to parts of New York City and surrounding areas, leaving whole communities homeless and taxing the emergency food system. Participants made reference to the storm; however, none of them were directly affected.*

Myrna, Downtown Brooklyn, on cost-saving measures

Aw, no butter on sale, but that's okay I have some in my fridge and in my freezer.

You freeze it?

I do. Oh, yeah. I love that. You get a two-fer and you freeze the extra. There's a two-fer at Trader Joe's too. Also I get my bananas there. First of all they get them wicked green, which I like and then they can ripen. And they're inexpensive. So if you get six bananas or five bananas they're less than a dollar. While five bananas are at least a pound and now they're going for .79, .89 a pound. (Smiles and nods) If I don't get to them in time, I just let them put them in the freezer too.

And what happens to them after that?

> And then I use them for muffins, pancakes, whatever. They're good for baking too, you know, to replace the fat in things. I don't really care so much about the fat. (looks down at herself) I probably should, right? (laughs) But I don't really care about that. Texture is so important to me…and flavor. I don't usually replace fat with anything, but, uh, sometimes, if I have applesauce or bananas around, I'll use them. It's cheaper than using butter and for things like pancakes, it really doesn't make a difference in the texture. With muffins and cakes, you have to be careful, but sometimes, I can replace like, maybe half the butter and that's good because then I can stretch the butter, and, and use up the little bits that are hanging around, you know, an overripe banana or that last little bit of applesauce, so it doesn't go to waste.

Tamika, East New York, on cost and waste

Tamika is a 27 year-old black woman, who has lived in East New York all her life. She currently resides with her boyfriend in an apartment just blocks from where she grew up. She receives SSI and food stamps and supplements her income with financial assistance provided by her boyfriend. She reports that she completed 10th grade and she's planning to start a GED program in the fall of 2013.

"I use a lot of frozen stuff, like as far as vegetables. It lasts and it won't go bad. I only shop once/month so, if I buy the fresh, it's only good for the first week. I can open the, um, the bag of frozen, take out enough for the two of us or just me, and keep the rest for later. I can't afford to be throwin' stuff out. If it's a sale, you can get a lot and you just have it there, like, if you need it. You can't do that with the fresh stuff. It's not convenient. If you buy the fresh, you gotta be peelin' and cleanin' and you gotta cook it right away."

Dietary knowledge

Knowledge around food and nutrition; dietary knowledge, that is, knowledge that includes things like serving size, nutritional content of food, and the relationship between food and health is variable across the sample. Nutrient and content claims commonly used in food

marketing, such as "all natural," "whole grain," "low fat," to name a few, are familiar to all in the sample, but in the absence of labeling that explicitly states the characteristics of the item, most would not be able to identify what makes an item low fat or whole grain, calling into question the authenticity of their knowledge. It would be more accurate to describe it as awareness rather than knowledge. This awareness extends to a number of domains including expert recommendations regarding specific foods or nutrients, nutrient knowledge, and the diet-health relationship. [37]

Tamika, East New York on knowing vs. acting

So, you feel like you know what's "good" for you and what's "bad" for you?

Yeah, I know. I mean—you *know*, but that don't mean you *do* [it]. (laughs) I mean, I know I shouldn't eat a lot of like, bacon, right, cuz it's greasy, but I like it, so I'm gonna eat it.

How do you now that bacon is bad for you?

Cuz it's mad greasy. That gets in your heart and stuff. But look at me, I'm skinny. I don't think it's really a problem for me cuz I'm skinny. Actually, I probably should eat more, so I could have some meat on my bones. (laughs) That's what my boyfriend be sayin'. (laughs) He tells me to eat more.

You should eat more bacon?

I should eat more everything. Look at me! I'm too skinny. Kids'll probably change that, but for now, yeah, I should gain some weight.

Expert recommendations

Expert recommendations in this setting are defined as those coming from the government, e.g., FDA, USDA, professional organizations long regarded as providers of credible dietary advice, e.g. the American Heart Association, the Academy of Nutrition and Dietetics (formerly, the American Dietetic Association), and health professionals such as physicians, nurses, and registered dieticians. Awareness of current government guidelines and recommendations on diet and nutrition, like My Pyramid and My Plate, and the application of those guidelines in the grocery store was almost non-existent within this sample. With the exception of one participant, those who could accurately describe My Pyramid or My Plate were either teachers, whose role it was to teach their students about nutrition or they had taken a nutrition or food studies course in college. Even among those who could accurately outline government guidelines, these guidelines were not employed in the selection of everyday food items. Only three of the thirty-two study participants were able to correctly identify the current iteration of the food pyramid; most referred to the 1994 version (Fig.4), rather than the most recent iteration of the model (Fig. 3). Only one participant had, at any time, consulted the food pyramid for the purpose of choosing foods for a meal and she indicated that this was done specifically as part of a class assignment for a college course. She could not accurately describe the elements of the pyramid and since completing the course has not consulted it again. Of the three participants who were able to correctly identify the current iteration of the pyramid, two were grade school teachers and one was a health care professional, who had at one time entertained the idea of becoming a dietician and the other worked with chronically ill patients, many of whom she provided with nutritional counseling to support their treatment regimens. Her profession and her professional interest in nutrition make her unusual in this sample. My Plate, the initiative that replaced My Pyramid, in

2011 was completely unknown to all but one of the participants.[75] The one participant who was familiar with the My Plate, a teacher, who teaches a unit on diet and nutrition, was aware of it because of her job and had only visited the website for work-related purposes. She has never used it to make a personal choice or decision about a food purchase.

Sources from which dietary knowledge is drawn vary across the sample. Nearly all participants referenced their social network as a credible source of information. Among the least educated in the group, it was common to find that the friends or family members called upon for their advice were either trained professionals (e.g., nurses) or elders (e.g. grandparents, great-grandparents). Younger participants and more educated participants utilized targeted Internet searches and blogs, and to a lesser degree the New York Times, specifically, the health and dining sections. In regard to internet sources, Blogs and credible internet sites, such as WebMD, the CDC, and the Mayo Clinic were commonly used by the more educated group, while the less educated relied on the highest ranking sites returned by internet search engine. Older participants and less educated participants relied more heavily on television news reports and television shows. "Dr. Oz!" was the go to source for older participants, while younger participants favored "The Doctors." In both cases, the information provided by TV shows was believed to be accurate and beyond reproach.

Luke, East New York on where to find information on food and nutrition

Where do you look for information on food?

> I get information off the Internet, you know like the banners. 'Top 10 Nutritious Foods for Your Colon,' (laughs) I'm not necessarily looking for it, but if I see it, I'll probably click on it. There's stuff you forget about, you know? Like pumpkins, squash, seasonal stuff. Sometimes, when they've been out of sight for a while, you forget about them. Then,

I'll see one of those banners and click through and I'll get ideas for dishes to make. It's stuff I already cook or eat, but I just forget about it if I haven't seen it for a while.

What about health information?

I might do a search. Google, you know, like for a rash, but I don't really go looking for stuff. I take everything with a grain of salt anyway. If it's something severe, I'll go to the doctor.

Is the doctor a good source of information?

Meh, I mean, they're gonna tell you. Look, man. Any intelligent person knows how to eat. C'mon, we live in a time where, c'mon we know how to eat the right way and we know how to eat the wrong way. Just common sense, man.

Tamika, East New York, expert recommendations

Where do you get health information?

I stay on the internet. (laughs) and I get this, I subscribe to a magazine thing, um, on my phone and so, it be poppin' up with information on like, diabetes and stuff, but sometimes, I just ignore it.

Why is that?

(laughs and looks down at her feet) Cuz I don't be wantin' to know. (laughs) Cuz I wanna eat what I wanna eat and they be sayin' that it's bad for you and I don't want to hear that. I know all that already.

You said you "stay on the internet." What kinds of things are you looking up?

Um, I stay on Facebook. Like, all the time.

Do you look up information on food or nutrition?

Nah, but sometimes there be information, you know, that someone posted about this or that. I mean, I read it, but that don't mean I'm a do it.

Do what?

Like the crazy diets and stuff. Picture me on a diet. (laughs) I don't need all that. Sometimes there'll be something on like, blood pressure or diabetes, but I don't have those, so—that's something for me to worry about when I'm old, like you know, like 50 or something.

Is there anywhere else you might look for information on food or nutrition?

I call my friend—she's not like, knowledgeable or anything, but we just, we talk about this isn't good for you, that isn't good for you. It's just her, you know, opinion or whatever. She's not a expert or nothin' (shrugs) Um, I get stuff off the TV too.

Where exactly?

I like Dr Oz. He be showin' you what to eat and givin' suggestions and stuff. But he don't just tell you, he *shows* you. He shows you what the food does and how it works and stuff. I don't know—I just like him. And the news, but they be like, 'meat will kill you, salt will kill you, this will kill you, that will kill you,' and the next day, it's like, some meat diet on there sayin' the opposite. (rolls her eyes)

In some cases, expert recommendations were disregarded entirely or seen as less than credible. There was a certain distrust of government by certain participants, others pointed out that the recommendations were inconsistent at best and wholly inaccurate at worst, this was particularly true of information given by medical doctors.

Mary, East New York, on expert recommendations

I buy this (Raisin Bran) for myself, but not for Mommy.

Why not?

It has a lot more sugar than the Cinnamon Toasties

Hmm.

Yeah, I know. You would think, right? That it was healthy.

And you learned that how?

I read the label. Look here, the sugar content on this is like, look, 24 grams and for the Cinnamon Toasties it's like, 10.

Did that surprise you?

Yes! Usually, you know, the doctors tell you to have Raisin Bran, and they *did* tell my mother to have Raisin Bran, but after a while, when she kept spiking with the Raisin Bran, I started reading and—the Honey Grahams cereal has less sugar in it than this too, but I like Raisin Bran. I love raisins. I'm just glad that I know to read because imagine if that had continued.

Nutrient Knowledge

Depth of knowledge and accuracy of knowledge was variable across the sample. In some cases, the participant was very knowledgeable about one component of their diet, but held completely erroneous ideas about others. Additionally, more often than not, participants could not explain why they chose items with these characteristics or what purpose it served.

Superfoods/supernutrients, such as acai, antioxidants, and omega-3 fatty acids were sought out or garnered attention when featured on packaging, but participants across the sample were unable to describe the purpose of function of these superfood/supernutrients. There was a general sense of "it's really good for you" and "it prevents disease (usually cancer)," but fewer than five participants of the total 31 in the sample were able to explain why or how these things worked to improve or preserve health. Participants who were in some way tied to the food system or had a good understanding of how the food system works were the most likely to provide accurate information about foods with these characteristics.

Although educated consumers sounded as though they were more informed and spoke authoritatively about nutrition and the food system, much of the information they shared was completely erroneous. Typically, they had more accurate general knowledge about basic nutrition (e.g., a diet low in fat and high in fruits and vegetables was associated with better health outcomes.), but were as misinformed as their less educated counterparts in areas of specific nutrition knowledge, such as the difference between "wheat" bread and "whole wheat" bread or the function and sources of antioxidants. A holistic understanding of the combination of calories and nutrient content was lost on most of the sample. Inconsistencies in knowledge were found in participants of varying levels of income, educational attainment, and age. To demonstrate how variable nutrient knowledge is, the table below presents the response of four participants to nutrient knowledge questions asked in the interviews. These four participants were selected because they had used more than one of these terms in other parts of the interview and used them with certainty.

Table 2: An Examination of Dietary Knowledge

Question	Doris, 62, DT	Jackie, 38, ENY	Alicia, 27, DT	Damon, 31 ENY
How many calories should the average adult have in one day? Ans. 1,500-2,000 for the average adult who is moderately active. Less for inactive people, more for very active people	I actually don't know. I know there are like, charts of how much people should consume for people who are a certain age or a certain sex, but I actually don't know what those are. I could go, if I needed it, I could find it.	Depending on your age, height and stuff, 1,500-2,000	Like, 1,500 and that's like, for everyone.	It depends on your height and weight, but you shouldn't have more than 2,000 in a day
How much fat should the average person have in one day? Ans. Fat intake should be equal to no more than 30% of total calories, therefore between 60-66g/day	You need some. I don't know how much or how to say quantity, but you need some.	I'm not sure. I know it shouldn't be more than an ounce, probably.	Maybe like, 20 grams (not quite ¾ oz.)?	None
Which is more damaging to health, saturated fat or unsaturated fat	**Saturated**	**Saturated**	**Saturated**	**Saturated**
Why is trans fat bad for health? Ans. They contribute to plaque buildup in the arteries and raise LDL (bad) cholesterol.	Uh, because there's a cholesterol issue.	They're known to be worse fat available. They promote high density, wait, no low density—the bad cholesterol. I always turn those around.	Um, because Mayor Bloomberg said so? (laughs)	Because it's bad fat. It's just bad for you.

What does fiber do? Ans. Fiber aids in waste elimination, prevents constipation, lowers cholesterol, and slow digestion which can help with weight control.	**Keeps your system going—um, intestinally**.	Fiber—fiber (laughs) **um, it helps you to go to the bathroom**. It um, (laughs) clears out the intestines. It also helps with cholesterol, um breaking it down I think.	They're cleansing for your insides. (laughs) They like, scrub your insides. Like, **they help you go to the bathroom and they help regulate** and maybe break up fat?	**Fiber helps you move your bowels.**
What is a serving of meat? Ans. 4 ounces or less.	Well, um, maybe, a ¼, um I'm trying to think. A ¼ -½ a pound. That's 4-8 ounces, right? Yeah, I think 4-8 ounces.	Hmmm, is it like 2-3 ounces? I know it's the size of your hand or a deck of cards	Maybe like, 10grams (less than ½ oz.)?	A handful?
Is whole wheat the same as wheat? Ans. No, whole wheat retains the germ, bran, and endosperm, while wheat is the refined grain.	No. Wheat is pasta. Whole wheat is like, bread and rolls.	No, whole wheat is the actual, entire grain. Wheat is the grain with the bran stripped. Whole wheat is better for you.	No? They just, maybe—no, I really don't know.	Yes.
What are omega-3 fatty acids and where do you find them? Ans. These are oils found in cold-water fish and they appear to confer protection from heart disease.	They're fish oils. I take them. They're supposed to prevent heart attack. Um, I guess it has to do with keeping arteries from clogging?	Um, they're oils that protect your heart. I think they keep plaque from forming and you find them in cold-water fish, like salmon	Um, I know you get it from fish, but I don't know what they do. I think it's also in like bread and orange juice.	Omega-3s, 6s, they're a better source of fat. They're in fish and some orange juice.

What is an antioxidant and where do you find them? Ans. Antioxidants are substances that inhibit free radicals, highly unstable molecules that form naturally, but can damage cells. They're typically found in brightly colored fruits and vegetables, although they may be found in other foods.	An antioxidant is something, um, that brings, well, it ah, negative, well it clears up kind of negative things that affect your cells…ah, I think that some of the vegetables have them.	It's an agent that—it's an agent that kinda, uh, combats foreign material in your body and they're found in certain teas, berries, leafy vegetables.	I don't really know. I feel like they're cleansing?	They're another form of antibodies. You find them in fruit and vegetables.
Where do you find probiotics and what do they do? Ans. These are live micro organisms, often referred to as "good bacteria" and are believed to aid in maintaining the balance of flora in the intestinal tract.	Yogurt. They um, keep you regular? Like **Activia®.**	Those are live cultures, like lactobacillus that um, they like, keep balance in your intestines. Like they're the good bacteria and they keep the bad bacteria in check	No clue. (laughs) Oh, wait, I do know this one. Yogurt. Activia. Yeah, but still no clue what they really do. I think **Activia®** keeps you regular or something?	Um, that's like yogurt. The living stuff in yogurt. It helps you move your bowels, like **Activia®**

The responses above and throughout the sample reflect the food messaging that has been part of public discourse for the past 50 years, though more aggressively in the last 30 years or so.

Participants, with very few exceptions, could speak confidently and most accurately around two of the questions asked above; 1) saturated vs. unsaturated fat, and 2) role of fiber. Examining the food messaging that has made its way to the masses via the media, messaging around saturated fat, like the messaging around fiber intake, have been part of public discourse at least a generation longer than that related to any of the other nutrients mentioned in the interview. This messaging, having started in the mid-70's,Florence Henderson's *Wesson-ality* commercials, for example, contained images and wording that have been adopted into the American food lexicon. Nowhere is this adoption of marketing messages more apparent than in the respondents reply to, *"Where do you find probiotics and what do they do?"* Three of the four participants featured in this table referred to a specific brand in an effort to characterize probiotics (i.e., Activia®). None of the three were able to explain fully how probiotics work and could only cite one food source where they could be found, despite there being many. None of the four was completely confident in their responses as is evident in both the hesitance of speech, *"Well, um, maybe, a ¼, um I'm trying to think,"* and the fact that the responses, though statements are often voiced in a questioning manner, *"They um, keep you regular?"*

Regardless of education, income, or age, none of the four were able to answer the questions completely or accurately. Of the four, only one respondent came close to providing complete and accurate responses. Jackie, a science teacher, answers every question accurately, but not completely and even with her understanding of human biology, she did not feel confident in her responses. Participants not featured in this table made reference to specific nutrients, such as anti-oxidants, and trans fats, in what sounds very much like a script, using similar words and phrases. Consistent with the literature regarding dietary knowledge, exceptions to the script came from participants for whom chronic disease (e.g., diabetes, hypertension) is a factor in food

choice. Participants who are either living with chronic disease or are responsible for someone else living with chronic disease, appeared to be more knowledgeable about those foods and nutrients that had the greatest impact on their condition; however, very often, that knowledge did not extend any further and was, therefore, not generalized to food and nutrition as a whole. Participants very confidently said that they "know" about food and in some cases they did, but for the most part the knowledge was largely superficial. Many of them expressed a belief that "people know" about food and nutrition and that "eating right" boils down to common sense. This was a sentiment echoed again and again.

Doris, Downtown Brooklyn on her knowledge of food and nutrition

You know, I feel like I know a lot.

Where do you think you gained that knowledge?

Well, you know, a couple things-- I grew up in a family that actually had— was in the food business, so there was that. And as a child, I was exposed to good food and then I, I sort of feel like I've just, you know, gained knowledge about food over the years. I mean everyone knows about the food groups and there's a lot of information on fresh fruits of vegetables and salmon is supposed to be good for you. I mean, I think it's just a common sense kind of thing. You know, you shouldn't be eating potato chips everyday and candy. You know I feel like I've acquired information as I've And my mother, you know, she's in her mid-90's and she's lived a very long life and she's very good shape and so I feel like my parents were sort of concerned about eating—in a way.

Keywords and phrases were often used in decision-making. Words like, "natural," "pure," "real," "whole grain," and "multigrain," were regarded in the selection process. These words and phrases are part of the script previously referred to in this text. Participants often talked about the merits of "real" ingredients and determined real*ness* from the claims made on the packaging rather than an inspection of the ingredients. For the most part, ingredient labels were referred to when a particular substance posed an immediate threat to health, as with an allergy. Otherwise, front-of-package labeling was taken at face value in nearly every instance. For example, when it was made visible, participants demonstrated concerned over high fructose corn syrup, but often relied on the front-of-package labeling to determine if the item contained that ingredient. Even in cases where participants had some depth of dietary knowledge, their choices ran counter to that knowledge. Very often, it was price or taste that trumped nutrition knowledge and a product of lesser nutritional value was selected in favor of either cost savings or taste.

Jackie, East New York, on "real" food

> A lot of this, like, name brand, you know, like Sunny Delight is not in certain neighborhoods. Sunny D, (makes a face of disgust) you can't find Sunny D, you can't find a lot of these no name stuff within certain neighborhoods and I know that because I've been in different neighborhoods and you don't find that and wonder why.

You made a face, what's wrong with Sunny D?

> To me it's just—I don't— My father gave that to us all the time growing up, but to me it's just a poor choice for a drink for kids. It has no nutritional value, nothing in it is real, and it's just a bad formula to me.

Nothing in it is real?

There's no real fruit juice. Everything is dyes, you know, flavors, artificial flavors and stuff and so that's a problem for me. Oh, see, it's a hundred percent real chocolate.

These are Toll House cookies?

Uh-huh.

The thing that is important is that it is 100% real chocolate?

Real chocolate, and then it's— Oh, 5% juice for, for Sunny D. It was garbage. (She stares at the carton in disbelief) I knew it was crap, but 5%? Might as well be nothing!

What are you comparing now?

A 100% juice.

You're comparing the Sunny D to orange juice?

Yeah. The orange juice is a 100% juice and the Sunny D was only 5%. I'm telling my dad too, like, you know, I'm not questioning your ability to be a good dad but I'm just like, damn, can't I get the real juice? (laughs)

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Oh, my God! It's "Bright and Early" [frozen beverage concentrate]. My dad also bought Bright and Early, that's another knock off orange juice from back in the day. [laughs] It's horrible.

You said it's a "knock off."
What did you mean?

It's not real. No, it's less than one percent orange juice, like that's just— Look! Look! Oh my God! He used to buy this too! I'm going to call him later. My dad.

You're going to call him and tell him about having seen this item?

Uh-huh. See, it says it contains less than 1%.

One percent of what?

Less! It says contains ***less than*** 1%– of juice. It's not real. If it only has one per-, less than 1% of juice, what's the other 99+ percent? (Shakes head and puts the item back on the shelf) He used to always buy that crap.

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You looked at juice boxes but you didn't pick them up. Why?

They're good for portability but I don't really want them.
I'm going to pick up some real juice.

Real juice. Is the boxed juice not real?

Not really. Real juice, like real apple juice, oh, I'm sorry, grape juice, something like that.

So are those not real juices? The ones that come in juice boxes.

They're not 100 % –see 100 % juice and it's on sale. I'm sorry, maybe not 100 % juice but it's still going to buy it.

Maybe not 100 percent juice?

No. It's mostly juice, but not 100%. This is pomegranate blueberry.

What's appealing about that?

Because I love pomegranate and I love blueberries and they're like, antioxidants. That's just the first thing that sticks out in my head.

The first thing that sticks out is that they have antioxidants?

Uh-huh

And then the fact that you love it?

And then the fact that they have no high fructose corn syrup in it, so that's another thing.

Okay, so what's the deal with high fructose corn syrups?

Not good for you, it's a high sugar that contributes to more cause— more holding onto fat and---- I don't know if I want that, I mean it sounds good but I'm just not interested. Sorry and so I'll try that one. If I like it I'll get more.

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What was it you got excited about just now?

Garden Tomato and Basil Lays®. (laughs)

Lays® potato chips?

(nods) Lays® potato chips and I don't usually buy potato chips but this is an exception because they are delicious and I like the idea that they have Garden Tomato and Basil. It sounds healthy, even if it's not but it tastes delicious, you have to try them.

Okay, I'll have to remember that.

So, um, tortilla chips, two of them are on sale. Multigrain, I'll have to look at these, it says here whole corn, whole…

Why did you put it back?

Hold on, let me take a look. Roasted garlic and, oh, that sounds good. I think the multigrain are for me totally.

So you think, what does that mean?

Yeah, nobody's having any. (laughs)

It's all for you?

It's mine. (laughs)

And I noticed you picked up a jar of salsa?

Yes.

Okay and is that typically what you eat the chips with?

Uh-huh, yes.

How often would you say you buy chips like those [multigrain chips]?

Like those? Maybe— the tortillas? I'll buy them like, twice a month, two or three times a month, but those Lays® like, every other month or something like that.

Okay. So you say the multigrain you buy more often?

Yeah, definitely.

What's the difference between them?

Well, the Lays® is— it's like fried potato chips and the only thing that— I mean, it says like all natural ingredients, no preservatives, no msg, no artificial flavors and to me that's acceptable, more acceptable than…and the salt is not as bad.

As?

As, say, plain potato chips would be with the salt— And I just like the idea of the vegetable part, like the garden tomato and the basil, that sells me more. Than if it was just the sour cream and, you know,

whatever that cheddar and sour cream or something like that, I probably wouldn't have bought that.

Diet-health Relationship

Nearly all participants had some understanding of the relationship between food and health/disease. The general response was that eating well, though not clearly defined, could prevent onset of disease or improve health outcomes in the infirm. Several participants specifically discussed what they believe to be a link between diet and chronic disease. Hypertension and heart disease were the most frequently cited chronic diseases associated with dietary intake. Many of the participants also spoke about being aware of chronic disease risk in families and taking steps to avoid a similar fate, by changing their diet.

Almost none of the participants were satisfied with the way they ate, citing that they should incorporate more fruit and vegetables into their meals. With the exception of vegetarians in the sample, this sentiment was nearly universal. Even the vegetarians in the sample talked about being dissatisfied with things like sugar or carbs in their diets.

Doris, Downtown Brooklyn on food and disease

"I think that it's a big deal. It's a big relationship. If you have a bad diet for a very long time. It starts to really—I mean, you feel it. I mean, I- I didn't, I never saw that movie, you know, about McDonald's, um *Super Size Me*? Yeah, but everyone who's ever seen it told me about how the guy [Morgan Spurlock] went downhill after eating only that. I mean, no one eats only McDonald's, but some people eat a lot of it and that guy—went downhill. (chuckles) He was—he started fine and then all these incremental things happened to him, I mean his liver, his kidneys, and I guess his blood sugar level. I mean there couldn't be anything clearer than that. But I think people know this. I'm not against McDonald's. Not being a snob about food. I feel that if you indulge in that all the time, you're gonna to pay a price for that. You know that guy, in the movie, had he not been doing that as an experiment and he kept that up, you know, he probably would have ended up with something, some really bad complications. Although, I think some of that is genetic too. I mean, you know, like being overweight. I know people who don't eat like that and have those problems and it seems to be just—genetic."

Luke, East New York, on food and disease

My dad had a stroke at like, 52. He suffered for fucking years. He was a man from Pensacola, from the south, and he was eating fried stuff for years. You can't do that shit and not—my mother's a smoker and she's battling cancer and she's winning the battle, but fucking 16 years of smoke. Fucking cigarettes. I mean, not even weed, you know (laughs) something that would enlighten her, make her groovy. (laughs) I could understand that, but then again, no one wants their mom to be a reefer head, so I'll take that back. But I'm serious, I've seen people suffer. My nieces are HUGE and my sister is HUGE. I can't say anything, all I can do is eat how I eat and be an example. I'll cook stuff and they don't like it, but that's okay. My parents grew up at a time when things were transitioning from the farm to mass production and then by the 60's, it was accepted. By the time we came along, that was it. By the 80's it was entrenched. They were eating (laughs) Frosted Flakes and canned shit. Then we start seeing the problems, you know, with sodium and all that. I don't blame them though, you know? You do the best you can and raise your kids. You can't preach to your parents. Let food be thy medicine. Let medicine be thy food. A lot of people are just done. By the time they're like 12, they're done. If they don't make a change by the time their like, 20. They're done.

Explain that.

Fifty [years old] for them and fifty for me might be different

How?

> Diabetes, high blood pressure. Heart disease. Uh—they can't get it up because they're not eating right. There's a relationship to that, you know? You eat too much salt and then I can't do what I need to do. (laughs) I'm laughing, but I'm dead serious. It'll mess you up.

Very early in the data collection period, two interesting themes emerged that demonstrate clearly a pair of dichotomies within the sample. Both themes are age-related and are reflective of historical influences on the foodscapes of each generation. At first glance, it became obvious that older study participants, specifically those age 50 and older held to a certain set of values, beliefs, and attitudes regarding food and that these values, beliefs, and attitudes differed substantially from those of their younger counterparts in the sample, those in their 20's and to a lesser degree, those in their early 30's. A closer inspection of this emerging theme revealed a second dichotomy, this one among the youngest participants; this second theme revealed values, beliefs, and attitudes that are tied to everything including food and they are expressed clearly in the setting of the grocery store. The values, beliefs, and attitudes of the older participants within the sample is strongly rooted in tradition, history, and family, while the food voice of the younger participants is attached to individualism and socio-political structures.

Theme #1 - Generational split

Ursula, Downtown Brooklyn on her mother's influence on her diet

Ursula is a 69 year-old German woman who has lived in the New York for 7 years, all of them in Downtown Brooklyn. She survived polio as a child and feels that this formed her opinions on nutrition. "I was very sick as a child and good nutrition made all the difference."

"My mother would say 'you are what you eat.' If you eat junk…the way she fed us is the right way. Not too many sweets, lots of vegetables. I would like to be a vegetarian, but my husband eats nothing but meat, but I try not to. I only eat a little meat and mostly vegetables. This is the

best way. She gave us muesli when we were children and I still eat that every morning. I add flax seed, and sometimes berries, but it's the same thing I ate as a child. It's very good for you."

Older participants in the sample, those age 50 and older, made reference to parental influence far more often than did their younger counterparts and the ways in which they referenced this influence was different as well. For the most part, they talked about monetary and nutritional value. Specific reference was made to the Depression era and advice from parents and grandparents who had lived through those times. The messages communicated had to do with avoiding want or lack, getting the best value for the dollar, and eating "real food." The concept "indulgence" was referred to far more often in this group when compared to their younger counterparts and almost always with a negative connotation. *"There's too much of everything, it's just indulgent. We don't need all of this,"* referring to the numerous varieties of Oreos® on an endcap display in the supermarket.

Very rarely did younger participants make mention of their parents' shopping habits in a positive light or indicate that this is where they learned to shop for food. Younger shoppers reported making use of alternative foodways, such as farmers markets, food co-operatives, and CSA's far more often than did older participants. Most of the older participants in the sample said that they shopped at the farmers market on occasion, but only for very specific items or at particular times of year, such as Thanksgiving or Easter. None of them had ever participated in food co-operatives or CSA's, although they all seemed to find those venues to be viable options for others. In nearly every case, the hesitance to shop at the farmers market had to do with price. The idea of paying a premium for farm fresh food was "offensive" to a number of the older participants in the study.

Myrna, Downtown Brooklyn on shopping at the farmers market

"I like the farmers market. (smiles broadly) What I really like is when they give out tomato samples and apple samples. (laughs) Otherwise, I only go there to shop at the holidays, when I want something really unusual, like a purple carrot or something. Sometimes, I'll pick up a muffin. I wouldn't even put it on the list [of places where she shops], though. I'm not spending three and a half dollars for a pound of apples. Even when I was working, I still found it offensive…I don't know that a dollar or two is going to make one honey crisp apple taste better than another."

Audrey, East New York, shopping at the farmers market

"Sometimes, I go through the one over there by Cadman Plaza and they have such nice stuff. Expensive, but nice. I like the springtime when they have all the plants out. I used to buy apple cider from them when I was working, but I can't spend like that anymore."

Doris, Downtown Brooklyn, food cooperatives

"There's that co-op, the one in Park Slope, but I can't be bothered. You have to work for your groceries or something. They get organic produce and it's supposed to be cheaper because they're not paying for staffing because *you're* the staffing. It sounds like a good idea, but I'm not stocking produce so that I can get a discount on my groceries. I hear they're really strict about it too. Some of the girls I work with belong and they say good things about it, but I can't see spending my free time working for groceries."

A great deal of thought seemed to go into shopping, for example, buying items that could be used many ways and in conjunction with each other to create a primary meal and later, re-invented leftovers. There was also the idea that one should not waste, therefore, buy only what you can use or have a plan for the excess, as spoilage is seen as wasteful and should be avoided. Myrna's earlier comment about freezing items she finds on sale and wasting nothing,*"Aw, no butter on sale, but that's okay I have some in my fridge and in my freezer…You get a two-fer and you freeze the extra…If I don't get to them [bananas] in time, I just let them put them in the freezer too then I use them for muffins, pancakes, whatever…use up the little bits that are hanging around, you know, an overripe banana or that last little bit of applesauce, so it doesn't go to waste,"* clearly demonstrate these values. In this segment of the study population, there is a certain piety in eating well and wasting nothing. At times, it seemed as though the participants

were patting themselves on the back for having save money or for having found a use for something that might otherwise go the way of the garbage can.

Debra, Downtown Brooklyn, on avoiding waste

Debra is a 66-year old single, black woman. She shops with her partner of many years in mind. She works out regularly at a local gym and tries to be active as much as possible. Debra earns $75,000/year and has lived in the neighborhood for many years. She remembers when the neighborhood stores weren't quite as nice and plentiful as the ones she shops in today.

"Nutrition is very important to me because my partner is diabetic and then there's my quest for longevity. (laughs) I pay close attention to what I eat and even though I'm not diabetic, his being diabetic has made me much more conscious of my diet. We eat loads of leafy greens and uh, other veggies…fruit, especially in the summer. His mother lives upstate and she has a garden, so we get lots of fresh berries when they're in season…as much as we can carry. (laughs) They can be so expensive, so we load up on the ones from her garden. I freeze them when we overdo it. (laughs) We use them for all sorts of things, snacks and salads, muffins and pancakes, uh, sauces. I *find* ways to use them. Nothing goes to waste. We tend to shop for things that are in season. It's cheaper and I think it's better for you. That's how my mother always did things anyway. Seemed to work for us."

The term, "real food," a term used several times by older participants in the sample, seemed to refer to items that were closest to their natural state. Convenience foods were not considered "real food." Items such as boxed macaroni and cheese, for instance, were not considered real food, but the ingredients necessary for making the dish from scratch were. An emphasis was placed on "home cooked" or "homemade," though many from this group purchased some prepared foods out of convenience, especially if they lived alone or had extremely limited income. Prepared foods and conveniences foods, e.g. instant meals and frozen dinners were referred to as convenient, but unhealthy, though their homemade counterparts were not necessarily classed in the same way. When asked, most participants in this subgroup said "*you can't be sure [of an item's healthfulness] unless you are responsible for making it yourself.*" There seemed to be a certain element of austerity in effect at all times and strategies in place to

combat the scarcity. Spending outside of these strategies would be considered exceptions to be justified, e.g., soda is for company, candy is a treat, take-out is for when cooking is impractical or impossible. It would be unusual for one of these participants to purchase a two-liter bottle of soda, simply because they wanted it, even if purchasing a two-liter bottle was cheaper than buying a single serving. The thought process seems to be that one shouldn't purchase soda in the first place, but if one did, it would be indulgent to purchase such a large bottle for one person, despite the fact that, per serving, the cost of a 20-ounce bottle is much greater than the cost of the two-liter bottle. In this way, personal responsibility trumps cost.

Myrna, Downtown Brooklyn, on "real" food and convenience

I love the Kraft Macaroni and Cheese®. [sheepish]

You say that guiltily.

Cause it can't possibly be good for you.

Why can't it be good for you?

Well first of all, it's like a kid's food and who know what's in it. You know what's really good, when you dump a can of peas in it. Mmmmm. And I feel guilty about buying prepared foods because I'm sitting home and I've made macaroni and cheese.

You said you feel guilty because you're Sitting at home.

Yeah, right. That and the extra money to get the prepared. I should be. There's no reason why. I should be cooking.

So you've made it at home, macaroni and cheese?

Yes, and it certainly doesn't come out, It certainly doesn't taste like Kraft®. (laugh)

Does it come out orange?

See that's what makes it more scary too! (laughs)

Do you think that [the color] has anything to do with your perception that 'it can't be good for you?'

(Smirks) I'm sure if we looked at this right now…how many chemicals…enriched macaroni product, wheat flour, niacin, ferrous sulfate, which is iron and thiamin mo-no--trate, which is vitamin B. Why can't they just say vitamin B? Riboflavin, which is vitamin B too, folic acid, Cheese sauce mix. Here we go…whey, milk, salt, skim milk, milk fat, milk protein, concentrate?, modified food starch, contains less than 2% of sodium trip-ahl-phosphate, buttermilk solids, sodium phosphate, citric acid. I mean, really. Cellulose. Gel. (looks sideways at me)

Do you know what cellulose is?

Well, cellulose is fiber, so they probably pound it down to a gel…something gelatinous.[exaggerated shudder] Cellulose gum, I don't even want to know what that is. [Eyebrow raised] lactic acid, cheese culture, calcium phosphate, yellow 5, yellow 6 and enzymes. I mean, really. What part of that did I miss?

Do you usually read the ingredient list?

No, but you get a sense of what's bad

How do you think people get a sense of that?

I don't, you know…
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I really don't know.
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In my own mind? The more…I think basically the faster is to make—the simpler it is to make, the more likely it is.

Now when you say simple, this [macaroni and cheese] says, "add milk, add butter." That's pretty simple.

Yeah, that's it; you're not grating the cheese…the simpler it is for you to make the worse it is for you because they put more prep in it. The more whatever they put into it because they have to make it easier for you to make it quickly.

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Is that a salad mix?

Oh, yeah. I love 'em. So convenient and they go on sale all the time.

Why bagged salad as opposed to the individual components?

It's convenient, for one. It's cheaper, for another. This one has radicchio. I have no use for a whole head of radicchio. Look at this, arugula. Like I said before, I like *interesting* things. This is interesting. Lots of variety and flavors. I buy the bag, because if I buy all the ingredients and it's just me, they'll go bad. I buy a bag and I use it in sandwiches and salads for two or three days and it's done. If I had to make it, I'd have to buy a head of lettuce, spinach, field greens, carrots, tomatoes…by the time I get it all cleaned and cut up, it's enough to feed three or four people and it's just me, so I buy the mix instead. It kills me to throw stuff out. That's money! That's money you're throwing out!

While these values, beliefs, and attitudes were universally present among participants over the age of 50, it is interesting to note that black and Latino East New York participants, in their 40's and a few in in their late 30's held similar views. In the older group, these messages are the result of hypervigilance on the part of parents and grandparents, around ensuring that needs were provided for in the event of financial catastrophe, it is possible that the younger group in East New York, being black and Latino, may have been raised by parents who experienced a greater degree of financial pressure and more frequent threats to the regular provision of needs than their white counterparts, resulting in messaging similar to that received by the older participants in the group. So, while their parents may have been too young to have lived through the Depression or may, in fact, not have been in this country at that time in its history, experiencing a form of severe deprivation may have been the catalyst to this way of thinking and resulted in a similar set of values, beliefs, and attitudes being passed on to these study participants.

Sarah, 37 and Jackie, 38, for example, echoed, in some cases nearly verbatim, Myrna's thoughts featured above. The similarity in their philosophies around spending and waste may be due, in part to the presence of elderly authority figures in the home during their childhoods. Sarah, for instance was raised by survivors of the Great Depression as was Myrna, though a generation separates them. Jackie spoke at length about a grandmother who lived with her family and who clearly influenced her food choices. Her grandmother maintained an extensive garden, with Jackie as her helper and food from this garden featured prominently in daily meals. They also had a small flock of chickens that were kept mostly for fresh eggs, something that fascinated Jackie as a child. Her great-grandmother started the garden and kept chickens during the Depression, as a form of subsistence farming and when her grandmother inherited the house, the

practice continued. Jackie heard these stories from her grandmother as they tended the garden and cared for the chickens.

Sarah, East New York, on strategies for avoiding scarcity and hunger

Sometimes, at work, because I'm not much of a cook (operatic singing). I'll take some stuff from the table [Craft Services table] for like, lunch the next day, you know. I mean, I use—not abuse, I mean, I don't hoard, (laughs) but I think, 'oh, another meal for myself,' and I never thought I would do that.

Why didn't you think that?

Because we always had food, you know? There was always food security in the home growing up. I was—I was raised by my grandparents and they—they lived through food insecurity during the Depression—in Puerto Rico and so, they came here and so there was always food (making a declaration in a comical voice) 'I will never be hungry again!' you know? So it was always like, if you didn't have in your house, you didn't ask anyone for it, so that's where it comes from. The pride. The pride. (whispering) if you didn't have in your house, you didn't ask anyone for it, but if someone needs something, of course, you give. Don't ask, but give. (still whispering)

Table 3: Comparison Across Generations

Myrna, 62	Jackie, 38
Is that a salad mix?	
	I like these little things with, you can get either salad or—leaves. **So convenient.**
Oh, yeah. I love 'em. **So convenient** and they go on sale all the time.	
	The salad mixes?
Why bagged salad as opposed to the individual components?	
	Yeah, I think it's the arugula that I love, that's in there.
	So why the mix instead of the whole head of lettuce or different lettuces?
It's convenient, for one. **It's cheaper,** for another. This one has radicchio. I have no use for a whole head of radicchio. Look at this, arugula. Like I said before, I like *interesting* things. This is interesting. Lots of variety and flavors. I buy the bag, because if I buy all the ingredients and it's just me, they'll go bad. I buy a bag and I use it in sandwiches and salads for two or three days and it's done. If I had to make it, I'd have to buy a head of lettuce, spinach, field greens, carrots, tomatoes…by the time I get it all cleaned and cut up, it's enough to feed three or four people and it's just me, so I buy the mix instead**. It kills me to throw stuff out. That's money! That's money you're throwing out!**	
	Because it's better for you, the mix, you get different mixed greens, you have like arugula…cabbage…radicchio
	If you didn't buy it already mixed would you buy the components and do it yourself?
	I have, yes. And this has all the different components all in one. It just— **it's cheaper** to do it this way rather than buying all the different things and **then nothing goes to waste because it's just one bag. I don't throw food out. That's like shaking your wallet over the garbage can.** (laughs)

Older participants spoke about the diet-health relationship more than did their younger counterparts. This concept was consistently voiced among the older participants, but also among those in their late 30's and 40's. The difference in their discussion was that the older participants, many already living with one or more chronic disease diagnoses, were cautious of buying foods that could exacerbate existing health issues, while participants in their late 30's and 40's were becoming aware of their risk for developing chronic diseases. Their emphasis was mostly on avoiding disease entirely or limiting risk associated with a predisposition for a particular disease due to family history or some other biological factor. In some cases, food was seen as medicine and used to "treat" or prevent various conditions or maladies.

Danielle, Downtown Brooklyn on food and health

Danielle is a 45 year-old, black woman. She's is a self-described "health nut," who exercises regularly and juices daily. She recently began to transition to a raw diet and is making incremental changes toward this end. She has two graduate degrees.

"I don't take medication, so I eat to treat different things like headaches. I think that you should eat to live. I eat differently because I don't want to have to deal with disease. I'm 45 and I'm in great shape. I can eat anything I want, but there's a price for that later. For me, raw food is like—You know how people feel after a cup of coffee in the morning? That's how I feel when I eat raw. It just makes me feel better. You can't eat garbage and expect to feel good afterwards."

Luke, East New York on food and health/disease **(see page 78)**

"Let food be thy medicine. Let medicine be thy food…A lot of people are just done. By the time they're like 12, they're done. If they don't make a change by the time they're like, 20. They're done… Fifty [years old] for them and fifty for me might be different…Diabetes, high blood pressure. Heart disease. Uh— they can't get it up because they're not eating right. There's a relationship to that, you know? You eat too much salt and then I can't do what I need to do. (laughs) I'm laughing, but I'm dead serious. It'll mess you up."

The ideals held by older participants have, in many ways, been protective, in that they are less likely to eat large amounts of processed food and take-away items, both of which are

associated with diets high in fat, sugar, and sodium. The values imparted to these participants by their parents and grandparents have led them to view food through a "virtue vs. vice" lens. Foods that are nutritious and that you prepare yourself are virtuous, while snack foods, sweets, rich foods, and foods prepared outside the home are vices. A small amount of vice seems to be permissible with justification, e.g., "*soda is for company," "I deserve a little treat;"* however, there is a tipping point at which the vice is no longer justifiable, e.g. buying 2-litre bottles of soda or ramen noodles as a staple grocery item. With the exception of Audrey, whose food choices are dictated, in large part, by her physical disability, a weekly purchase of ramen noodles would inspire feelings of guilt. Despite Myrna's description of what can only be considered healthy snacks, she followed the statement below with, "I've always been a bad eater," the reason for this being that she has a weakness for chocolate and eats some everyday, which is a direct contradiction to the food messages communicated by her parents.

Myrna, Downtown Brooklyn, on snacking

"This is a treat. (points to a jar of beets) Instead of a bag of chips. When I was a kid, the only time we had sweets in the house was when we had company. I don't know if you know of it, but we'd have Marmalade, you know? It's made with the orange on top and the white underneath and you had…oh, so good…Going back to when I was a kid, we didn't have munchies. My dad would eat 3, 4 oranges a night. He'd have so much citric acid in his system, his back would break out. Me, I would sit in front of the TV with a cucumber and the salt shaker, those were our snacks."

Younger participants in the sample, with a few exceptions, which will be discussed in the next section, were pragmatic in their approach to food. The food behaviors of this subgroup were a reflection of changing social norms and the advent of technology, e.g., women working outside the home, microwaves, and purchasing prepared foods. Women moving from the home into the workplace and in increasing positions of power meant there was less time for them to prepare home cooked meals and encouraged the incorporation of more take-away or prepared

foods in the home. Women juggling home, family, and work took help from wherever they could find it, often in the soup aisle or the frozen foods section of the supermarket.

One participant, Grace, described her childhood meals as "*sandwiches or whatever could be made in under a half an hour, in one dish, with a can of cream of whatever soup.*" This sentiment was echoed by the thirty-somethings throughout the sample, while those under 30 talked about microwaveable foods, such as Hot Pockets® and Bagel Bites®. This younger group spoke of convenience frequently during the interviews, especially with regard to staple items. Oftentimes, staple items were selected because they were of the grab and go variety, making morning meals in particular, convenient. According to Beth, *"I maybe have time for a cup of coffee, but even that…I'm carrying it around my apartment with me while I'm getting ready. I can't tell you how many times I've spilled it on myself just before I have to head out. It's just easier to get it outside."* Twenty to thirty year old East New Yorkers talked about the ease of grabbing a breakfast sandwich and a cup of coffee at a local bodega. Tamika describes her morning, *"I usually just stop in at the corner store, you know, the bodega. You can get a bacon, egg, and cheese on a roll for like $3 and it comes with coffee. That works. I'm not trying to fry bacon and eggs and all that in the morning, then you have dishes and stuff. Uh-uh. When I'm ready to go, I'm ready to go. That's it."*

Chiara, East New York on buying vs. cooking meals

Chiara is a 31-year old black woman who has lived in East New York all her life. She has a 9th grade education and is currently unemployed. She usually works in small neighborhood stores, but her last employer closed his store unexpectedly leaving her with no source of income. She is currently dependent upon her boyfriend for financial support.

"Cereal, I buy cereal every trip. It's fast in the morning. Um, frozen waffles or frozen pancakes. I just throw it into the toaster and it's done. I'm not trying to cook all the time. (laughs) I don't really know how, just a few things like, I like to make spaghetti. It's quick and easy and I just...like spaghetti. Besides that? I don't know, um we eat a lot of Chinese. I didn't think before, but like two or three times a week and then pizza. Sometimes, he'll pick up McDonald's on the

way home. In the supermarket, I just buy a lot of cereal, bread, spaghetti and sauce, macaroni and cheese, um, frozen stuff. Oh and those noodles, um ramen noodles? I *love* those."

Simone, Downtown Brooklyn, on convenience

Simone is a 26-year old college-educated, single, white woman. She's lived in New York all her life, but only moved to Brooklyn one year ago. She works in Midtown Manhattan and earns $50,000/year. Simone has been a vegetarian since graduating from college.

"It has to be portable (raises an apple to demonstrate her point), so it tends to be fruit because I feel like you have to cook or in someway prepare vegetables and…with fruit…you don't. I can throw an apple or banana in my bag and carry it around all day without worrying about keeping it cold or where I'm going to heat it up. That being said, I can't do that everyday, so a lot of the time, I'll just pick something up outside. It's hard though, because I'm a vegetarian and so, there aren't a lot of choices beyond roasted vegetables and Asian food, but it's getting better."

Many of those in the sample who were forty or younger, described themselves as latchkey kids, not permitted to use the stove when no one was home and not having anyone at home to cook for them or instruct them in how to cook. In comparison with the older participants in the sample, younger participants were less likely to cook or know how to cook. "I don't cook; I heat," is how one participant explained it. Over and over again, younger participants spoke about their lack of cooking skills and while some saw it as an impediment to healthy eating, others spoke of it matter-of-factly, insisting that they were able to eat healthfully using prepared foods and take-away meals. When asked what kinds of meals they prepare at home, participants under the age of 40 reported preparing fewer meals at home than did their older counterparts. Most participants in the 20-30 age group reported that they relied heavily on take-away meals for lunch and dinner.

Beth, Downtown Brooklyn, on convenience

"I don't want to deal with containers and heating things up. Stuff spills in your bag and it's just, ugh, more to carry in the morning. It's a hassle and then if I want to go out after work…I have to drag all of that with me? No, it's just easier to order out or run out and pick something up."

Damon, East New York, cooking vs. take-out

Damon is a 31-year old, single black man. He lives in East New York with his uncle who is cognitively impaired. Damon describes his lifestyle as "very health" and reports working out an average of 5 days/week. He works as a truck driver, earning $28,000/year. He earned his GED a few years ago and hopes to secure a better paying job in the near future.

"Breakfast and dinner. I try to cook those and then lunch is take-out if I'm at work. It's better to cook for yourself, but sometimes…there's not enough time, so you do what you gotta do."

Alicia, Downtown Brooklyn, on her eating habits

When I'm at home, I'll usually eat like, uh, yogurt and more coffee or something. But if I'm working not from home…a lot of times I'll usually just have one big meal and I'll like order something around like 4 or something. I usually don't even want dinner, but on the off chance I do, I end up doing fast food. I know I shouldn't, but at least it's not like before [before her girlfriend introduced her to cooking] when it was all like, take-out and terrible food.

Define "terrible."

It was, like, real fast food, the food I grew up with…I mean what I eat now is still take-out…I don't know, I guess, better than McDonald's, but it's not cool.

Better how? And why isn't it "cool?"

You know, like, at least it's probably prepared at least individually, but I could be wrong…I've never seen the kitchen.

Alicia echoes the opinions of her peers within the sample who feel that, as long as it's not "real" fast food, e.g., McDonald's or its equivalent, the prepared foods are equivalent in nutritional value to those prepared at home. Research indicates that this is not true and that in fact, take-away foods are higher in calories, sodium, fat, and sugar than homemade meals. .[12] It should be noted that there were participants under 40, for whom none of this was true. Their viewpoints on food will be elaborated upon in the next section of this text.

Theme #2: Intra-generational split

The previous theme compared older participants (over 50) to younger ones (under 40) and examined the roles of parental influence and changing social norms on shopping behaviors; however, it would be a mistake to assume that all of the participants in the younger group share the same philosophies on food. Participants under 40 years of age display two distinctly different viewpoints on food acquisition and sourcing. For one segment of this subgroup, who will be called the "socially conscious" group (SC), their food acquisition behaviors are a reflection of their personal identities to the degree that one cannot be divorced from the other. The means by which they acquire food and the route the food took to arrive in their hands is equally or in some case, even more important than the nutritional value of that food. These participants are of a different ilk than their peers. They are acutely aware of the political, social, and economic aspects of our current food system and they seek to be directly involved in influencing each of those sectors. There are certain characteristics common to the participants who fell into this group. They were less connected to mainstream media; many of them did not own a television or reported watching very little television if the did own one. Additionally, they reported regular use of alternative foodways, such as food cooperatives, buying clubs, farmer's markets, CSAs, and various forms of urban agriculture, including community gardens and

growing their own food, where possible. In many ways, this group resembled the older participants. They talk about limiting waste and using every bit of everything, though their motivation is less about maximizing value and more about preserving the environment and resources. Several of these participants contribute food waste to a composting group at a local farmers market, rather than disposing of it in the conventional manner, *"If I just throw the peels in the garbage, no one benefits. If I put them in the freezer and then on Saturday, take them to the farmers market, some farmer or gardener somewhere will get compost to grow more food. (laughs) I kinda want to sing 'Circle of Life' right now."*

In stark contrast, another segment of this subgroup, they will be called the "convenience consumer" group (CC), demonstrated shopping behaviors that were very consistent with the average consumer mindset where cost, convenience, and personal preference were of primary concern, however, in this group true primacy is given to convenience. In this group, products, including food, its acquisition and method of preparation, exist to make life easier and more pleasurable. Very little thought is given to where the food comes from, beyond quality and safety and even those characteristics are measured differently within this group, with quality being associated with brand names and safety being dictated by government agencies such as the USDA and FDA, a very different mindset from their socially conscious counterparts who define quality as food that is free of pesticide exposure, contributes to biodiversity, and is as close to its natural state as possible. Additionally, the socially conscious group had no trust in government agencies and their safety guidelines.

Grace, Downtown Brooklyn, on the food system

Grace is a 28-year old, single woman. She was raised by a white mother and Mexican father in the Pacific Northwest. She describes herself and her siblings as latchkey kids who had to "fend for [them]selves" while their parents worked, sometimes more than one job. She holds a B.A.

and works in cancer treatment and research, which pays approximately $54,000/year. Grace lives with a roommate, with whom she shares food expenses and they are members of a local food cooperative.

"I just think about the people who are working in the fields, planting our food and harvesting it and the conditions they work under that we, as Americans would never tolerate, but they have no choice and if they want to provide for themselves and their families, they just have to suck it up. If I have to pay a little extra to ensure that the people who are working at that end of the food system have a fair wage and access to education and healthcare, I don't mind. We take a lot for granted. We're spoiled and naïve and I just refuse to be part of a system that treats people like livestock and livestock like, well, that's a whole nother issue, isn't it. Don't get me started on how animals are treated. I'm no vegan, I eat meat, but it matters to me what that animal's life was like before slaughter. It matters to me that it was treated well, not just because the meat is better, safer, but because it's what's right. There's just no good reason for an animal to suffer the way they do in factory farms, there just isn't."

Alicia, Downtown Brooklyn on making assumptions about food

"Um, I guess I just operate under the assumption that most things at Trader Joe's are organic. I don't know whether that's true or not…things are fresher and like, better produce…um, I guess like, than an Associated, but I'm clearly not getting food information in any useful way since I almost bought infected peanut butter.* (laughs) Right now, you are ranking at the top of my list for information." (laughs)

**This was mentioned is response to the recall on organic peanut butter at Trader Joe's in October 2012 that was implemented because of salmonella contamination. Alicia hadn't heard about the recall and picked up a jar of peanut butter, next to which there was a large sign informing consumers of the recall. Until I pointed it out, she didn't notice the sign. Upon learning of the recall, she returned the peanut butter to its place on the shelf.*

Violet, Downtown Brooklyn, on the food system

Violet is a 28-year old, white woman living on her own in Downtown Brooklyn. Originally from the Midwest, she relocated to NYC for graduate school a little more than 6 years ago. She teaches at the middle school level and earns $55,000/year. Violet was recently diagnosed with a gluten sensitivity. She describes her parents as "hippies," and says that she was raised holistically, "which means no antibiotics or really, medicine of any kind, lots of herbs and natural things."

"I didn't eat sugary cereals and stuff growing up, so this diagnosis didn't really throw me. I eat a lot of vegetables and I'm careful about what else I eat. I work out regularly and I don't like to feel sluggish. When you're raised on sprouts and stuff, eating junk makes you feel really sick, so I've never really indulged. I also don't like how that stuff comes to be, like, how it's made. Even some of the organic stuff in here (points to the shelves) it has no real nutritional value. It's

empty calories, corn, organic corn, but still corn and you have to think about that. We actually pay farmers to grow corn and nothing else, even though we have people in this country who are like, hungry, like, really, really hungry. The subsidies for corn, wheat, soy. It's crazy and you see the result of it here on the shelves…organic junk food and because it's organic, people think it's somehow better for you than say, Doritos® or whatever. Does it really matter if it's been grown organically if it's still crap? I bet you if you pick up any of these 'organic' (air quotes) snacks, there's corn, wheat, and soy in them. That's what's really wrong with us. I don't have *gluten* sensitivity; I have a wheat, monoculture sensitivity. (snickers) If we still grew a variety of grains and not Monsanto-sanctioned grains, I really believe you wouldn't see all of these food sensitivities and allergies. I work with kids and they're allergic to like, ev-er-y-thing, everything! It's not normal. Our grandparents and great-grandparents, they didn't have these problems. It's our food system. It's killing us. People better start paying attention. They're going to be paying $7 for a gallon of milk and $5 for a carton of eggs and I'm not talking organic, pasture raised, grass fed, none of that. This Farm Bill (shakes head). I don't know how the average person is going to eat."

Of the twenty participants age 40 and under, I classified ten of them as convenience consumers, and six as classified as socially conscious consumers, and the remaining four fell somewhere between the two groups, never really indicating that they could belong exclusively to one group over the other. Interestingly, all of the participants who fell in between the two groups were from East New York. All of them were either 37 or 38 years old, and were the only participants of this age in the sample. The ten participants who were labeled convenience consumers came from both study neighborhoods and varied in age, race, gender, income, occupation, and education; the same could be said of the socially conscious group. The undecided or in-between group was made up entirely of men and women of color, but they varied in income, occupation, and education. The defining characteristics for the socially conscious group were political awareness, a tendency to view life from a social justice perspective, and a thorough understanding of the food system. Those in the in-between group held strong opinions regarding the food system, but did not demonstrate any depth of knowledge about how it functions, at least not to the extent that those in the socially conscious group were

knowledgeable. For this in-between group there was a belief that natural foods, foods that were unprocessed or less processed were best for the individual. Among the participants within this group, there is a sense of what is good or not good for the body and to some extent, the environment, although the articulation of these beliefs is not as clear in this group as it is in the socially conscious group, the members of which can explain exactly why a product is "bad" for you or "good" for the individual, society, and/or the environment.

Sarah, East New York, on "natural" foods

> I think it's just like the more natural it is, the better. Like they were talking about how ranch dressing has the same ingredients—has one ingredient that sunscreen has, to give it that white color, but nothing has been proven that it's bad. I'm just going to use oil and vinegar. It's just simpler. Better.

Simpler how? Better how?

> Cuz I feel like that's the way our peoples in the past did it. Like, they didn't have dyes in their food or like, hormones in their meat. The animals didn't get sick and you're eating the hormones. And allege—they're saying that it's connected to young girls developing early in the industrialized world. Maybe it's true, maybe it's not, I don't know, but why should there be medicine in your food? I mean, like if people want to eat good food, clean meant, they have to spend more. I don't judge them. You have to stretch your money.

Jackie, East New York on what "natural" means

"Well, the Lays® is— it's like fried potato chips and the only thing that—I mean, it says like, all natural ingredients, no preservatives, no msg, no artificial flavors and to me that's acceptable, more acceptable than… and the salt is not as bad."

The data collection period coincided with the 2012 presidential campaign and election. A great many more comments of a political nature were made by the socially conscious group than either the convenience or in-between groups. They made reference to candidates at not only the federal level, but local as well. On more than once occasion, there was mention made of the worth or worthlessness of a particular local representative, detailing their positions and accomplishment in relationship to areas of concern to these participants. This sort of commentary was conspicuously absent among convenience consumers and those who comprise the group between these two positions. This may indicate that the other groups are less politically minded.

Also common to the socially conscious group is the ability and willingness to cook. All six of the participants in this group talked about cooking and preparing food at home. They also reported fewer meals prepared outside of the home and were more likely than their counterparts in the convenience group to take food with them to work rather than order food from outside. Those participants who comprised the convenience group talked about ordering food or eating at restaurants far more often than preparing food at home. Of the ten participants in this group, more than half said they didn't know how to cook or felt that their cooking skills were rudimentary at best. They also felt insecure in their ability to put meals together, specifically, in knowing which foods paired well with others. The reported feeling that did not possess the tools necessary to prepare meals at home.

Alicia, Downtown Brooklyn, on cooking

"In my head it [cooking at home] is [an adult thing to do]. I think that the way I do it probably is not very sophisticated. (giggles) When I go…like, when people have like, dinner parties, I feel like that's pretty sophisticated and nothing that I'm doing. My friend has a nice back deck and barbecues almost every weekend and like, it was really crazy, but really good. I find that to be very adult. If I had a barbecue, we'd make grilled cheese (laughs)…It's nice when someone else does it…It's not that I can't cook, exactly. It's just that I only know how do to a few things and

that gets boring. Like with vegetables. I just do the same thing over and over again. Olive oil, salt, butter, garlic. It goes in the pan for a few minutes and that's it. It's not fancy. I don't feel like I eat like an adult. I'm trying. Like, with grilled cheese. I started using the cheese from the fancy chees counter instead of like, Kraft Singles. (snickers) and I started adding tomatoes and I just—I, it's time to grow up." (Shrugs)

Lauren, Downtown Brooklyn, on lack of food preparation skills

Lauren is a 26-year old single, white woman. She moved to New York from New England for school and has lived in downtown Brooklyn for three years. She has an undergraduate degree and earns $43,000/year.

"I wish…I wish grocery stores had like, you know, cards…that you could pull with a recipe. Like, sometimes, I want to make something, but I don't know what all to get and how much and I don't have a plan. So, I get a bunch of stuff and I get home and it either goes bad or I don't know what to do with it. Part of the problem is that I don't cook… I heat. I have a little toaster oven and I'll use that to make stuff, but I really don't cook. Once, I made steak. I was so proud of myself, but then I realized I hadn't made anything to go with it and I had no clue what to make. I ended up throwing a salad together and later, I realized I could have had a baked potato, just like I would at a restaurant, but you know what? No potatoes! I didn't think to pick them up. That's what I mean. Even if I figured out how to make the steak, I didn't think to make something to go with it and aside from the potato that I *didn't* have, I don't know what else I would have made. I was lucky to have salad stuff in the house. It seems like it takes some creativity to turn out a good meal and I'm just not creative in that way, so I'll leave it to the professionals."

Interestingly, one participant, Jackie, who cooks at home regularly, passed through the produce section, staring longingly at bundles of asparagus, lamenting the fact that she doesn't know how to cook them. This, after describing during the course of the shopping trip, the many things she normally cooks at home. She is an experienced cook and baker, but her insecurity and reluctance around this particular item was obvious in the way she looked at them on the shelf and finally, in the way she approached me about them.

Jackie, East New York, on cooking asparagus

> Do you do those, (points at the display)…asparagus?

Asparagus? Sure. Do you like them?

Yes, I love eating them, I just don't know how—(shrugs)

You don't know how to prepare them?

I don't know how to prepare them. (Stares at me questioningly) We didn't eat these as children and we didn't grow them either. I started eating them as an adult.

Sure, I can give you some ideas of how to prepare them. It's really easy, actually.

I would eat them all for myself, but I don't know what to do with them. I love them though.

It's um—You, snap of the bottom part, the woody part, coat them with a little bit of olive oil and your favorite seasonings and roast them in the oven or you can cut them up and sauté them in a skillet.

Uh-huh (smiling) oh, that's really easy. Okay, what else? Because I'm going to be eating more of it when you tell me what to do with them. (laughs)

Uh, you can steam them or put them in with a roast. You can do all kinds of stuff, put them in omelets, pasta salad, stir fries. I sound like Bubba in Forrest Gump. (laughs) Anything that you would do with broccoli you could do with them.

(laughs) Oh, you do, you do! Oh, man, somebody did something and that was my absolute favorite. I can't remember how they did it. I hope I remember.

So do you normally eat them or no?

I will opt to if they are an option in the restaurant. I'll get them. If somebody has them, I'm eating them. (laughs) I really love them, like in Chinese food? Oooh, I always get them, but I don't do much take-out, so…

But in a grocery shopping trip, you wouldn't normally pick them up?

No, because I didn't know what to do with them. (shrugs)

So now that I've given you some ideas, would you pick them up?

Yeah, I would, certainly. (smiling) I'm thinking right now. (laughs)

About how to make them?

Yup, because I'm going to try. I feel more like I can do it because before, I looked at this, (points to the bundle in her cart, before reaching for a second bundle) I'm like, *'I'm not going to do it right,'* I didn't know what to do with it, but I knew how to eat it. (laughs) I wouldn't buy it because if I mess it up, that's money wasted. For that, I could order the take-out.

If you forget, you can always Google it or go onto YouTube. You can find pretty much

anything on YouTube.

Oh my God! How did I not think of that? You can Google anything, why didn't I do that? Blonde moment. (rolls eyes) Yes, I will definitely do that, but YouTube?

Mm-hm. There's lots of cooking info on YouTube and you can actually see how to do it.

That makes so much sense. Oh my God, thank you! Now I'm standing here thinking of a bunch of stuff to YouTube (laughs) You created a monster now. (laughs)

"For that, I could order the take-out," this sums up exactly what those in the convenience group do in place of cooking. The time and both physical and mental energy it takes to plan and prepare the meal is better spent elsewhere, especially since the risk of failure is eliminated or greatly reduced. It must be understood that the participants in the convenience group are no less passionate about their food than any of their counterparts. They are no less adventurous in their tastes and in many cases, though not all, they are no less concerned about the nutritional value of their food; however, they lack the skills and in some instances, the will necessary to interact with their food in the same way as their counterparts.

Lauren, Downtown Brooklyn on convenience-induce guilt

"I buy a lot of frozen stuff from Trader Joe's because they're complete meals a lot of the time. I can have it ready in under 5 minutes and it's a hot meal that I don't have to feel guilty about because it's organic and healthy and I didn't spend half my check on take-out."

Lauren's comment, *"it's a hot meal that <u>I don't have to feel guilty about</u>,"* is a sentiment expressed over and over again across the sample, but particularly among younger participants. Across the dichotomy of this younger group of participants, there was again the idea of virtue vs.

vice. The socially conscious group extolled the virtues of buying locally, buying organic, "voting with [your] dollars," and considering workers and the environment when choosing your food. They talked about growing food on balconies, fire escapes, and allotments in community gardens as a means of improving neighborhoods, reducing dependence on "trucked in" goods, and cooking from scratch as a part of taking control of what goes into their bodies. They also spoke about their shopping preferences and growing of food as a small form of protest against the practices of our current food system and corporate influences within that system and they believe strongly in personal and collective agency. The vices they identified were an unwillingness to eliminate non-regional foods from their diets, necessitating the transport of items from other areas of U.S. and abroad; and enjoying meat as a staple of their diet, despite the fact that the practice of raising animals for human consumption contributes to greenhouse gases. Among the convenience-driven group, virtues included purchasing from retailers who appear to provide workers with a supportive work environment and contribute to the community in some way; buying items that are fair trade, organic, locally grown, or natural; and frequenting restaurants that advertise sustainability practices or source locally. Vices in this group included spending too much of their income on take-out, eating fast food, and relying too on take-out, rather than cooking or learning to cook.

Another element in the dichotomy between the socially conscious group and the convenience group is the idea of food philosophy being synonymous with one's identity. This is especially true of the socially conscious group who expresses their values, beliefs, and attitudes through their food acquisition and food sourcing. To deviate from their established norms would be the same as contradicting their social and political identity and is very nearly unthinkable. Their counterparts in the convenience group, while passionate about their tastes and the diversity of

those tastes, do not see their food philosophies as an extension of their person. Buying fair trade, if it is convenient is a "good" thing to do, but if a conventionally produced item of equal quality is available at a lower price or a conventionally produced item of better quality is available, fair trade drops in priority.

Stacey, Downtown Brooklyn on the challenges of buying locally

"I like the idea of buying local and I try to when I can, but let's be realistic. I'm not paying $7 for local carrots at the uh, farmers market when I can get a bag in Met for like, $3. Plus, when you shop at the farmers market, you have to like, plan. What days are they going to be here and is the guy with the carrots I like there on the same day that I'm there? And, I have to go out of my way. It's only a few blocks, but it takes, like, deliberate thought and honestly, it's just, ugh, it's just more convenient to pick them up when I'm doing my regular shopping. I know we need to support local farmers and we should, but it's just not convenient sometimes. It would be great if the supermarket carried produce from local farms. I mean, like, farms that sell *at* the farmers market. *That* would really be ideal."

Grace, Downtown Brooklyn on the difference between her grocery shopping habits and those of her parents

> Growing up it was like, both parents were working more than full time, so if someone got to the grocery store, it was like, *'Great! (laughs) Just get whatever'*…Go to Safeway and grab some cold cuts, frozen vegetables, a few cans…whatever could be thrown together to feed three kids fast.

Is it different for you?

> Very. I joined this co-op so that I could have access to fresh, organic food that was grown under sustainable conditions and not pay an arm and a leg for the privilege, right? My parents, they didn't—I don't think they were…aware? Is that what I want to say? Yeah, I think they really didn't know…like, or think about where the food came from or how it got to us. Things have changed a lot. Farmers markets, CSAs, all that is more accessible to the average person. I mean, you don't really have to go out of your way in Portland to find a farmers

market.(laughs) you never really did, but it wasn't like, people, regular people. Not regular, I mean, average people, they didn't shop there. I think they thought is was a sort of, I don't know, hippie? Hippie thing to do? Were there hippies in the '80s (laughs) Random. Anyway, they've changed some over the years and they shop more at farmers markets now, but it's still pretty much Safeway for them, whereas, I can't even tell you the last time I was in a supermarket. I mean, not even for emergency stuff. There's almost nothing that I would consider an emergency, so no need to stop in at the bodega or supermarket. I would rather go without than pay those prices or just be part of that greed, not to mention the garbage that's in the food at the bodega. I really don't buy anything outside of this place or another little organic shop nearby.

Finally, there emerged a thread from the in-between group that spoke to corporate distrust and anger at the role of corporations in the food system. This "righteous indignation" as one participant put it was present in both the socially conscious group and the in-betweeners, but the voice of the in-betweeners on this issue is much stronger and much angrier than that of the socially conscious group. Given that these in-betweeners are people of color, living in a resource-poor neighborhood, this anger and mistrust may be the manifestation of cumulative deprivation and the feelings of impotence and anger that typically accompany it.

Luke, East New York, on the food system

It sounds like food is a big part of your life.

Yeah, I mean, look, you're either connected to fucking food or not. You can either look at an acorn squash and say, 'that's a decoration' or 'no, I can put that in a soup.' That's it. I'm connected to my food. I see food and I see like, what's going to

sustain me in my old age, you know? If it's filled with pesticides and shit, well that's not helping you get to old age, is it? You're going to be fucked up. Milk full of hormones. Juice with a ton of sugar and dyes…

'Milk full of hormones,
' tell me about that. How do you know that?

How do you NOT know that? C'mon, man. The dairy industry is just interested in output and they'll circumvent the rules however they need to. Supply and demand and in the end we're all fucked up and they're rich fat cats. The system is fucked. My friend joined a CSA and I'm doing the same, because the only way around it is to grow your own shit and in an apartment…man, there's just so much you can do with a fire escape and you're totally fucked if there's a fire (laughs) You better hope there's enough juice in the tomatoes to save your ass. (laughs) I can't grow my own so, the next best thing is make friends with the fucking farmer, so when it all goes completely to shit, I've got a friend who will hook me up. You need to get on that shit, for real.

Jackie, East New York, on the food system

See these numbers— (points to a label) I want to tell you, so you'll know when you go shopping. It's important. These numbers mean something.

What does it mean?

It means—It tells you whether it was grown with pesticides, without pesticides, or organic. Wait, no, that's something else. It tells you if they're GMO or not.

And why do I need to know that?

Girl, they have us eating tomatoes with fish DNA. That's just not right. A tomato is a tomato and a fish is a fish. If God wanted tomatoes to be fish, He'd have made it so. I get why they do it. Well, some of it. It helps to produce, um heartier crops. So, like, a fish tomato can survive in colder temperatures and so places where the growing season is short, you can grow a fish tomato and it will survive the first frost. That can be a good thing because in places like, um where people can't grow food and they're hungry this can help, but don't be fooled. This not altruistic. Please. It's money. It's always money. My issue is, what does splicing all these genes do to people? What if you're allergic to fish? Will the fish tomato jack you up? I'm not eating any freaky DNA-altered food. You remember Dolly the sheep? Mm-hm, jacked up. That thing was a mess. You think they would stop there, but no because it's money. Now they have us eating crazy cloned meat. If I could be a vegetarian, I would. They say it won't cause problems, but I know how genes work and sooner or later when you go messin' with things that God made right from the beginning…not me, that's all I know. That's why I'm telling you about this, because if you don't know about the code, that's exactly what you're eating. They don't have to tell you, like on the signs? You know how it says that these oranges are organic or those mangoes are from Mexico? They don't have to tell you that you're buying a fish tomato. That's just wrong. I have a right to know and now you do, so remember when you go shopping.

No fish tomatoes.

That's right, no fish tomatoes. (laughs) Tell somebody. Pass it forward.

Eric, East New York on the food system

I think at one point they [food companies] use to care about what they put in the food. Now, it's a processed corporation world where it's like (snap, snap, snap) tortilla chips here, in your face

'oh, you don't want to buy it, okay thank you.' (Walks away) I think it was more caring back then. Now, it's, *'how can I make a quick buck?'* The health food stores, they're still like that—caring, but it's expensive and then you have stuff coming from the organic farms until it's taken over by these idiots [corporations]. Stuff is not natural or it's *less* natural, processed, and imitation shit. Everything is more modified…chicken, cheese. Young people don't see that, they don't know. (Points to his head) They see a cheeseburger, they think, *'it's a cheeseburger,'* they think *'it's a chicken nugget,'* they don't know. You're hungry, you eat. That's the logic. So, you eat after 20 years something that, *'wow, that causes diseases, I didn't know,'* You're *not* going to know because they're not going to say, 'hey, *mira* (look), chicken is not good for you.' When you eat chicken at home, fried *con papas* (with potatoes), you're like *'oh, it's good.'* It's like anything else. You have to be cautious of what you're eating. At least now that I'm older, that's my thought. But when you're younger. (Shakes his head) Disease could be related because of the processed food. That's why we all have diabetes and high blood pressure. I mean, I don't, but I should probably say I don't *yet*. They get you. It's just a matter of time or if you have money, maybe you can buy better stuff, I don't know."

This distrust of "the system" has led these participants to question where their food comes from and while they are not as well informed as their socially conscious counterparts, they are growing in awareness and understanding, which has led to changes in their purchasing behaviors. Each of these participants has indicated that based on what they know about the food system, they have either eliminated certain things from their diet entirely (e.g. soy, veal, chicken) or they've identified alternative sourcing options that they deem more trustworthy (e.g., *Milk from the farmers market because it doesn't have additives*.) and less damaging to health. To a lesser degree, they talked about finding alternative sources for items they felt were produced in a way that harmed people, animals, or the environment (e.g. *I heard that Fresh Direct got caught up in some immigration thing and turned the undocumented workers in to get a deal, so I'll never order form them again.)* It seems as though this group is on a continuum, headed in the direction of their socially conscious peers.

The results as presented here represent the most prominent themes and concepts that emerged from the data collected through interviews with the thirty-one participants who agreed to take

part in this study. There were many more interesting ideas and concepts that emerged from the data, but are beyond the scope of this project to explore.

Discussion

A number of interesting findings emerged from the data that left me surprised while others confirmed things I had long believed. In fact, contrary to my assumptions coming into the study based on the literature on food deserts, I found far more similarities in the behaviors exhibited among shoppers across both neighborhoods than was expected, which may indicate that this is an area for future study. I also found that despite what the literature says about poor people being less knowledgeable about food and nutrition, some of the low-income participants in my study were quite knowledgeable and were putting this knowledge into practice as effectively as their better resourced counterparts. I observed that across income and education levels, many people are uninformed or misinformed about what foods are nutritionally sound and how to shop for food in a way that supports a healthy diet. One of the things about which I was curious going into the study and that the data later confirmed is that there are pockets of relative wealth within poor neighborhoods. Among the East New York participants, several were solidly middle class earners, many of them educated as well. This class and economic diversity is often lost in the aggregated data of larger, quantitative studies. Because the middle class constitutes a very small minority, their experiences are not captured well, if at all, when examining the community as a whole. The methods used in this study permitted me to identify some of these individuals and document their experiences in detail.

I was intrigued by the age-related themes that emerged over the course of the study. It was fascinating to listen to older participants speak about their shopping habits and "hear" the echo of their parents' voices behind their own. Fascinating too, was the relationship between awareness and understanding of the production, manufacturing, and distribution of food and food choice. While not completely unexpected, the emergence of time as a factor in food choice was

interesting because of its connection to de-skilling or the absence of cooking skills. The similarity in shopping behaviors between older participants and socially conscious younger participants is worthy of attention in future research as is the relationship between age, convenience, and connectedness to the food system. The findings of this study suggest that some of the younger shoppers, for whom convenience is of primary concern, are less knowledgeable or aware of the social, economic, and political aspects of how food is produced and distributed in our food system than those for whom the manner in which food was produced was of greatest concern. Younger participants who were aware of the social, economic, and political factors involved in food manufacturing and distribution, while still more time conscious than the older study participants, were more willing to spend time on cooking and food preparation. They saw this potential reduction in convenience as a justifiable loss of time, much like older participants sought to justify unnecessary expense or indulgence.

Grocery shopping is rife with issues related to social class and status anxiety, revealing yet another area worthy of study. Study participants often behaved in accordance with what they thought was representative of their class standing. The venues in which they shopped and some of the items they selected were reflective of classed behaviors. Particularly in the lower-income neighborhood, participants went out of their way to distance themselves from local venues they saw as beneath them (e.g. bodegas and small grocery stores) in favor of larger supermarkets that were more likely to attract middle class shoppers (e.g., Pathmark and Fairway) outside of their neighborhood. They cited things like quality, variety, and cost as reasons for selecting the venue, but also commented on the class of the people who shopped there or the behaviors they were avoiding by avoiding neighborhood stores, such as the loitering they often observed outside of smaller grocery stores within the neighborhood.

One of the most interesting observations I made while conducting this study was in the participants' responses to me as the researcher. Participants in the East New York neighborhood, all of them persons of color, appeared to identify with me as a woman of color and made lots of different assumptions regarding my ethnicity and background, which I believe, allowed me to develop a rapport with them despite a short period of interaction. This acceleration in building rapport resulted in a fairly uncensored dialogue that a white researcher might not have had with the same group. My interactions with participants in Downtown Brooklyn were not too dissimilar from those in East New York. Each of the participants regarded me as a peer, with the exception of the two eldest participants, who seemed to regard me as they might their children or grandchildren, and many made comments that indicated that they assumed I was of a similar class status to theirs and that I lived and shopped in a neighborhood similar to theirs. I believe that these interactions were fairly uncensored as well, but for different reasons. In East New York, although it was clear from the fact that I was conducting doctoral research that I was far more educated than many in this segment of the sample, there was an assumption of shared experiences and shared burdens (e.g., racial/ethnic discrimination) that superseded class status and was perceived as universal for all people of color. In Downtown Brooklyn, among white participants, I believe that little need for censorship was felt, as these participants are part of the dominant culture, which sets the standards for society. There would be no need for these participants to alter their interactions with me as their language, dress, customs, etc. constitute the default norm for our society. It is likely that my level of education qualified me as a peer in this group and allowed for identification by class if not by race/ethnicity/culture. This too, would be an interesting area of study, to examine the interaction of participants with researchers of

varying race/ethnicity to determine if the findings would be consistent from researcher to researcher.

Food Voice

Hauck-Lawson talks about the concept of food voice as "a powerful channel for the expression of meaning," It is this food voice that emerges and expresses itself in terms of values and identity of the individual. [76] In this discussion, I am looking at the food voice generationally, rather than individually. I contend that there can be a collective food voice and that this voice is reflective of a range of influences, including social norms, historical events, and interpersonal and The food voice expressed by the older participants (over 50 years old) in this group echoes that of the previous generation, whose voice spoke to survival in the face of scarcity, adversity, and uncertainty. The food voice of the older participants, though it echoes the food voice of their parents, is clearly their own. In addition to the caution and conscientiousness that is underlies their communication, their voice speaks to exploration and discovery in the form of eating ethnically diverse foods, including exotic fruits, vegetables, and spices. They seek out these items at venues such as Sahadi's, a purveyor of Middle Eastern provisions in Downtown Brooklyn. They frequent Caribbean and Latin markets in Flatbush and Bushwick, and lower Manhattan's Chinatown, where a vast variety of Asian foods can be found. This part of the food voice is truly their own in that it almost defies the parental voice, which cautions them to stick to the familiar and avoid risk.

Myrna, Downtown Brooklyn, reflecting on her mother's influence

> This skirt steak, I'll cut it up and usually, out of something like this [points to package], I'll get three portions. And again the Managers Specials…very big on Manager's Specials. Or I'll buy a steak like

this [points to package], if it was on sale. I'll broil it. Marinate it, broil it, cut it into slices and then … it's sandwiches. I figured that out when I was working. I had applied for a job at XXXXXX and no matter how cheap, like I could get a sandwich at Subway's with chips for $5, but that's $30 in a week. I was making $20/hr, so I had to work an hour and a half to pay for my lunch. I could make stuff at home. I got back into cooking and I actually enjoy. You start thinking of things in terms of, '*that t-shirt is 10 bucks, I have to work X number of hours to pay for that t-shirt.'* When I was at my old job, I was making more than $100K/ year.

So, not thinking so much in terms of the cost of a t-shirt?

No. (laughs) There were still things that…I mean my mother's theory of economics was that the Depression may ending tomorrow, (snickers)…So, I always go to the sales racks. Sometimes, I get a $10 off coupon, so I can get a Banana Republic t-shirt that was $49.99 for $8.

Was your mom a Depression era baby?

Yeah, she was born in 1919. She was interesting.

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The last year of my mother's life, she lost some of her inhibitions, so when I'd go out, I'd bring her back a couple of doughnuts. Just silly little things. She tried kiwis for the first time. Persimmons.

Exotic things were expensive?

Right. Her neighborhood [Bensonhurst] All up one side is Russian and the other side is all Asian, but

> you have to be careful of the quality [of the food] you can get raspberries for a dollar, but by the next day, they're gone, they're nasty.

The idea that to consume doughnuts without occasion or to try a kiwi for the first time requires a loss of inhibition demonstrates how deeply rooted the ideas of food being reflective of a sort of morality and keeping to what's safe and familiar is extremely important. Myrna's mother was only able to giver herself permission to do these things when her life was nearly over and her health had started to decline. Myrna described her mother's decline over the last year of life as "sad," explaining that "she seemed to want to try to fit certain experiences in before the end," but noting that she had to be encouraged by her daughters to "indulge" a bit. They explained that she had "earned" the right to try new things even if she didn't like them and in the end threw them out. There is an element of risk within the food voice of this older group, but that risk, that desire to explore and discover new things is tempered by an ever-present threat of scarcity. They have an embodied memory that is not their own and have incorporated that memory into their food behaviors, despite the fact they have not themselves ever experienced scarcity on par with that experienced by their parents or grandparents.

The food voice of the younger study participants screamed, "there's not enough time!" They seemed to be running from one thing to the next and where food is concerned, aside from the time specifically allotted for leisure and socializing, it had to "fit" conveniently into their lives. As mentioned in the previous section, there is a dichotomy within the younger group, such that their shopping choices differ tremendously, as do the venues wherein that shopping takes place; with one group committed to making choices that are reflective of their social conscience and political leanings and the other group focused on a level of convenience that simplifies their lives, allowing them to concentrate on professional and social obligations. What remains

constant in both groups, however, is the voice that screams, "there's not enough time!" Even among the socially conscious groups, time-saving strategies were constantly being employed.

Grace, on cooking beans

"I usually grab four or five cans of black beans. They're cheap and quick to make. They go with so many things. (smirk)

What was that?

What?

You made a face?

I did? I don't know. I mean, I—I was just thinking. My grandmother. She would kill me if she could see me.

I don't understand.

She got along great with my mother, but there was one thing that made her crazy. My mother always used canned beans.

And this was a problem?

For my *Mexican* grandmother? Psssh, uh, yeah. She would say, 'it doesn't have to take a long time. Soak the beans overnight and they will be ready in the morning.' (speaks in a heavy Spanish accent) I know I should use the dried. They taste better and even though these are organic, there's salt in this that I really don't need. I mean, I do use dried beans, but this is soooo much faster. I mean, if I plan and I know…then I can do dried, but the cans let me decide what I want to eat when I get home from work instead of the night before, you know? Sometimes, I get really busy and if I put the beans

to soak and I don't get to them…ugh, it's terrible, but it really is easier…faster.

Violet on cooking beans

I see that you picked up dried beans.

Uh-huh. I like them better than canned. It's a hassle, but if I'm smart about it…

What do you mean, 'smart about it?'

So, you know how you have to soak them overnight and change the water a few times, and all that.

Yeah

Well, I don't.

What do you to instead?

I figured out a couple of things. First, if I put them in a crock pot, they'll cook while I'm at work and if I decide that I want them and I don't have time to use the crock pot. I microwave the water and soak the beans in super-hot water, throw it off and do it again like, four times. Doesn't take long, especially if I use two bowls.

Two bowls?

Yeah, so like I put the beans in a bowl, nuke the water, pour it over and while the beans are soaking, I put another bowl to sit in the microwave. I go do whatever for 15 minutes, come back, press the button on the microwave, throw off the water and pour the heated water over it, go do something for 15 minutes, and after an hour, they're ready. So much faster that soaking overnight and boiling them forever. And I don't have to plan so much. It only

takes like, 20 minutes for them to cook and that's super-fast compared to boiling them until they're really soft. I mean, it's an hour and twenty, but I usually have lots of things that I can do while they're soaking.

Do you ever use canned?

I try not to. I usually make A LOT of beans at once, like for the week and then it's a quick reheat in the mic and I'm done. I would never try to do this more than once a week. Even that, sometimes, I can't swing. That's how I ended up making huge batches for the week. I make a whole bag of dried and I can put them in salad for lunch or rice for dinner or make soup, but it's all super-quick.

Jessica, Downtown Brooklyn on investing time to save time

Jessica is a 28-year old, black woman who has lived in Brooklyn all her life. She has lived in this neighborhood since she was in grade school. She has an undergraduate degree and earns approximately $40,000/year. She shops in a local supermarket to supplement what she gets from her CSA and the occasional meat share from an upstate farm.

Sometimes, the CSA shares get a little ridiculous. The first year, I had stuff going bad before I could cook it. A friend of mine cans stuff and so she came over and I was all excited that we were going to can all of this fruit and stuff. (quirks an eyebrow)

What happened? (laughs)

Never. Again. I will NEVER attempt that again. She didn't tell me this was going to take days. Not A day, DAYS! Like with an '-s.' When it was over, she tells me, *'oh you can also freeze stuff too.'* I was like (motions as if choking someone). So, now, when I get too many things, I handle it the night I pick it all up.

What does, 'handle it" mean?

Um, I freeze stuff. I cut up things like greens, not like, lettuce, like spinach, kale and put it into Ziploc bags and into the freezer they go until I need them. Same with the tomatoes. If there are too many, I take some out for salads and stuff and the rest go into a Ziploc and then the freezer. Later, I make sauce with them. Fruit too. Sometimes, I run it through the food processer and into a Ziploc, (laughs) Say it with me. (laughs)

And into the freezer (laughs)

and then the freezer (laughs) Right. You catch on quick. (laughs)

Yeah, my freezer is packed by the end of the season. But this way I don't waste and when I'm ready for them, they're already prepped and ready to go. I'm already stuck at home on pick up night anyway, (shrugs) so I make the most of the time and doing this once for the week means I can just pull out a bag of greens rinse them and they're ready to go. No chopping. It ends up being faster and easier than cooking them fresh and I don't have the pressure of getting to them before they spoil. I keep telling myself it's all time well spent. Whatever makes life easier.

You talked about making sauce from tomatoes, how long does that take?

For me? Half a day, maybe? I mean, but then after it's made, I have it frozen and all I have to do is pull out a bag and warm the sauce. It's all done. You do it all at once and for months, I have fresh, homemade sauce. I don't think that's a bad investment as far as time goes. I do it on like, laundry day, so while I'm running back and forth from the basement, I'm still getting other things done. At the same time that I have the tomatoes cooking, I'll maybe roast a bunch of vegetables and put them in the freezer too. Multi-tasking. That's

> the only way. You'll never get anything done if you don't multi-task, you know?

Do you own a standalone freezer?

> Yeah, (laughs) so my situation is unusual, I guess. My parents own the house I live in. They don't live there anymore, whatever, they moved to Florida and they rent the upstairs out, but I have the two lower floors, the first floor and the basement, and my mom had a deep freezer in the basement, so I kept it and now that's what I use.

The food voice of the younger group speaks to using time wisely. Time rather than money is given primacy in many cases, although not all. Primacy is given to using time efficiently and effectively, usually toward the end of getting work done in the formal workplace and in the reserving of time for recreation. Among the older participants, primacy is given to personal responsibility and financial solvency. This idea of using time wisely or efficiently mirrors the speech of the older participants' views on using money wisely. When listening to this group speak about time, one can feel the imperative not to waste it. There's a low-level anxiety that is communicated around missing key events or opportunities, meeting deadlines, getting to every item on the to-do list that is ever-present in the same way that the fear of scarcity is a constant among the older participants.

The difference in food voice becomes apparent again when examining the items that are considered grocery staples by each group. In speaking with the participants over the age of 50, I found that their grocery staples were a stark contrast to those of their younger counterparts and are very clearly the staples of their parents generation; eggs, flour, sugar, potatoes, rice, milk, butter; these are items from which other things are made. They are ingredients that are combined to create a finished product, unlike what I found among most of the younger participants who

are, for the most part, less concerned with preparing meals than they are with consuming them and whose staples are reflective of that thinking; bread, cheese, yogurt, hand fruits, these are items that stand alone or are easily assembled, but not cooked. They are quick, convenient, portable items that are reflective of the dominant food voice of this generation, which speaks to the issue of time. Food can be a quick convenient means of satisfying hunger or it can be a lingering, sensual experience; however, there is a time and place for each. Staple foods in the younger group require very little to take them from package to plate, unlike staples of the older generation, which require not only skill in terms of preparation, but also in terms of pairing items and having an understanding of which foods pair well with others. Interestingly, when this younger group talked about meals had outside the home, meals that they neither shopped for, nor prepared, the meals they described were had at a leisurely pace, often in the company of others and were part of a social experience or some form of allotted leisure time. The foods mentioned were diverse, from Indian food to Russian food, and these meals often took between one hour and several hours to complete. The description of the food was thorough and the appreciation of it obvious. This is very different from the way that meals on-the-go are described. Breakfasts or on-the-go lunch was usually described as "*quick, easy, portable,"* with little mention of quality, taste, or appeal beyond expediency.

Alicia, Downtown Brooklyn on dining out

> I was out of town until last night, visiting friends. They took me out to eat Thai food and it was so good. That's why I'm looking at the Pad Thai now [in the frozen foods section of Trader Joe's], but I know it won't be anywhere near as good. It was just— you could like, taste the ginger and with the peanuts. And it was just tofu! I couldn't believe it. The tofu like, it had flavor and it wasn't squishy. It was like, really firm, like the texture of meat almost.

Man, and I put that chili powder stuff on top. I'm going to drool in a minute if I don't stop thinking about (laughs)

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Have you ever had Thai iced tea?

Good stuff?

You have no idea. My girlfriend tried to make it once, but it didn't come out right. I think you need a special kind of tea or spice or something. By the time we left that place, I thought I was going to pop. You know like, when you just eat and eat and eat and you don't realize that like, hours have passed and you're *still* eating? (laughs) It was one of those nights.

I am familiar. (laughs) Do you do that often? Eat out with friends?

Not as often as I'd like because it can get really expensive. I mean, it doesn't have to be like, fancy, the food just has to be really good, but even if it's not fancy, it's still cheaper to eat at home. Like at home, I'm all peanut butter and jelly, but when I go out I want good food. (laughs) My friend, she ordered these pork chops. It was so good. I have no idea what they do to it. The menu said something about lemongrass. It was hands down, the best pork chop I'd ever had in my life.

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(Shakes head) I don't even know why I'm looking at this stuff [frozen Pad Thai]. It's only going to be a disappointment. [Puts the package back] Those noodles, I just love, they were just... Maybe I'll get

Thai on the way home. (Laughs) I said I was going to stop talking about it, right? (laughs)

Chiara, East New York on dining out

There's this spot, um, I don't even know the name. It has this crazy like thing on the front, it looks like giant octopus? You know where I'm talking about?

I know exactly where you're talking about. (laughs) It does look like an octopus (laughs)

Their food is really, really good. Every time. It's never not right. I know how to make rice, right? But I can't do it like they do it. It's never sticky or mushy like mine be comin' out. My boyfriend always gets that meat. Um, what's the name of it? It's like big and the outside is real hard, that's the skin, I think. They give you that too and it sounds nasty, but it's good. You Dominican, right? You know what I'm talking about. The skin be crispy and meat is like strings sometimes.

Pernil?

Yeah, yeah, uh-huh, pernil. That garlic, damn! That what makes it taste good you know? It's the garlic. A girl I know, she's Dominican too, She said her mother puts crazy garlic on it and then it stays in the fridge for days. You *know* that shit is good when it comes out. You can smell it down the block. Sometimes when people be cooking dinner? I'm in my house and I smell it and I just gotta… I just gotta go get some. (laughs) That shit is just too good. I can't ignore it. That and some of those plantains, um the sweet ones, with the rice? Some Corona…that's it for the night. We just eat 'til we can't no more. (laughs) Ain't *nothing* getting done

> after that. It's a wrap. (laughs) Its not too many places like that around here, you know, that you could like, sit down and stuff. That's why I like that place. You go order your food, they got that music going (laughs) and have a few. That's it right there.

Beth, Downtown Brooklyn on weekend meals

"I don't cook on the weekends…at all. Saturday we go running first thing, quick breakfast, um, a bar or something, water. When we get back, we're starving, so we have a shower and run out to grab something quick. Errands, laundry, all the stuff you don't get to do all week and then we usually go to dinner with friends or sometimes just the two of us. On Sunday, we sleep in and it's a lazy day. When we finally get up and out, we go to brunch and it's nice and relaxed. We don't have to be anywhere. That's when we catch up on the news or sometimes he has to read for school, so I'll bring my Kindle, now that I can read something other than textbooks. (laughs) Dinner is usually something outside or take-out. Sunday night there's no homework or work work. We just read or watch movies on the couch, or whatever. We try to get everything done on Saturday so we can relax before you have to hit the grind again. It's like a rule in our house. Nothing exhausting or like, stressful on Sundays. I hate starting the week tired, so couch, dinner, bed."

In keeping with their food voice, in the younger group, meals are often purchased from the grocery store complete or nearly complete and they need only to be heated through or assembled in some way. These are convenient and practical purchases, designed for meals on the run or with little time to spare on preparation. This purchasing behavior is viewed as luxury and sloth by the older generation, as it often entails greater expense, which according to their food voice is something to be avoided except on rare occasions and only where it can be justified. The expense of a prepared meal vs. the relative inexpensive preparation of a meal from ingredients that can be used many times over, in an abundance of different ways, is a luxury, an indulgence of a sort, even if the meal itself is not indulgent. If one *can* cook, one *should* cook, rather than pay a premium for convenience or expose one's self to unnecessary risk, whether financial or health (e.g., falling short of cash later in the week/month, high sodium content might provoke

hypertension) for the sake of saving on time and labor. The indulgence rests in the fact that one has not put the work in, as Myrna comments in a diatribe on boxed macaroni and cheese. The luxury and the sloth of relying on this product are in that there is no grating of cheese, no standing over the stove, no assembling the ingredients and putting them into the oven, and no more than a few minutes' wait for the final product. Additionally, having not had a hand in the work of making the dish; there is no responsibility for the end result.

The consistency and uniformity with which packaged and processed foods are produced ensures success, something that the older generation is never assured of when they enter into relationship with their food. This is also part of the food voice and experience of prior generations, where hard work resulted in reward and those who worked hard were well rewarded while those who didn't work hard were not. The idea of convenience and ease flies in the face of the self-sufficiency and responsibility rhetoric of prior generations, which says that one should put the work in and put the time in, in order to reap a reward. "Add water and mix" instant meals or those that go from microwave to table in minutes and result in success every time are a sort of cheat. In fact, Myrna refers to this concept of cheating on at least two occasions during the interview, *"Sometimes, I cheat. Even though I have cornmeal and I can make it myself, I sometimes buy the mix"…"I cheat a little. I use the Betty Crocker crust, you know, the one in the dairy case? Mine just never comes out right. I don't know what I'm doing wrong."* According to this voice, there is something almost dishonorable in the use of these instant, pre-made products.

Because time is seen as a commodity among younger participants, the allotting of a great deal of time to an activity must be justified, as in the case of Jessica who justified half a day spent making tomato sauce from scratch as an investment that paid off in a more efficient use of

time later. Similarly, the use of convenience items among older participants must be justified. Convenience items that offer some sort of nutritional value, such as frozen vegetable side dishes or salad mixes were deemed acceptable, justifiable because they were not indulgent in any way. The recognition of these separate voices allows for an understanding of food behaviors to be gained and from that understanding, appropriate messaging and interventions can be developed to address shopping behaviors and the eating behaviors that follow.

Power & knowledge

The words of the participants in this study indicate or demonstrate that they conform to a certain script, which is evident in *Table 2: An Examination of Dietary Knowledge*, where their responses to specific questions are nearly identical. It is also evident in the choices they are making in the grocery store. Their choices reflect the messages larger power structures (the media, federal and local food policy, marketing) have disseminated. In many cases, these participants have latched on to snippets of information, messages such as "eat more fiber," "buy organic," "omega-3 fatty acids, [antioxidants, etc.] are good for you," "eat more whole grains," "avoid fat, sugar, and salt," that have been disseminated by mainstream media and couched within a larger message,*"it's your responsibility to eat in such a way as to protect your health,"* but which are not anchored to the larger context, i.e., the food system, how food is prduced, manufactured, and distributed; and how food influences health in a holistic manner. The focus on nutritionism micronutrients or the compartmentalization of knowledge is expressed by study participants in the buying of wheat bread, because brown foods are better for you than white food or pomegranate juice because they contain cancer-fighting antioxidants, without any real understanding of how or why these things are nutritionally beneficial and to what extent. This absence of understanding results in a sort of herd mentality, to do as others are doing lest you be

left behind or worse perceived in some way, as morally or intellectually deficient. Foucault described this as the interaction between power and knowledge., stating that knowledge produces power, they exist together, and act upon one another. [77]

Each party in the relationship holds a form of power. The principal Power (capital P), in this relationship rest firmly within the food sytem or production, including marketing and policy, while power of a different sort (little p) rests with the consumer. "Expert" knowledge disseminated by the media or imposed through policy (e.g., calorie labeling, trans fat ban, etc.) exerts Power over consumers, who in turn exercise power in the form of purchasing based, in part, on this knowledge. The disseminated knowledge therefore constrains their behavior in such a way as to conform to the script, "eat more fiber," "buy organic," etc. While the consumers believe their choices to be authentic, that is, of their own knowledge and arrived at through an informed decision-making process, it is in fact *in*authentic because their decisions have been constructed by the Power exerted by this expert knowledge and in a sense, validates the expert knowledge by delivering the predicted outcomes in their purchasing. This power/knowledge dynamic is complex and interrelated with many other processes. If we view this dynamic as impersonal, we can see how the larger power structures exert power in a way that distances, at best or alienates, at worst, the consumer from the food system, allowing only snippets of information to trickle down and make their way into the public discourse, thus constraining the ability of the consumer to acquire and act upon a more complete understanding of subject. These snippets of information are then adopted as authentic knowledge, often erroneously, by the consumer and applied to their shopping behaviors in the form of commodity fetishism, in which, certain products or characteristics of products, are reified, leading shoppers to fill their carts with products reflecting the messages with which they (the consumer) have been inundated, but with

no understanding of what went into its production or how its production impacts society or the environment. [78] The interaction of power and knowledge leads to commodity fetishsm, which in turn, ensures financial and other benefits for particular people and organizations within this system, consumers not among them.

Foucault on the beneficiaries of Knowledge and Power

> One needs to investigate historically, and beginning from the lowest level, how mechanisms of power have been able to function. We need to see the manner in which, at the effective level of the family, of the immediate environent, of the cells and most basic units of society, these phenomena of repression or exclusion possessed their instuments and their logic, in response to a certain number of needs. We need to identify the agents responsible for them, their real agents (those which constituted the immediate social *entourage*, the family parents, doctors, etc.), and not be contend to lumb them under the formula of a generalised bourgeoisie. We need to see how these mechanisms of power, at a given moment, in a perecise conjuncture and by means of a certain number of transformations, have begun to become economically advantageous and politicallyuseful…It is only if we grasp these techniques of power and demonstrate the economic advantages or political utility that derives from them in a given context for specific reasons, that we can understand how these mechanisms come to be effectively incorporated into the social whole. [79]

Class Status and Status Anxiety

Added to the power/knowledge dynamic is the concept of identity which was often in conflict with this dynamic, perhaps because there is a second discourse or Power that is attempting to exert itself in the form of awareness, which will be discussed in further detail shortly. There is the public self and the private self, each of which appear at different times and for different purposes. The public self is a social player, putting on a role, complete with a moral code and class-consciousness, that produces a set of behaviors consistent therewith. This public self will often perform in accordance with social class, demonstrating the behavior (choices) they

believe to be consistent with others of their class status, in an effort to conform to class expectations. Nowhere was this more evident than among the educated members of the sample. The speech and choices of these participants differ from their less educated, only in that they appear to be trying to conform with class expectations, such that their choices may be of higher quality or may include unusual and sought after items and the articulation of these choices were consistent with their class standing. This is not unlke The public self, the one with whom I had the opportunity to speak, declared, often proudly, its position on various aspects of food, *"I don't eat meat for moral reasons," "That's not food, it only looks like food," "I only eat whole wheat bread and pasta," "I don't buy like, a lot of potato chips, cheese puffy things,"* but the private self, the one that sometimes showed itself in the cookie and candy aisles, contradicted and rationalized behavior inconsistent with that displayed by the public self, but consistent with my findings that much of what they believe they know and what they attempted to share with me in the way of dietary advice is part of a script that has no real foundation in their cognition. Participants believed, particularly the educated ones, that they have the power to effect change, not only in their health, but in their environment because they possess knowledge, but their behavior is constrained by the Power of expert knowledge communicated by media, primarily, which authorizes their decision-making which they believe to be authentic, but in actuality is not.[79]

We are alienated from the products we seek to consume, which leads to those products gaining power, e.g., foods with nearly magical properties. Masking the relationship between the product and the labor involved in its production results in alienation from the product. According to Marx's theory of alienation, those things to which the individual is closely related but over which he has no control (e.g. the supermarket), in actuality controls him. This is seen in the way

that crowds are herded through the marketplace in a very strategically planned way. Modern retailers entice shoppers to travel along a predicted path where high impulse items have been placed. Consumers believe that they may travel the aisles at will and in any pattern they choose; this is however, an illusion of freedom because retailers long ago discovered that there are certain items that bring shoppers to the store and if placed strategically, could promote movement through the store along a few expected routes. Typically these products are placed furthest from the door, ensuring movement to that area on virtually every shopping trip and ensuring that shoppers must traverse the store, passing numerous items and displays in order to get to their target destination.[80]

The further from production we as a society get, the more control the marketplace has on us. In the current food system, products create need and in this way exert Power over the consumer. *"You need antioxidants, see on the package here? Antioxidants. It prevents cancer."* Beverly walked through the produce aisle and touched not a single item, but labored over her choice of fruit juice because it needed to have antioxidants and calcium. She later labored over the teas because Dr. Oz provided viewers with a list of teas that had the highest concentrations of antioxidants. While she was aware of the benefit of consuming antioxidants, her knowledge beyond the messaging she's received via mass media and advertising is superficial and therefore she does not possess the ability to operationalize that knowledge in a meaningful way. This participant relies upon labeling in order to make purchasing decisions because her limited knowledge, which amounts to little more than recalling of phrases, is insufficient for the purpose of problem-solving or appraisal or value. This is evident in the fact that she did not see the benefit of consuming anti-oxidant rich fruits and vegetable, relying instead upon them at the functional foods that have been well marketed to make her believe that they possess power

beyond their actual nature. She is at the mercy of marketing and the desires that marketing creates within her and she is not unusual in this respect. The vast majority of the sample functioned in the same way.

In stark contrast to my observations of Beverly, Grace, a member of a local food co-op is acutely aware of how and where her food was produced, as well as the labor, economics, and politics involved in production. Grace, feels a sense of ownership over the food system and therefore is not alienated by it, but is a participant in it. The power she exerts over the system and that the system exerts over her is reciprocal, whereas the power exerted by the food system on the average consumer in this sample, like Beverly, is not. Grace, therefore, is far less alienated than those in the sample who simply walk into the supermarket and follow the path laid for them, respond to the endcap display, and the circular advertising.

Grace, Downtown Brooklyn, on organic vs. conventionally grown produce

"Not everything here is locally produced, depending on how you define local, and not everything is organic. The conventionally grown produce is treated with like, minimal pesticides and in most cases the growers use IPM, uh, integrated…uh, pest management (laughs, reaching for kale) I'm so easily distracted. Yeah, so they use IPM as much as possible before introducing chemicals. Like, if there are aphids, they'll introduce ladybugs into the ecosystem. They're a natural predator and they eat the aphids but not the plants. Great! No need for pesticide. It's very hard to grow organic apples in New York, so light spraying is sometimes necessary, but the farmers we work with, they're committed to using the least toxic means of treating the problem. You won't find that in a supermarket and definitely not at this price. We're also not, uh, trucking… trucking it in from across the country, damaging the environment and wasting fuel, which the customer pays for when the price goes up. People don't get that every little thing effects every other little thing. The system is dynamic. Sure, I'm concerned about pesticides, um I haven't had children yet and certain poisons are stored in fat, which women have more of, so avoiding pesticides is really important to me. Carrying and nursing babies, you want your food to be as clean as possible, but I also realize that the exhaust from the trucks that bring those apples to market all the way from Washington, contribute to a larger problem in our environment and it's not as if air stays still (laughs) or that air pollution doesn't also affect our water. It's all connected. So, I could insist on the organic Washington apples, but then those same babies would ultimately be exposed to unclean air and water because of my preference. It's not a perfect system. You have to weigh the costs."

Grace is not alienated from the process of food production. She understands how her food is produced, the labor involved, the impact that production has on people, the environment, and society as a whole. She understands how various factors interact to ensure the delivery of that food to the marketplace and she understands the factors that influence that pricing, both at the co-op and at the supermarket. Because she has a depth of knowledge, Grace has power. She has the power and knowledge to act upon the system that is acting upon her and therefore, she retains a degree of control, which is forfeited by her more alienated counterparts. Her depth of knowledge allows her to analyze the various factors that come to bear on her purchases and to synthesize that knowledge in order to examine other seemingly unrelated issues, e.g. the use of fuel in transport, and evaluate or appraise the risks and benefits of her choices in both the proximal and distal contexts. Over and over again, I found instances where participants displayed only the most basic knowledge of the foods they purchased. According to Bloom's Taxonomy, the most basic level of knowledge manifests as recognition, rote memorization, and recall.

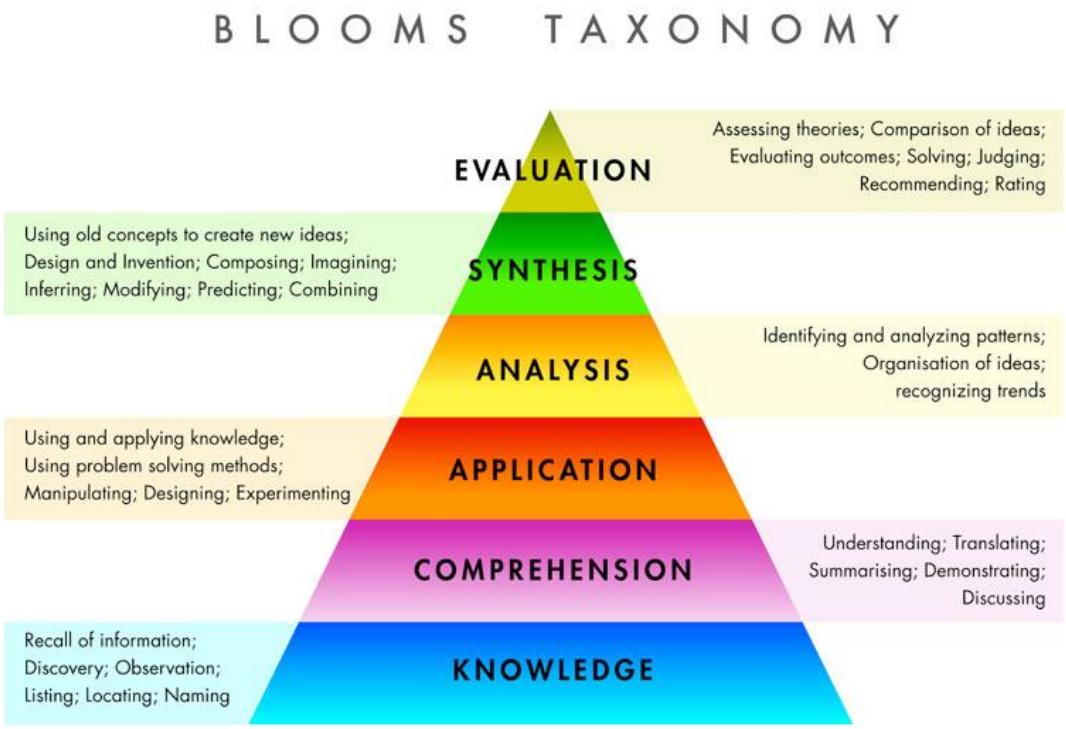

Fig. 7: Bloom's Taxonomy

Eric, East New York, on the food system

Look at this, (points to a display with soda stacked more than 6 feet. High, across a span of approx. 10 feet in width) it's just like sodas forever. Food is just different now. The way food is done now, it's completely modified—generically modified. The GMOs, it's a big deal to a lot of people who don't even know what that it. I know what that is.

Can you explain it to me?

Well it's, uh generically modified—something, I forgot the "O." It just means that food is not being done in a sense of uh, not grown, uh, healthier; it's grown more of a processed food type world. The demand is so much demand the bread is being brought out faster, **the chicken is being done quicker.** So a lot of stuff is being brought out—the documentaries and stuff. The documentaries, like on YouTube—I like documentaries and when I see

> stuff like that, if I can link it, I link it to Facebook. A lot of stuff is not healthy anymore, so I guess that's a consciousness that stayed with me, so gradually going to the health food store is like, 'ok, I need to do this." I don't mess with McDonald's anymore. Nothing. I try not to do nothing. And when I say try it's *try* because again, it's what do – it's, it's in your face. You know—propaganda. Like the other day, I passed by Burger King and I was like, 'oh Whoppers.' You know I used to eat Whoppers back in the day. But if you go to our website, you get a free Whopper and I was like "really!' *Di-di-di* (imitating keystrokes on the computer) That's how they catch you.

Because it was free?

> It was free, like you with that Target card. (laughs) So, that's what happened. And at the end, I end up getting a Whopper, like a dumbass. The whole point is, I guess, fast food isn't good for you.

Eric possesses only the most basic knowledge of the food system, which is evident in his attempt explain to me what GMO's are and why he feels they are undesirable. The language he uses to describe them is clearly not his own. He struggles to remember the script and becomes flustered when he can't. The bolded text in his comments above immediately reminded me of a food documentary (Food, Inc.) and shortly after he makes this comment, he confirms that he watches documentaries on YouTube. It is clear that this is where his forgotten script came from. Throughout his interview, he teeters on the edge of comprehension, explaining, in some instances, correctly, why a particular item might promote disease rather than health. Eric appears to be on a continuum, moving up the hierarchy of Bloom's Taxonomy. His basic awareness of failings within our food system have primed him to seek out additional information which will likely move him up the hierarchy over time.

Sarah, East New York, on the food system

"I don't really like the TV. I think they try to scare you, you know? (exaggerated imitation of a newscaster, scowling) *'Ha, the next food craze!'* Like, I think certain shows make you feel like if you're not doing the next craze, you're not—you're not part of the crew. Whole grains, that's one. I don't even pay attention anymore. We hyped it up too much. People go crazy. I'm skeptical of everything now. I think it's more important for the bread to be made with organic flour than it is whether it's brown or white. Can't we all just get along? (laughs) Does everything have to be about color? Just kidding. (laughs) To me, pasta is pasta. If I want whole grains, I'll eat oatmeal, doesn't get purer than that. I can eat tabbouleh, all those Middle Eastern grainy things. Those are whole grains. Barley, um Quinoa, although… I don't really eat that anymore because we're making it impossible for the people who grow it to eat it.

Tell me about that

Okay, so I think it's Peru, that's where it comes from and they've been eating it since like, I don't know, dinosaurs? Whatever, they've been eating it forever and it's like, their native food, like *their* food. **Along comes a corporation and they market it to people like us and we don't know any better and it's good, so we say 'cool, I want that."** Then they say it's like, some kind of superfood, amazo, heal cancer thing, right? And now all the people, you know who I mean, the gentrifiers, those people, MUST have it. **So, the price goes up and poor Jose is sitting at a table in Peru and his kids have nothing to eat because the quinoa that they've eaten for generations is too expensive for him to buy for his family.** Crazy, right?

Hmmm.

Now, the big thing is chia seeds. I'm not gonna lie though, I buy those. (laughs) They're good. The funny thing is, you know it's same thing we saw on TV when we were kids. *Ch-ch-ch-chia, ch-ch-ch-chia pet,* (laughs) and now we're freaking eating them. This is a crazy world.

So, you said that these were food crazes and you were skeptical, what sold you on the Chia seeds?

I'm really skeptical of things like Pom® or putting calcium in my freaking orange juice. That's what I'm skeptical about. **I'm not *as* skeptical about native foods because there are hundreds, sometimes thousands of years of evidence that it's a good food source, you know? I also don't believe that if you start eating it now, you won't get cancer when your're 60.** That's just stupid. We eat McDonald's half our lives and then discover quinoa and after a few bowls, we're immortal? Stupid! I asked friends from Mexico about it and they gave me the Grandma wisdom. You know, what the old heads did. They've always eaten it and their experience says that it provides energy and you give it to sick people and old people to help them to recover or to keep them going a while longer. It's not magic, just good food. **Problem is, we don't recognize good food anymore. People have to get back to growing or at least seeing where the food comes from. Do you know the kids I taught couldn't tell you how certain things grow? Like do tomatoes grow on trees, vines, shrubs, what? They don't know.**

Why is "Grandma wisdom" better?

They didn't have all this crap in their food and they lived a long time. They didn't have all these cancers and Alzheimer's and this thing and that thing. Their food was natural and they knew how to eat. So, I

trust them over the Harvard researchers. Do you really need a study to tell you that fake fat is bad for you? Remember Olestra? (snickers) People were crapping themselves silly just to be skinny. Crazy hype. The other thing is, even if we eat the best we can, there's all this stuff in the environment that makes you sick. I just feel like I have some control over the food, so I should do what I can with that to maybe offset what's being done to us with the air and the water that we *don't* have control over.

Tell me what you mean by, "what's being done to us."

Like, for example, there was that story, what, last year? About medicine being in our water supply because people flush medication down the toilet or wash it down the drain and then we end up with all kinds of stuff in the water. Stuff like that. We have no control. Even if you drink bottled water, which is really just tap water anyway (snickers), but let's just say it's not. You still have to shower, bathe, brush your teeth. Are you going to fill the tub with Dasani? No. Right. So, we're still exposed. **Do what you can for your health, that's all. Don't eat crap and maybe you'll live a long life, maybe.**

Sara's level of knowledge as evidenced, in part, by her comments above (see bold) is further up the hierarchy that is Eric's. Sara is able to analyze, and to some degree, synthesize and evaluate information about the food system. She possesses a depth of knowledge that allows her to appraise information, examine it critically, and rate its credibility and usefulness. In this way, she, like Grace retains a degree of control. She is able to exert power over the system that exerts power over her. Her awareness, coupled with the fact that she has joined a CSA indicates that she is evidence of the power she exerts over the system. If we examine the comments above from Beverly, Grace, Eric, and Sara on a continuum from alienated (Beverly) to not alienated (Grace),

Eric and Sara would be much closer to Grace than to Beverly because they possess higher levels of awareness and knowledge, which put them more in touch with their food and would likely cause them to exhibit fewer behaviors consisted with the commodity fetishism seen in Beverly's shopping cart.

The findings discussed above, especially those around race, social class, and age have implications for further work concerning grocery shopping and public health. Suggestions for further research, practice and policy are discussed in greater detail in the final chapter.

Conclusions

This study identified and examined the various factors that influence food-purchasing decisions within a grocery store setting among 31 shoppers from two neighborhoods in Brooklyn, New York. Using qualitative methods such as naturalistic observation and qualitative interviewing, I was able to identify six distinct factors that played a role in the decision-making processes of the study participants. In their own words, participants spoke about the ways in which class, culture, taste, quality, location/access, and cost influence their choices; many of them became consciously aware of and spoke of these factors for the first time as they participated in this study. Some spoke about how sudden, drastic, and/or unexpected changes in income have changed the profile of their shopping cart or influenced where they acquire food. Even some of those who were not poor nor experienced a change in income talked about feeling insecure about their financial futures and everyone mentioned something about the cost of food as a determinant of choice. Several participants spoke about utilizing food pantries for the first time, something that they would have considered completely outside of the realm of possibility for them prior to experiencing a change in income. The opinions and ideas of these study participants provided me with insight into situations in which culture and taste preference were important considerations and when they could take a back seat to things like cost or health concerns. I learned that quality isn't only a consideration when looking at food itself, but also the shopping venue. As in restaurants, presentation matters and how foods were presented in the marketplace played a role in determining the choice of store. Location and transportation were also factors in where participants shopped and determined, to some extent, the kinds of foods to which they had access.

In addition to the factors mentioned above, I observed that age and knowledge of the food system also play a role in the decision-making of consumers. In this study, participants over the age of 50 demonstrated reliance upon parental messaging received in childhood, to guide many of their decisions. For this group, primacy was given to financial security, such that food-related decision-making relied heavily on avoiding scarcity. Additionally, there seemed to be a moral imperative around food that one should limit indulgence of sweets and rich foods, be responsible and choose foods that will promote or preserve health, and finally, but most importantly, waste nothing. Overall, among younger participants, time was given primacy. Time was treated as a commodity not to be wasted, similar to the way older participants viewed money. Interestingly, this group seemed to be of two minds, in that a number of them were mostly concerned with convenience and their purchases reflected as much, with a heavy reliance upon frozen and instant food items, while others were primarily concerned with how their food was produced and the social, political, and economic factors involved in production.

Policy Implications

The participants in this study relied heavily on labeling and advertisements when selecting food items in the grocery store. Dependence upon this sort of messaging indicates that the decision-making of these participants is not rooted in authentic knowledge, but rather it is drawn from the dominant discourse around food and nutrition that is perpetuated by the food industry and the government agencies charged with regulatory oversight of that industry.

The influence of the food industry on government regulation has allowed food manufacturers and distributors to advertise their products in very deceptive ways that contribute to consumer confusion and dependence upon product labeling, limiting their power to make informed decisions around food purchasing that will ultimately influence their health outcomes.

Regulatory agencies such as the FDA and USDA, which are responsible for the safety of our food supply, have become a revolving door for those who head some of the largest food companies in the world. Industry-linked appointees and the staff they bring with them during their tenure in these regulatory agencies have helped to implement regulatory policies that favor their former employers and have impeded those policies that hinder industry growth or freedom of operation, including truth in labeling. It is this alliance between our regulatory agencies and the food industry that allow for example, cereal companies, to label and market sugar-laden cereals as good sources of fiber and whole grains while ignoring the fact that a single serving of these same cereals also contain a substantial amount of added sugar, as well as artificial colors and flavors. More restrictive conflict of interest policies than currently exist in governmental regulatory agencies would limit the influence that a former food industry executive could have in directly influencing food policy such that it benefits the industry. Transparency in these situations is, without question, absolutely necessary to ensure that our regulatory agencies are acting on behalf of the public's best interest rather that industry's profit.

Practice Implications

For as long as corporations place profit over consumer safety, for as long as corporate lobbyist have the ear of US legislators, and for as long as former "big food" executives cycle through the USDA, FDA, EPA, and the Supreme Court in positions of power, we will have a broken food system. Shifting norms through education and practice fosters the possibility that an informed public will demand a food system that encourages health and reduces the alienation that now perpetuates the broken system.

Based on the research reported in this study] and the health education literature, I believe that public health messaging should move away from the nutrition-focused messaging of the past and

embrace a new set of messages that aids consumers in understanding how food is produced and made available to the public. Most people understand the world within the context that is permitted by the dominant discourse, and act accordingly; therefore, in order for change to occur a new and different discourse must emerge and assume dominance, displacing the existing discourse. In the case of grocery shopping behaviors, which in turn, directly influence dietary behaviors, the dominant discourse generated by the food system and the media must be changed such that consumers begin to understand the policies and practices of the current food system. Messaging should be similar to that seen in food documentaries such as *Food, Inc*., which urged viewers to "Vote with your dollars," along with providing fast facts, like how many recalls were issued in the last year and for which products, the incidence of e. coli in our meat and the fact that feeding a cow grass (its natural diet) instead of corn (cheaper and fattening) results in far less risk of e. coli. Such messages would go a long way toward raising public awareness around how our food system functions and how it influences our health as individuals and as a nation. Informing the public, through a media campaign about how far-reaching the food industry influence is in our current food system and providing them with suggestion as to how to protest that involvement in simple ways is one means of reaching the adult population. Utilizing social media (e.g., Facebook, Twitter, etc.) as well as conventional means of communication (e.g., NYC subway advertising, radio and television-based PSA's, print advertising) to disseminate this information will raise awareness of how the food system acts upon the average consumer to their detriment, while providing them with the means to resist. As awareness and understanding grows, there is movement from simple understanding (mimicry) to genuine understanding (analysis and evaluation), which is necessary for appropriate application of knowledge in practice. Additionally, when knowledge matures to the point where critical analysis is possible,

advocacy and debate are possible, which allows for consumers to critically assess various food policies. Without the ability to critically assess these policies, consumers will simply behave in response to the messages of the dominant discourse.

I contend that awareness of how our food system functions is the beginning of knowledge and therefore, power. Increasing levels of awareness will lead to increasing levels of knowledge/power, which in turn, will lead to decreasing levels of alienation from the food we consume. Consumers in this study sample who were not alienated from their food were much more likely to have diets that supported positive health outcomes. They were less likely to consume processed foods, which have been associated with overweight, obesity, and diet-related disease and they purchased greater quantities of fruits and vegetables than their more alienated counterparts. Based on my observations and interactions with these shoppers, it would seem that our approach to nutrition and overweight/obesity prevention should focus less on the nutritional content of food and more on the system by which food is produced. A study of the effects of a food studies course on the eating behaviors of college students revealed that engagement of students around food-related social issues, such as labor rights, animal rights, and environmental sustainability led to greater adoption of healthful eating behaviors among students in the food studies course compared with students enrolled in courses focused on health issues and address food and nutrition directly.[81]

These sorts of interventions that focus on the food system rather than specifically on diet and weight are designed to promote behavior change by influencing a behavior that is not the direct cause of the outcome of interest, but has an effect on that outcome. Similar to the literature on teen pregnancy prevention that asserts that having students engage in afterschool activities, whether at school or in the form of employment reduces opportunities for adolescents to engage

in risky sexual behavior than their counterparts who are not productively engaged and have large swaths of unsupervised free time. The teen pregnancy prevention literature also asserts that students who are actively engaged in long-term planning for college and/or career exhibit similar outcomes. Given that conventional nutrition education and nutrition-focused health promotion interventions have only been marginally successful in addressing overweight and obesity in this country, it would seem that a new approach is needed. Based on the results of my study, using similar interventions as the framework for food-related health promotion is promising. Because overweight and obesity are a pervasive issue in this country for both children and adults, I propose that we must change the dominant discourse about food and nutrition as broadly as possible, such that the messages that children receive connect them to the food system and limit their alienation from it as early as possibly, while at the same time crafting consumer messages in a way that increases knowledge and power in this group.

Children

None of the participants in my study who were under the age of 40 had formally taught about food, grocery shopping, or cooking. Those over the age of 40 described their participation in home economics classes where they learned about menu development and food preparation or where these skills, learned in the home, were sharpened. Many in the study attribute their ability to maintain a healthy diet to the fact that they possess cooking skills and therefore have the option of preparing food at home rather than relying upon prepared foods. Several of the participants who did not possess cooking skills spoke of being dependent upon take-out and feeling that they sometimes had fewer healthy meal choices in the restaurants and in the supermarket than they would were they able to prepare a meal themselves. Those who said they

could not cook also mentioned having neither formal nor informal instruction around food-related skills, such as grocery shopping, pairing food, and the mechanics of food preparation.

In the past 30 years, rates of childhood obesity have more than doubled and approximately one-third of our nation's children are classified as overweight or obese.[13] This generation will experience diet-related diseases and the consequences thereof to a much greater extent than previous generations. It is predicted that morbidity and mortality rates associated with overweight and obesity in this generation of young people are likely to be high unless something changes drastically in the way these children and their parents interact with food. It is imperative that we begin to change the dominant discourse around food in such a way that this and future generations will have the knowledge and power to navigate the food system as consumers who are fully capable of critically assessing the food landscape in order to make appropriate decisions for their health.

Food literacy is a term that is gaining in popularity and is very similar to health literacy. In fact, the definition of health literacy can be used as a framework to define food literacy, replacing "health" with "food" to arrive at an acceptable definition of the term: the degree to which an individual has the capacity to obtain, communicate, process, and understand basic food, nutrition, and food system information and resources to make appropriate decisions around food sourcing, preparation, and consumption. [82] Food literacy is a critical skill for assessing food-related information and applying it to purchasing decisions; therefore, it is necessary to increase food literacy across the general population. While certainly challenging, this is not impossible. Weaving food literacy into our K-12 curriculum is one strategy that could be employed to empower and equip young people to make health-promoting decisions within a grocery store setting. The benefits of improving food literacy are clearly not limited to the grocery store, but

would extend to restaurant dining and take-away meal decisions as well. In this way, shifting the dominant discourse on food could have very far-reaching implications on food sourcing and the food industry as a whole. Restaurateurs whose food sourcing behavior reflects an understanding of the food system and who seek to resist the power exerted on them by this system are growing in numbers, however, an informed public who demands that the food they're served arrives on their plate via very specific pathways, will undoubtedly change the way business is done in the food service industry. It all begins with children. Childhood is a time when information is absorbed at a phenomenal rate, making it the ideal time to introduce food experiences that will be internalized and built upon to produce a depth of knowledge about this part of their world that they can then operationalize from a young age.

The UK recently adopted a curriculum for students age 7-16 that teaches cooking skills in addition to food safety, while promoting critical food literacy. [83] According to Bloom's Taxonomy this sort of intervention, combined with an interventions focusing on food-related social issues has the potential to produce consumers who are capable of more than a basic understanding of the food system. Nutrition knowledge coupled with an understanding of the food system has the potential to produce consumers who are able to critically assess food policy and generate new knowledge, functioning at the highest point of the knowledge hierarchy and reducing or eliminating the alienation from food that is currently a widespread reality. Participants in this study demonstrated a lack of concrete knowledge; their behaviors were clearly constrained by the dominant discourse under which they've functioned their entire lives.

The participants in my study repeatedly talked about their level of cooking skill in relation to what they purchased in the grocery store. Cooking skills often determined whether or not shoppers bought processed foods. Those who possessed cooking skills purchased more fresh and

unprocessed items and their staple items consisted of foods that were less processed than those of their counterparts who lacked cooking skills. Older participants talked about learning to cook from mothers or grandmothers, while younger participants talked about being home alone and relying on microwavable and instant foods during their childhoods. Younger participants who cooked, spoke about the benefits of being able to control what goes into their food, not just in terms of sugar, fat, and salt, which is what the dominant discourse talks about, often in relation to obesity, but also food additives such as dyes, chemical preservatives, and artificial flavor enhancers. They spoke cooking at home as a means of avoiding pesticides in food and supporting local economies while reducing environmental burden. All of this suggests that cooking is an important skill that one should have in order to have authentic options around food choice. Home economics classes, which were a mainstays in middle and high school education until the late 1970's-early 1980's, might be worth revisiting as part of our 6-12th grade curriculum. Critics express concern that home economics courses reinforce restrictive gender roles, which may have been true in prior generations, however, normalizing cooking skills as something that all adults should possess negates the gender argument. Including cooking as a part of a holistic life skills curriculum designed to help adolescents transition from childhood dependence upon parents to independence, as they move into higher education (sometimes away from home) and the workplace, can be valuable in many ways. Budgeting and money management would certainly be excellent companion skills that would enable young adults to shop, maximizing their financial resources. Taken together food literacy, cooking, and perhaps the other skills mentioned above would make for a well-equipped, well-informed shopper.

Adolescents and young adults, can benefit from exposure to a new discourse that runs counter to the dominant one. Grace, the participant who best exemplifies the relationship

between power and knowledge within the sample and who effectively resists the power of the dominant discourse, explained to me that the catalyst for change in her life occurred in college. Her shopping and eating habits are very different from that of her parent, but it wasn't before she left home for school. The college she attended was a progressive school within which the co-operative system was employed for many aspects of student life,

> "…there were housing co-ops, work co-ops, cooking co-ops, and of course shopping co-ops. You weren't required to join one, but it was definitely part of the campus culture and it didn't take long to realize that it really was an efficient way to live, both in time and money. Collective action was a theme throughout the school, student life, courses, everything, and I think it really changed me into who I am today. I don't believe that I would be as active as I am. I volunteered to work on the campaign (Obama, 2012) this time and before (2008), I organize meetings on my block to deal with community issues, I talk to my elected all the time. It's important to let them know you're there and you know where they are too. If you want things to change, you have to get involved and change them, but…it's really hard to do that on your own. Together, a group of people can make things happen much faster than an individual on their own. If I learned nothing else while I was at school, I learned that and it has served me. It really has. I think it's something we should introduce at the grade school level and it should be a normal part of the workplace. Can you imagine? Workshare? I've done it and it's awesome. Women wouldn't have childcare issues; you could be more present in your kids' lives. It's all pro, no con, as far as I'm concerned."

Grace's experience, speaks to college-aged students, but would be applicable to high schoolers as well. Grace reconnected with the labor aspect of living. She recognize the labor involved in not only producing food, but in maintaining a congregate living facility and providing meals for very large group. This experience served as a catalyst to help Grace move from a place of alienation to awareness and eventually to a place of power. This is the progression that needs to occur with our youth in order for them to eventually resist the dominant discourse and begin to act counter.

Adults

Changing the dominant discourse around food and replacing existing messages with messages the move consumers from alienation from their food to a connection to food is a monumental task. With children and adolescents, who are centrally housed for much of the day and most of the year, they are a captive audience to any message we want to disseminate, adults, on the other hand, are not. Intervention within this group is challenging in that messaging must be broad and reach consumers at various levels of understanding and from all walks of life. Social marketing techniques are well suited to this task and there are many examples from the anti-tobacco literature to support this approach. Public service announcements and similar informational campaigns would be useful in moving consumers along the hierarchy of knowledge, at the very least, piquing their interest in learning about how the food system operates, which fosters awareness and is the beginning of knowledge. In New York City, one effective strategy for disseminating messages across groups (race, class, neighborhoods) is through the use of subway advertising. The New York City Department of Health and Mental Hygiene has used this strategy to promote everything from safer sex practices and HIV testing, to smoking cessation and reducing sugar intake. Using a stealth intervention approach, an informational campaign featuring small pieces of food system information including food-focused social issues, with scripts that are easily adopted along, and suggestions for how to resist the dominant messaging, is not so unlike the exposure of college students to food-related social issues in a classroom setting. In the end we are changing norms and attempting to mobilize the general public to demand a healthy food system. This goal is not unlike that of anti-tobacco activists of years gone by. The shifting of norms around tobacco used has been dramatic over

the past 50 years and had led to policy changes meant to hinder “big tobacco” such as increased taxes on tobacco products and regulation on advertising and sales of tobacco to minors.

In order to effect any substantial change to a severely broken food system that promotes an obesogenic environment within our grocery stores, there must first be a level of awareness among consumers and a connection to the food system in order to activate that agency in a meaningful way. Change may only happen when a new counter-discursive element begins to receive widespread attention through means of communication and the consumer begins to recite a new script. The combined efforts of reaching the adult population, while grooming a new generation for food reform activists will undoubtedly lead to a shift in food norms for us as a nation.

Appendices

Appendix A: Screening Survey

SCREENING SURVEY

Project Title: Grocery Shopping Study

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1. Do you speak English fluently? ☐ Yes ☐ No
   If No, skip to "Determination" and mark, "Ineligible."

2. Are you 18 years of age or older? ☐ Yes ☐ No
   If No, skip to "Determination" and mark, "Ineligible."

3. Do you live within any of the following zip codes:
   If No to either, skip to "Determination" and mark, "Ineligible."

   - 11201 or 11217 ☐ Yes ☐ No
   - 11207 or 11208 ☐ Yes ☐ No

4. Are there children under the age of 16 living in your household? ☐ Yes ☐ No
   If Yes, skip to "Determination" and mark, "Ineligible."

5. How many adults reside in your household? ☐ Three or fewer ☐ Greater than 3
   If Greater than 3, skip to "Determination" and mark, "Ineligible."

6. Are you the person who is responsible for the majority (more than 50%) of the grocery shopping for your household? ☐ Yes ☐ No
   If No, skip to "Determination" and mark, "Ineligible."

Determination: **Eligible** **Ineligible**
(Circle one)

Screened out *(Check one)*

☐ Language
☐ Age
☐ Zip code
☐ Children present
☐ Household size
☐ Shopping responsibility

Appendix B: Informed Consent Form

CONSENT TO PARTICPATE IN A RESEARCH PROJECT

Project Title: Grocery Shopping Study

Principal Investigator: Phyllis Jackson-Figueroa, MPH
Graduate Student
CUNY Graduate Center
365 Fifth Avenue, Room 3317
New York, New York 10016
Phone: [redacted]

Faculty Advisor: Jonathan Deutsch, PhD
Professor
Kingsborough Community College
2001Oriental Boulevard, Room V229F
Brooklyn, New York 11235
Phone: [redacted]

Site where study is to be conducted: Multiple grocery store locations within the communities of East New York and Brooklyn Heights/Cobble Hill.

Introduction/Purpose: You are invited to participate in a research study on grocery shopping behaviors. The study is conducted under the direction of Phyllis Jackson-Figueroa, MPH, of the Public Health Program at the CUNY Graduate Center. The purpose of this research study is to determine where people shop for groceries and to better understand how people make product selections as they move through the grocery store. The results of this study may assist researchers in developing educational tools to help shoppers make informed shopping decisions.

Procedures: Approximately 30-40 individuals are expected to participate in this study. Each participant will participate in one shopping trip and one interview. The total time commitment of each participant is expected to be 1-3 hours, depending on the length of the shopping trip. The researcher will accompany you to the grocery store where you normally shop to observe and ask questions about your shopping behaviors. A digital voice recorder will be used to record interviews between you and the researcher.

During the interview, which can take place immediately after the shopping trip or on another day that is convenient for you, the researcher will ask questions about food items, the various stores where you shop for groceries, and how you get to and from those stores. You will also be asked to look at a number of images and comment on them. These images will be in the form of photographs and print items from the circulars of various grocery stores.

The shopping trip will take place at the grocery store where you do your normal grocery shopping, and the interview will take place in a public place (for example, a local restaurant or café) that is convenient for you to get to. You may also be asked to meet for a brief second interview to verify some of what was said during either the shopping trip or the interview. Throughout the course of the study, you can refuse to answer any questions that make you feel uncomfortable.

Possible Discomforts and Risks: You will be asked questions that you may consider sensitive in nature. These questions refer to your income, education, and occupation, and the may cause you to feel uncomfortable. The researcher will make every effort to be discreet in asking these questions, so as to minimize the risk of being overheard or causing you discomfort. It is possible that your participation in this study may cause you to feel stressed or embarrassed. To minimize these risks, the researcher will make every effort to ask all questions in a respectful manner, skip any questions that you uncomfortable, and stop the interview immediately at your request. Your participation in this study is voluntary, and you may withdraw from this study at anytime.

If you experience distress as a result of this study, you should contact Crisis Intervention Services offered by the New York City Department of Mental Health at 1-800-LIFENET (1-800-543-3638) and you will be referred to a low-cost/no-cost mental health provider in your area.

Benefits: There are no direct benefits to participating in this study. However, participating in the study may cause you to become more conscious of your shopping habits.

Alternatives: You are free to choose not to participate in this study. If you decide not to take part in this study, there will be no penalty to you. You will not lose any of the benefits to which you are otherwise entitled.

Voluntary Participation: Your participation in this study is voluntary, and you may decide not to participate without prejudice, penalty, or loss of benefits to which you are otherwise entitled. You may withdraw from this study at anytime. If you decide to leave the study, please contact the principal investigator Phyllis Jackson-Figueroa, MPH to inform her of your decision.

Financial Considerations: Participation in this study will involve no cost to you other than your normal grocery expenses. You will not be asked to purchase anything for the study. For your participation in this study, you will receive a Target gift card worth $20.00. The gift card will be given to you upon completion of your participation in the study, which means once you've completed the observed shopping trip and interview(s) mentioned earlier in this document.

Confidentiality: The information or data obtained from the observed shopping trip and interview will be collected via digital voice recorder. The collected data will be accessible to the researcher, research assistants for the study, and the members of the CUNY Institutional Review Board. The researcher will protect your confidentiality by securely storing the data collected. Your signed consent form, the only document that will identify you by name, will be kept in a locked file cabinet. Your original voice recordings will be downloaded from the voice recorder and saved in a password-protected file on a secure, password protected computer, and the original recordings will be erased from the digital voice recorder. All study files will be password protected and stored on a password protected desktop computer, in an office with a locked door.

Contact Questions/Persons: If you have any questions about the research now or in the future, you should contact the Principal Investigator, Phyllis Jackson-Figueroa, MPH by phone at (917) [redacted], or email at grocery.shopping.study@gmail.com. If you have any questions concerning your rights as a participant in this study, you may contact Dr. Carmen D. Rodriguez, KCC HRPP Coordinator, at (718) 368-5209, Carmen.Rodriguez@kbcc.cuny.edu, Dr. Farshad Tamari, Primary Member, IU-IRB #4, (718) 368-5726, Farshad.Tamari@kbcc.cuny.edu, and/or Mrs. Orit Hirsh, Member, IU-IRB#4, (718) 368-4780, Orit.Hirsh@kbcc.cuny.edu.

Statement of Consent:

"I have read the above description of this research and I understand it. I have been informed of the risks and benefits involved, and all my questions have been answered to my satisfaction. Furthermore, I have been assured that any future questions that I may have will also be answered by the principal investigator of the research study. I voluntarily agree to participate in this study.

By signing this form I have not waived any of my legal rights to which I would otherwise be entitled.

I will be given a copy of this statement."

_____	_____	_____
Printed Name of	Signature of Subject	Date Signed

Subject

_____	_____	_____
Printed Name of Person Explaining Consent Form	Signature of Person Explaining Consent Form	Date Signed

_____	_____	_____
Printed Name of Investigator	Signature of Investigator	Date Signed

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