ACTIVELY CREATING A HEALTH-CONSCIOUS LIFESTYLE THROUGH FOOD LABEL LITERACY IN HAWAII

A THESIS SUBMITTED TO THE GRADUATE DIVISION OF THE UNIVERSITY OF HAWAI‘I AT MĀNOA IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF ARTS

IN

COMMUNICATIONS

SUMMER 2019

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Summer 2019

Keywords: food label, nutrition, health, lifestyle, organic, grocery shopping
Abstract

Food labels facilitate vital communication to the grocery shopping consumer. This research paper examines the use of food labels during the decision-making process that occurs between browsing and buying. The study sought to understand consumer motivation, nutrition perception, and health identity through product label interaction. The scope of research was centered on grocery store customers in the Honolulu metropolitan area. Qualitative mixed methods were the research techniques comprised of focus groups and interviews with a total of eighteen participants. As a result, three categories were established: nine participants designated as being most health-conscious, four being moderately health-conscious, and five being minimally health-conscious. The implications of this study are that the more health-conscious and motivated an individual is, the more food labels will be utilized when making a grocery purchasing decision. The more frequently a customer utilized the food label, the healthier the food choices were. The use of food labels alone did not fundamentally change a person’s personal beliefs as hypothesized, but rather reinforced their preexisting attitudes. Food labels were simply indicative of one’s identity as an empowered health-conscious consumer. Good health was imbued in one’s sense of self and a health-conscious lifestyle became a manifestation of one’s personal philosophy.
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Chapter I: Introduction

Imagine entering a vast grocery store with its many aisles and innumerable product offerings laid out before you. Food is seen abundantly in every direction. This modern marketplace is staggering in its immensity with a plethora of options whose sheer volume and variety is overwhelming. To traverse the shelves and understand what is contained within the packaging a communication method is necessary. To make sense of and differentiate amongst the various products, food labels are employed as the necessary tool to discern and decide between the many options. Learning to read and comprehend the various ingredients, percentages, and terminology on the product label is its own form of literacy.

This literacy is necessary to develop to know what is healthy and what isn’t. Awareness of healthier foods is rising along with new labels and jargon. Coupled with the many preexisting choices, there has been significant growth in available new items from the natural and organic foods industry. Conscious consumers want what is best for themselves and the planet. This is due to a rise in interest and growing awareness of the interconnectedness between the health and well-being of the environment and one’s personal health (Wagner, 1997). Based on the proliferation of healthy food products and natural grocery stores along with growing trends in a vibrant lifestyle, it is necessary to understand the consumer’s method of store navigation and decision-making process.

Modern society provides a significant amount of food choices nearly all the time and available nearly everywhere to satisfy the slightest craving or hunger pang. The various edible goods in stores are marketed to be enticing yet habitual consumption of many of these processed food products may be deleterious to one’s health. With the rise
of smart phone technology, there is now immediate access to the steady influx of information about diet, disease, and nutrition. Despite this, the public struggles to know what is and isn’t healthy to eat with many continuing to suffer from the ill effects of poor dietary habits. The healthy consumer learns to utilize a combination of nutrition knowledge and food label literacy to negotiate this shifting terrain of information and influx of new products on the marketplace.

Based on new trends in food and nutrition, this thesis endeavored to understand the purchase motivation of health-conscious consumers in Hawaii. It sought to understand what shoppers looked for, be it organic local produce, how they decided what to buy, and whether the product label reinforced their lifestyle identity. Customers were interviewed about their personal motivation, nutrition knowledge, and utilization of food labels during their decision-making process. The label was a critical aspect of this paper and consisted of background graphics, visual imagery, brand design, brief narratives about the company or product, certification logos, and the nutrition facts information panel. It was an important part of the equation, utilized at the juncture before the purchasing decision, and provided validation for the customer’s desired standard of quality. The label gave verification about the ingredients contained, methods of production, and an overall assurance of transparency.

The goal of the research was to ascertain the buyer’s underpinning motivation and whether it was specifically due to information about the product’s health benefits. The significance of studying this area of grocery shopping behavior in Hawaii was due to the limited available studies on this topic in this geographic area. The contributions of the study would add to the body of knowledge about the pursuit of a healthy lifestyle as well
as food label awareness and practical applicability in Hawaii. The research would aid in providing more insight into the mind of the health-conscious grocery shopper, promote positive perceptions about locally produced food, and gain information about how to improve eating habits.

The importance of this study stemmed from the fact that nutritional information and healthy foods are abundant yet good health is not improving in equal measure. Quality of health is the product of choices made over a lifetime. Key assumptions of this research centered on the belief that socioeconomic status and educational background would be the main indicators leading to good health. This was due to the prohibiting factors being: cost as the primary determinant of purchasing decisions, nutritional education, and time affordances to freshly prepare meals. It was assumed that wealth equated with better health because the individual could afford higher quality food.

For the purpose of the research, higher quality food was comprised mainly of an omnivorous diet based on fresh plant-based produce. Further assumptions were that a health-conscious person would generally eat in a manner closer to nature consisting of a higher percentage of fresh nutrient dense vegetables, lean proteins, whole grains, and fruits rather than relying on packaged processed goods. The investigation was undertaken to understand the motivation of the health-conscious grocery shopper in Hawaii who attempts to shop for nutritious foods by interpreting cryptic food labels. No longer required to hunt and gather, contemporary civilization requires its denizens to traverse the grocery store terrain. This is done by understanding product communication methods about ingredients and nutritional facts thereby making the vital decisions that go into deciding what to eat every day.
Chapter II: Literature Review

This review of the current relevant literature will provide a comprehensive analysis of the use of food packaging and label literacy as an information tool. It is important to provide background research for the paper’s exploration on the subject of food labels to frame its contemporary relevance to public health and nutritional awareness. The body of research is vital to understanding this contemporary period of health information proliferation coupled with a revitalized interest in nourishing foods.

There are existing gaps in research about new trends in natural food store industry growth and patronage as well as the burgeoning diversity of food labels facilitated by the organic movement. The organizational pattern of this literature review traces the antecedent research conducted on food labels and an overview of key concepts such as branding, organic labels, genetically modified organisms (GMOs), and local foods. Essential to this study is determining what differentiates those who suffer from poor health due to diet and those who thrive based on their lifestyle choices.

Branding

Brands provide products with identity and give us globally recognizable symbols. Brands are around us all the time, composing our ambient visual background that is unconsciously omnipresent. They make up our perception of who we are as a consumer based on what we buy. Without a brand name to associate with, there is no discernible product identity. Branding is the branch of marketing often used by companies for business purposes to add appeal and value (Jones & Morgan, 2015). According to the American Marketing Association, marketing is the commercial practice of promoting specific products or services to inform consumers in order to sell goods (AMA, 2013).
Marketing is used to manage the visual representation and consumer perception of the branded product (Schroeder, 2010).

Branding is the semiotic technique used by a company to give its products a specifically designed name, logo, and identity through the use of signs and symbols which convey meaning and identity. Semiotics is the academic study of signs and symbols (Littlejohn & Foss, 2011). Corporate logos and global brand names utilize semiotics to assert their presence on the media airwaves and advertising space to promote their product. Semiotics creates meaning for the process of commodity exchange (Schroeder, 2010). Branding is the act of asserting an associative concept by taking ownership of the symbols that companies use. Branding psychologically manipulates the product’s public perception by changing its narrative. This communication method bestows the company with visual recognizability on store shelves. Cayla and Arnould (2008) state that branding is a form of colonial corporate dominance — a manner of staking a claim on the global marketplace.

Branding is the method of psychologically creating a distinctive character persona with which to associate the product (Kotler & Keller, 2016). The brand is the concept that the customer perceives through its colors, logo, and unique design attributes. Branding attaches individuality and a name to a product to convey ownership (Pavlik & McIntosh, 2015). Branding is evidenced by a company presenting its uniquely identifiably labeled products on the marketplace. It is the method of differentiating one consumer good from another. Imagine the impossibility of what to buy when walking through a supermarket with no brands, labels, or logos. Brands give us guidance and choice as well as a reassurance of quality and consistency (Jones & Morgan, 2015). We recognize brands
and develop emotional attachments. Companies in turn depend on public trust to develop brand loyalty. Trust is embodied through reliability, honesty, and authenticity. Authenticity is based on the psychological perception of truth and validity rather than of a tangible attribute (Guignon, 2008). This stems from having intrinsic qualities that people believe in and are seen as authentic and real (Schroeder, 2010).

Authenticity is visually conveyed through the packaging, product design, and the labeling. Consumer packaged goods are promoted through symbols and imagery that utilize and usurp cultural reference points (Schroeder, 2010). The semiotics of visual branding are conveyed through symbols and stories about the origins of the food or farmers who grew it. A current trend incorporates the use of sustainable packaging, recycled materials, and a hand-made craft designed look and feel. Consumers seek out artisanal branded products in order to feel unique, special, or even elevated above the masses (Poole, 2013). The more individualized design elements that are incorporated, the greater the association will be with authenticity and individuality.

Food Product Labeling

When walking through the grocery aisles, many products are offered, however it is not always easy to differentiate from amongst them without examining the packaging. The food label must stick out from a crowded field of similar products, then prompt the customer to take an interest in, analyze, and deem it worthy for purchase (Bublitz & Peracchio, 2015). The term food label for this study will be used to indicate the product brand name, logo design, and nutritional facts including ingredients all regulated by various governmental and nonprofit organizations. Consumer packaged goods and labeling provide a form of visual communication intended to indicate what is contained
inside and distinguish one item from another. This is because there are oftentimes a variety of the same product differing slightly in appearance, cost, and components. Packaging and food labels can help the consumer differentiate between these similar products (Laan, Ridder, Viergever, & Smeets, 2012).

The health-conscious customer uses the label as a visual guide to choose items for purchase. The label helps the product stand out and display useful nutritional information. It is of great importance to health-minded customers to choose nutritious options based on their label analysis. Food labels may gradually help to alleviate the ills of a previously poor diet if based upon a more significant understanding of basic nutrition such as limiting sodium and harmful fat consumption combined with eating more fresh produce (Viola, Bianchi, Croce, & Ceretti, 2016). Nutrition label reading habits tended to have a direct correlation to consumers who consumed a healthier diet (Kreuter, Brennan, Scharff, & Lukwago, 1997). This was facilitated and became more straightforward with the passing of The Nutrition Labeling and Education Act (NLEA) 1990 that provided a consistent government regulated format for food labels, health benefit assertions, and in 1994 the rectangular nutrition facts panel (Keller, Landry, Olson, Velliquette, Burton, & Andrews, 1997).

Informative labels are able to communicate the nutritional attributes and health benefits of food products sought after by health-oriented customers (Laan, Ridder, Viergever, & Smeets, 2012). The label therefore could be equated with a distinction of value—the more detailed and descriptive the labeling, the more value it bestowed upon the product. This is commercially vital because the label of the product has the most intimate interface with the consumer (Wu, 2015). It is the public face of the product.
There are a myriad number of food label designations on the market including: all natural, local, USDA organic, grass-fed, gluten-free, non-GMO, cage-free, fair trade, rainforest alliance certified and many more (Hall, 2014). Labels such as these become value-added products that cater to the conscious consumer who seeks connectivity and information about his/her purchases. Healthy shoppers were more likely to make a purchase based on greater reassurances provided by detailed package information.

Reading ingredient labels is now commonplace amongst an informed and proactive public reflecting the constantly changing marketplace. For the label to be recognized and successful as a communications tool, the consumer must be interested and engaged enough to take an active role in reading it (Cecchini & Warin, 2015). The most prevalent food label users are health-conscious college-educated women with flexible time allotments to spend browsing and perusing different options when selecting their preferred grocery choices (Helfer & Shultz, 2014). The proactive shopper will read an ingredient list to scan for specifically perceived positive or negative ingredients often looking out for corn, soy, or other genetically modified items.

There is a perception that healthier foods cost more and also have greater nutritional benefits. Batte, Hooker, Haab, and Beaverson (2007) write that consumers are willing to spend inordinate amounts of money on specialty labelled foods that appear to confer greater health benefits. The precedent began in the early 1980’s when Kellogg’s collaborated with the National Cancer Institute to spread awareness of a diet low in fat and high in fiber for the prevention of certain types of cancer (Hasler, 2008). The public comes to depend upon food label information for their nutritional education and often naively trusts corporations who viewed the consumer merely as a source of gain. Despite
its profit motive, companies are limited to what they are able to tout on their product packaging.

Beneficial nutrition statements are stringently scrutinized in order to provide consumer validity and safety though the nutrition facts panel as the final arbiter of content (Keller, Landry, Olson, Velliquette, Burton, & Andrews, 1997). Health claim labels on food products are based on strict scientific studies conducted under rigid conditions to ensure quality and accurate results for the consumer’s welfare and well-being (Hasler, 2008). In the interest of safety and nutrition, people demand the right to know what they are consuming, therefore FDA claims of health benefits are strictly regulated and thoroughly tested (Hasler, 2008). Even the American Heart Association became involved in the marketplace by promoting certain products with their seal of approval for foods beneficial to the heart in 1995 (Nestle & Ludwig 2010).

While people are becoming increasingly more aware and engaged in their food choices, they are also becoming more skeptical about boastful nutrition claims (Keller, Landry, Olson, Velliquette, Burton, & Andrews, 1997). Nestle and Ludwig (2010) alert the consumer public to the fact that there has never before been a time with such an unprecedented number of food labels publicizing health claims and positive accolades appearing on store shelves. Even the label “all natural” does not adhere to stringent guidelines and may be used despite the product actually containing artificial ingredients (Walters & Long, 2012). Anker, Sandøe, Kamin, and Kappel (2011) argue that by branding a specific commercial food as healthy, biases are created that are not necessarily always backed up by scientific research. Basic nutrition knowledge is helpful, as those
less informed or motivated are more likely to be deceived by front of product labels and promotional claims (Keller, Landry, Olson, Velliquette, Burton, & Andrews, 1997).

Labels can change over time to reflect current research findings. There are recent inclusions to the Nutrition Facts label regarding vitamins and nutrients shown to be deficient amongst the general population (Voelker, 2016). The Nutrition Facts panel is updated periodically to reflect current scientific study findings and developments such as including a recent warning about added sugars (Voelker, 2016). What was once perceived as negative can be altered; this is based on discoveries about specific types of fat that led the FDA to change its caloric listing to address the fact that there are both detrimental and beneficial types of fat (Voelker, 2016).

Different strategies may be drawn from around the world as global use of nutritional labeling varies from country to country and may be informative or helpful. The Nutri-Score food industry labeling strategy from France is an efficient option to streamline the infographic by utilizing letters and colors highlighting the positive and negative attributes of the product (Nestle, 2018). Another system is the traffic light labeling scheme consisting of green (desirable), yellow (neutral), and red (undesirable) colors which has proven to be the most effective system in Europe (Cecchini & Warin, 2015). Viola, Bianchi, Croce and Ceretti (2016) emphasize the need to disseminate food labeling more widely while also creating a clearer more coherent design for ease of comprehension.

Food labels are capable of initiating change in people’s purchasing decisions if the label is clearly understood (Cecchini & Warin, 2015). While food labeling has become crucial for many who want transparency, the label is not always clearly
understood. The customer should ideally be able to develop a better perception about the item by utilizing labels as an interpreter of food ingredients and nutritional attributes. Food label use by a less-educated demographic focuses on negative attributes of the nutrition facts panel such as high fat or sodium content rather than positive beneficial components (Keller, Landry, Olson, Velliquette, Burton, & Andrews, 1997).

The label may be misinterpreted, misunderstood, or unheeded as people simply follow their preconceived ideas. Food labels may be disregarded due to time constraints or impulsivity; ignoring the label completely may simply be due to the desire for an immediate sweet or savory snack (Viola, Bianchi, Croce, & Ceretti, 2016). The back of label nutritional information is not easy to decipher, therefore it is confusing to many shoppers. Though well-intentioned, the nutrition facts panel located on the back of food products is found to obfuscate the public’s decision making process (Helfer & Shultz, 2014). While the nutrition panel indicates recommended daily allowances (RDA) for certain vitamins and minerals, presenting this information in a numeric table format is not easily discernible by shoppers (Viola, Bianchi, Croce, & Ceretti, 2016).

Those who are able to choose to make a statement with their dollars by purchasing products that they believe in. Brown, Kozinets, and Sherry (2003) elaborate upon how old ideas become new again, playing upon the urban denizen’s nostalgia for authentic agrarian experiences and a renewed interest in nature. There is a significant push from both the consumer and producer sides of the market that an engaged educated public is seeking a more authentic relationship with food, where it comes from, and its effect on the environment. Locally sourced food indicates that the product is procured, purchased, and consumed within a relatively close radius of its growth. Labeling the food
item as being organic or from a local farm adds significant value to the product in the mind of the discerning informed shopper (Curtis, 2014).

The label is seen as an abstract representation of the product which facilitates detailed communication to the consumer (Schroeder, 2010). Customers have become increasingly more aware about product information during the internet age, therefore more need and desire for business transparency through label authenticity is demanded. People want to know where their products come from — which farm grows their fruit and what type of feed the cows ate. Armed with this knowledge, the grocery shopper will feel more proactive in making purchases with confidence (Viola, Bianchi, Croce, & Ceretti, 2016). Discerning consumers believe that the more clarity and information provided, the better and healthier the food will be and the more empowered they will feel.

While information and freedom of choice are empowering, there are multiple layers of food system obfuscation that the public must parse through for true understanding. Halweil (2005) reveals that grocery stores give us the perception of a vast range of variety yet the diversity of brand options belies the fact that most are owned by multinational conglomerate corporations. This is due to an effort to grasp a greater hold on the growing natural foods market, large corporations such as Kellogg, Heinz, General Mills, and Dole have strategically acquired smaller organic companies while retaining their original name and label thereby maintaining an outward appearance of authenticity (Janoff, 2001). Despite the fact that labels may help shoppers make more informed decisions food corporations vehemently oppose any measures to provide warning labels that would affect sales on their processed foods (Nestle, 2018).
**Nutrition & Healthy Lifestyle**

While health consciousness and interest in a healthy lifestyle have been mankind’s primary concern for millennia, there has been a distinctive shift in the 21st century towards a new food phenomenon. Specialized food products once only the purview of natural foods stores, specialty grocers, or farmer's markets are now available in the mainstream retail market (Artur, 2017). Natural wholesome foods are a cornerstone of a healthy diet. Good health is the state of living well in body, mind in society without disease (Sartorius, 2006). A person in good health has the quality of being in a state of physiological equilibrium. It is often taken for granted until an affliction occurs. Drewnowski, Aggarwal, Hurvitz, Monsivais and Moudon (2012) indicate that poor health is often associated with a lack of access to nutritionally beneficial food sources. A great deal of adverse health conditions and maladies stem from a poor diet including high blood pressure, heart disease, diabetes, and obesity (Oatman, 2017).

Awareness of food and nutrition begins with one’s upbringing and cultural background. This perception of what health is begins early in life. The earlier that children are introduced to ideas of good health and exposed to nutritious foods, the more likely they will be to adopt healthy practices later in life and into adulthood (Cooke, 2007). Recognizing what foods constitute a beneficial diet is the first step to creating a health-conscious lifestyle (Kreuter, Brennan, Scharff & Lukwago, 1997).

Due to a rise in socioeconomic status amongst industrialized affluent nations, a schism has occurred dividing demographics along class and food quality lines. While food has become cheaper and more readily available due to mass production and industrialized processes, its quality has diminished. Nestle (2018) warns of the dangers of
heavily processed foods that become habit forming and are targeted towards children. Cooke (2007) has researched the benefits for children of combining vegetable exposure with information about nutritional benefits that resulted in a greater acceptance and willingness to eat vegetables in the future.

It is difficult to eat well and healthily if financial resources are limited because processed, packaged, and fast foods are cheaper and fresh healthy produce is often out of reach (Oatman, 2017). It is easy to consume a significant amount of inexpensive empty calories. There is a major value distinction between a food’s caloric content compared to its nutrient density. Appelhans et al. (2012) found that a lower income was correlated with the purchase of lower nutrient dense higher caloric foods. Stran and Knol (2011) note that participants in the supplemental nutrition assistance program (SNAP) tended to have lower rates of food label awareness and utilization.

People’s eating habits have changed over time as the food industry has evolved (Cecchini & Warin, 2015). Macias (2008) notes that there are limited resources of nutritional information for the public, thereby creating a differentiated class system of socioeconomic health based on who can afford it. The effects of caloric dense nutritionally deficient eating habits result in health conditions such as heart disease, obesity, and diabetes among other significant life-threatening maladies. These conditions are then treated by a medical system focused on costly procedures and pharmaceutical drugs instead of nutritional intervention (Oatman, 2017).

There are many barriers to a good diet through nutritional awareness such as convenience, cost, and availability. Oftentimes food familiarity, taste, and lifestyle habits trump health considerations. Ill-informed and rash decisions occur when individuals are
presented with pictures of food that appeal more to flavor and cravings than nutritional concerns (Helfer & Shultz, 2014). Many people absentmindedly simply eat what is readily available and affordable. People also dine at restaurants for pleasure rather than purely out of health concerns. Macias (2008) reveals that local organic food is often out of the reach of many due not only to its expense but also the time it takes to prepare fresh foods.

The philosophical idea of a health-conscious lifestyle is characterized by consuming healthy foods often living in closer congruence with the principles of nature. By these principles, individuals create an identity based on their consumer behavior and participation in this market environment (Wagner, 1997). The demographic living in this manner are well educated and financially comfortable, falling somewhere between the baby boomer and millennial generations (Spethmann, 1993). They are the type of people who frequent farmer’s markets. Supporting local farms provides a narrative closer to nature and the food source that isn’t experienced at the supermarket (Cooper, 2007). In the industrialized modern societies, this type of lifestyle based on nutritious foods has taken on a nostalgic agrarian fascination with an emphasis on connecting back with nature (Paadberg, 2010).

A person’s diet is one of the most important and manageable aspects of one’s life. Motivated individuals pore over product labels for validation to bolster their beliefs and reinforce their philosophy. This achieves what Aggarwal et al (2014) describes as being the positive correlation between eating nutritious foods and becoming healthier irrespective of socioeconomic status as the sole indicator of food affordability. Achieving good health may be as straightforward as eating foods in their natural state without
significant alteration or degradation thereby retaining key nutrients that benefit the body (Nestle & Ludwig, 2010).

The consumer rational and motivation is about buying into and participating in the healthy lifestyle philosophy. Motivation is the reason action is taken to fulfill a need or desire (Wagner, 1997). Almost more significant than purchasing power alone is the consumer’s attitude toward shopping in an inexpensive yet nutritionally efficient manner (Aggarwal et al., 2014). This can be accomplished by eating close to nature and being a vigilant reader of ingredients on packaged foods which can go far in making people healthier (Nestle & Ludwig, 2010).

People associate their identity with the lifestyle they practice as though a personal brand. This good health oriented lifestyle is defined by the philosophy of purchasing and consuming mainly high quality fresh often organic products (Paul & Rana, 2012). Organic shoppers tend to be affluent educated urban dwellers located in predominantly metropolitan areas (Janoff, 2001). They frequent natural food stores that focus primarily on higher quality often organic or local food products and specialty items.

The organic consumer takes an active role in creating his/her desired lifestyle. The ardent follower of this manner of living is often in a wealthier income bracket and has a committed interest in personal as well as environmental health and sustainability issues (Curtis, 2014). Arvola et al., (2008) opines that for actively engaged consumers, choosing organic is the responsible choice that then makes them feel good about their grocery shopping decisions.
Purchasing Decision

Once halfway down the aisle, the customer stops to look at breakfast cereal. There are a myriad number of options to choose from, all with different designs, flavors, and labels to read. Shoppers face a barrage of products, information, and choices about what to purchase including healthy or unhealthy options. Food labels are the communication link between the item and the consumer, becoming a critical juncture to facilitate decision making and influence purchase motivation. The label becomes the recognized visual representation of the product (Viola, Bianchi, Croce & Ceretti, 2016).

Just as one can participate in online or social media activist campaigns, companies market themselves through labels as a means to promote and certain causes. Paadberg (2010) writes that contemporary health-minded individuals seek to use their purchasing power towards altruistic goals. The organic label designation is imbued with intangible moral yet highly marketable qualities that target a consumer base eager to affect change in the world through the convenience of their purchases (Massey, Ocass, & Otahal, 2018).

Through the proper use of food labels, the public may make healthier grocery shopping decisions thereby addressing the ill effects of a poor diet (Helfer & Shultz, 2014). Once exposed and familiarized with a food label, people are more likely to choose healthier options (Cecchini & Warin, 2015). The same is true for organic familiarity as preferences for buying certain organic items leads to repeat purchases of the same products (Massey, Ocass, & Otahal, 2018). While health-conscious individuals are making better food choices, it all comes at a cost; higher quality nearly always equates
with higher price. In fact, there is such a demand for organically produced local food that people willingly spend more for what they perceive as more desirable (Carter, 2008).

While there is a growing interest in local and organic food, Pampel, Krueger, and Denney (2010) describe the relationship between socioeconomic status and personal health. The more they learn about, the more they want to spend for higher quality foods. Consumers are becoming more discerning than ever before and want to know where their food comes from. Cooper (2007) implores that the more a person knows about their food, the more they will care and realize that they wield a great deal of purchasing power when deciding to buy local.

Perhaps this came about as a reaction against what Andrivet (2016) describes as the rise of industrial agriculture — processed, packaged, and fast foods that eventually began to lose favor with the middle classes who could afford healthier fare. The discerning public has even become skeptical about buying processed and packaged foods labeled organic because simple organic fruits and vegetables seem more comprehensively produced (Arvola et al., 2008). For sustained and routine purchasing of organic food to occur, the key components are how fresh the product is and how nutritious it is perceived to be (Massey, Ocass, & Otahal, 2018).

Buying organic also confers a degree of self-aggrandizement to the buyer who feels that he or she is doing what is best for himself/herself as well as for the environment (Kareklas, Carlson, & Muehling, 2014). Paadberg (2010) emphasizes that well-intentioned consumers believe that they can help to address global issues simply through their conscious shopping. Arvola et al., (2008) goes on to state that buying organic tends to lend itself to the customer feeling a morally congratulatory sentiment.
While making a purchase often comes seemingly without thought, there is a great deal of complexity behind that decision. Due to a general lack of self-awareness, Chandon, Morwitz, and Reinartz, (2005) report that many people themselves are not able to provide a testimony of what analysis they used to make a purchase. When buying food to satisfy a craving, there is little to no attention paid to the back of package nutrition information and only a cursory front of package glance (Turner, Skubisz, Pandya, Silverman, & Austin, 2014).

On the other hand, buying organic food involves more deliberation and expense. The most significant issues facing the greater proliferation of organic food are ease of access, awareness, interest, and most significantly cost (Brantsæter, Ydersbond, Hoppin, Haugen, & Meltzer, 2017). This is due to the price of production, the smaller scale of the organic industry, and the market’s ability to charge a higher price due to consumer’s willingness to pay for the perception of a superior food item (Guthman, 1998). The more supplemental information accompanies an organic label, the higher likelihood the customer will trust and therefore make a purchase (Batte et al., 2007).

The customer is influenced by background nutritional knowledge guiding him/her about what information to look for while shopping. The more engaged and aware a shopper is, the more he/she will scrutinize the product label for detailed information while the less informed shopper will be more susceptible to generalized information (Walters & Long, 2012). The more motivation and intention to shop healthfully, the more time and scrutiny would be paid to the nutrition facts panel and food labels rather than just the front of package marketing (Turner et al., 2014).
The conscious consumer has developed a base knowledge of nutrition and is skeptical of outlandish claims about exhuberent health benefits (Keller, Landry, Olson, Velliquette, Burton, & Andrews, 1997). A purchase decision therefore is more likely to occur if the purported benefit also indicates specifically which constituent vitamin, mineral, or nutrient it is derived from (Hasler, 2008). Touting nutritional benefits on food labels does create an overall marked increase in consumer purchase decisions (Nestle & Ludwig, 2010). Organic labels are perceived as beneficial so drawing new shoppers to purchase organic came down more to accessibility and convenience rather than the barrier of higher cost (Massey, Ocass, & Otahal, 2018).

The food label can be a helpful guide if the customer knows what to look for. Savvy shoppers are familiar with specific vitamins, minerals, and nutrients that can potentially prevent disease (Keller, Landry, Olson, Velliquette, Burton & Andrews, 1997). Cecchini and Warin (2015) write that two thirds of the public refer to the product label before making their decision whether or not to buy. If the public became more aware of basic nutritional facts, this could allow them to efficiently navigate nutritional information and food labels (Viola, Bianchi, Croce & Ceretti, 2016).

Motivation is the driving force behind a shopper’s visit to the store and will predict what he/she will purchase. The more motivated a consumer is, the more he/she will patiently analyze the health claims, ingredient list, and nutrition information on the label (Keller, Landry, Olson, Velliquette, Burton, & Andrews, 1997). Stran and Knol (2011) write that when deciding what to buy, a higher percentage of those who utilized labels were younger health-conscious educated consumers with a positive nutritional outlook and active weight management strategy. Arvola et al., (2008) contends that the
incentive for purchasing organic products stems from a belief of making a positive contribution to oneself and the planet. More so than concerns of cost, taste, or freshness organic shoppers showed the highest level of motivation based on a belief in the validity of their buying practices due to the perceived overall health benefits for themselves and the environment (Massey, Ocass, & Otahal, 2018).

**The Organic Label**

The origins of organic agriculture have deep roots in mankind’s age-old agrarian past. Organic farming has existed since the beginnings of man’s cultivation of the land and is the essential process of growing sustenance from the earth. The organic label indicates naturally grown agriculture. The basic premise of organic is essentially a negation of what constitutes standard industrial agriculture — no pesticides, herbicides, or genetic modification is permitted (Massey, Ocass, & Otahal, 2018). The reason that the organic designation has come into existence is because industrial agriculture necessitated a distinction between what was and what wasn’t industrialized. The organic label is a cornerstone for those differentiating amongst nutritious and safe foods to purchase. The green and white circular USDA organic seal came into existence in 2002.

An organic farm grows its produce without the use of synthetic herbicides, pesticides, or fertilizers. The Organic Foods Production Act of 1990 and the United States Department of Agriculture (USDA) are responsible for certifying a farm organic and bestowing the USDA Organic seal for its products (Traher, 2010). Organic farms operate based on a philosophy perpetuated by the health-conscious lifestyle. Organic agriculture is perceived as wholesome and ecologically beneficial by the public (Arvola et al., 2008). The contemporary organic farm model can be seen as the perpetuation and
outgrowth of the early 1970s back to nature movement that had begun as a way of
revitalizing soil fertility and as a reaction against industrialized agriculture (Guthman, 1998).

Through a process of renaming and rebranding, what was once simply known as
an agricultural farm has become known an organic farm. Organic farming came about as
a reaction against the industrialization of agriculture yet the scale of production has
increased exponentially as demand for organic foods rose, slated to become an over $160
billion industry by 2019 (Artur, 2017). Organic is becoming big business and contrary to
popular belief, Muller (2017) contends that organic agriculture is capable of feeding
populations on a global scale. While industrial food production has vastly streamlined
and mechanized its complex processes, this has also led to concerns about the well-being
of the environment and the effects on human health. Paul and Rana (2012) write that
standards of living have gone up around the world yet so have many markers of disease;
many attribute this to a rise in the consumption of industrialized manufactured food.

Organic farms operate to grow quality produce sustainably often using traditional
methods and involving the local community. The food quality is higher, nutrients richer,
and the people are empowered with local jobs that financially sustains the community
(Halweil, 2005). Studies show that organic agriculture is healthier both for the public and
environment (Paul & Rana, 2012). Janoff (2001) asserts that consumers purchasing
organic products are savvy; seeing beyond the brand names and are reading deep into the
labels, nutritional fact sheets, and sourcing information. The public is motivated to buy
organic products due to the diminished amount of chemical residue as well as a belief
that the produce is fresher, tastier, and more nutrient dense than conventionally grown crops (Zimmerman, 1999).

Brand identity is significant for organic food because that sets it apart from conventionally produced food. The green and white circular USDA organic seal is the face of the organic industry. Products may be certified by a number of agencies and organizations including the USDA, Quality Assurance International (QAI), California Certified Organic Farmers, and Oregon Tilth. Organic labelled products are growing in recognition and sought after by many consumers who use the label as assurance that they are buying certified organic food. Janssen and Hamm (2012) found that customers both preferred and were willing to pay more for products that were specifically labelled organic as opposed to organic products that were not labelled. While Janoff (2001) writes that an increasing segment of the American population is buying and becoming increasingly aware of organic food, this consumer base struggles to actually identify a specific organic company or product name. Instead of brand loyalty as with conventional grocery products, consumers have developed organic label loyalty.

The organic label has nearly become a brand unto itself. It is now found ubiquitously on products throughout many grocery stores, convenience stores, and even vending machines. As most organic food companies are small in scale, their main method of consumer interaction and recognition is found directly on store shelves (Janoff, 2001). Many shoppers avidly seek out or buy exclusively food items with the organic label with the belief that it confers health validity and benefits. Organic labeled products have seen double digit growth since first becoming available in the 1990s (Artur, 2017). The
For the truly avid health minded shopper, particular brands themselves don’t always matter as much as labels do. If a shopper is looking for an organic product, that label alone will supersede any consideration of brand choice. The organic label conveys a tangible notion of a higher quality guarantee available to all. Janoff (2001) writes that consumers don’t necessarily shop for specific brands that are organic but rather shop for any product falling under the overall organic category. It isn’t so much a matter of being loyal to a precise brand but rather to the organic label itself. Shoppers aren’t always seeking organic products but rather more of the general healthy lifestyle benefits that the organic symbol conveys.

Based on the dramatic rise of organic produce in the United States, farms are scrambling to meet the stringent USDA requirements to become certified organic (Traher, 2010). This is due to the growing interest in the trend that has taken off with one third of US shoppers presently purchasing organic items despite not fully understanding exactly what the term means (Janoff, 2001). Organic products depend heavily on labels for communication insuring that the product is indeed what it purports to be. Therefore pursuing an organic lifestyle becomes semantic — one seeks out the label for information in order to determine whether it is congruent with one’s preferred lifestyle choices.

Though organic food is more expensive to purchase, it is also becoming more readily available. Organic products are found not only in alternative and natural food stores but increasingly in traditional supermarkets (Janoff, 2001). Massey, Ocass, and Otahal (2018) address the forces driving sales in the mainstream marketplace as
stemming from the fact that brand organic is held in high esteem and even higher in quality perception than conventional food. The majority of these organic customers are savvy grocery shoppers who purchase it due to the apparent nutritional benefits.

Socioeconomic status is often seen as a limiting factor in regards to purchasing organic food. It is often shown though that fresh organic produce can be purchased for only marginally more than conventional produce based on one’s level of motivation and intention. Nie and Zepeda (2011) describe that purchasing local organic foods is not merely about consuming calories but rather espousing a proactive optimism toward a better future. Arvola et al., (2008) heralds the elevated ethical attitude ecologically and societally resulting from the positive association with organic products.

*Locally-Sourced Food Supply in Hawaii*

The geographic isolation of Hawaii coupled with its former status as a US territory and military outpost have left a lasting legacy of food dependency. The food supply in Hawaii is heavily reliant on imported goods and estimates are that up to 85-90% of food products in Hawaii originate from the mainland US (“Increased Food Security,” 2012). That being said, the food supply in Hawaii is significantly vulnerable to any disruption in regular shipments. There is a need as noted by Janssen and Hamm (2012) to inform consumers where their food originates from and the urgency to support locally sourced agriculture. Without information about the critical nature of food sourcing, consumers will continue make purchases without greater awareness about the tenuous food system.

The Hawaii state standards organic agricultural standards are regulated by the United States Department of Agriculture (USDA). There is a local non-profit
membership organization called the Hawaii Organic Farmers Association (HOFA) that facilitates communication to governmental bodies and provides resources and information about organic farming (HOFA Certification Information, 2019). It was established in September 1993 due to the Organic Food Production Act (OFPA) of 1990 established by the federal government (“Increased Food Security,” 2012). HOFA assists farmers and educational institutions with endeavors relating to organic and sustainable farming. HOFA advises local farmers in Hawaii to receive the International Certification Services (ICS) for certification. ICS assists with local representatives and enlists HOFA employees. The larger governmental body of the National Organic Program (NOP) establishes the regulatory procedures for the methods and certifications of all USDA labelled organic items. This occurs with insight from the National Organic Standards Board as well as from public input.

Through social media and the spread of online information, people in Hawaii are becoming increasingly more interested in environmental issues, organic farming, and healthier lifestyles. There is a perpetual simmering undercurrent of inherent native belief in the interrelationship existing between mankind and the environment (Wagner, 1997). Buying local is another way to directly connect with one’s food source in a tangible manner (Cooper, 2007). Yet there are challenges to reaching the majority of the population. While local organic produce exists abundantly in Hawaii, Suiyanata (2002) indicates that large supermarkets prefer to contract with California organic distributors due to their greater reliability and lower cost. Local organic produce does tend to also be costlier to the consumer. To buy local and organic costs more and can be more inconvenient therefore significant barriers exist to its proliferation except to those who
are willing to make the effort. Branding local is critical to inform the customer that there is a choice which would support the community farms and provide a connection to his/her food source (Cooper, 2007).

While buying local produce seems like a relatively straightforward proposition in most places, the infrastructure and demand is often simply too high to make it an immediate possibility (Blake, Mellor, & Crane, 2010). Beirne (2007) notes the growing trend that most consumers simply want more transparency about their food is nearly an impossible demand from an industrial agriculture corporation opaque in its sourcing. Transparency is far more feasible from a local farm. Therefore the label of local is meaningful to customers invested in the sustainability of their communities. With a growing awareness of sustainability issues, locally sourced produce is becoming more desirable for its freshness, value, and community support (Cooper, 2007). Bearing in mind cost and convenience being decisive factors, food producers in Hawaii have to promote themselves through their brand and product label as locally-sourced in order to be visible amidst the competition.

While the economy in Hawaii is predominantly dependent on the tourism industry, there are local farms that provide organic agriculture and employment for the local community. There are numerous quality farms on Oahu such as Ma‘o Organic Farms, Kahumana Organic Farm, Mahina Pua Farm, Mohala Farms, and many more around the island. Organic farms thereby can become empowering to the community health and economy by linking their agricultural work with a quality commodity for the public. Willing (2015) writes that a renewed agricultural industry in Hawaii with an
emphasis on beyond organic food could possibly create much needed non-tourism related jobs, diversify the economy, and provide local food for a growing population.

**GMOs**

Genetically modified organisms (GMOs) have recently become a major issue in the food industry. Determining what foods are or are not genetically modified is impossible based on visual analysis alone therefore GMO labeling has become a significant subject in recent years. Hawaii is one of the epicenters of the debate about GMOs due to its favorable climate and location for agricultural and biotechnology companies to operate. Implicating Hawaii directly in the midst of the GMO experiment was the 1998 creation of a genetically modified “rainbow papaya” in response to the destructive papaya ringspot virus (Jiao, Deng, Li, Zhang, & Cai, 2010). At the forefront of agriculture in Hawaii is the strong presence of the agrochemical company Monsanto. Due to Hawaii’s uniquely remote and fragile ecosystem, it was argued that planting experimental GMOs here would threaten the island’s environmental equilibrium (Tai, 2012). Besides possible effects to the agricultural industry, consumers became concerned about the effects of consuming GMO foods on their own health. Demand for clear labeling of ingredients stems from the fact that consumers feel that they have a right to know what they are eating.

Contentious debate erupted over the demands to label GMOs whereas corporations asserted that the extra labeling cost would place an undue burden on consumers. A segment of consumers asserted that GMO foods were not fully tested or proven safe therefore the public had a right to know what was in their food. Some corporations have complied and included a small piece of text under the ingredient list on
the back of the product that states “partially produced with genetic engineering”. Another method of addressing this labeling issue is the use of the non-GMO label that consists of a white bordered rectangle with the graphic of an orange butterfly landing on a blade of grass with the text “NON GMO Project VERIFIED nongmoproject.org” in a navy blue box on the right side and “VERIFIED” in a green text box on the bottom. Customers will browse through labels to look for certain ingredients that are often GMOs like corn and soy. Ardent health-conscious consumers will do all in their power to get away from purchasing or consuming GMO products due to the growing negative stigma associated with that designation. Buying non-GMO project verified or organic labelled foods are the most common methods of avoiding GMOs.

**Summary**

The literature addresses key issues about food labels and the consumers who use them. There are many factors involved including product nutritional information and customer motivation. The main consistencies in the research comprise a compositional sketch of the health-conscious consumer as educated, engaged, and environmentally conscious. Divergences occur addressing the whether the greater importance was education or socioeconomic status as being more critical to creating a health-conscious lifestyle. While nutritious food generally costs more and takes more time to prepare, more educated yet less wealthy individuals found creative ways to eat nutritiously. Research was not found on wealthier individuals who could afford to but chose not to eat high quality healthy food. The literature highlights a proliferation of information on the public’s awareness coupled with the increasing availability of organic foods. The factors
involved including nutritional awareness, financial concerns, cost and access to quality produce, time constraints, and personal attributes unique to each individual.

There is much to be researched on this topic to better understand the dialectic about the significance of food labels. A key component is studying the customer’s intention to live a healthy lifestyle and their methods for accomplishing that. Gaps in the literature are comprised of studying the health-conscious demographic in Hawaii. Areas for further research consist of better understanding consumer motivations and investigating the intentional promotion of health as the trendy purview of the upper class. Analyzing the motivations of conspicuous displays of health consciousness compared to subtle health conscious practices. Looking at specific food labels targeting the health-conscious consumer and whether they are more successful in selling their product.

The overall perspective on the topic is that further research about healthy citizens will lead to understanding about their background and motivation. This information can then be applied to the public and economically disadvantaged populations who may not have access to the necessary resources to eat wholesomely. It is important to better understand how such a customer views food labels as effective or beneficial, and whether the label alone can be a cause for change and improvement in one’s diet.
Chapter III: Research Questions

After tracing the various components comprising the body of literature on food label research, it was imperative to understand the contextual inquiry driving this paper. With growing consumer demand and affluence, the food industry has evolved in complexity. Foods of all kinds from around the world are available in modern grocery stores all year round. With readily available fresh foods and health information online, the public was becoming more aware of what constituted good nutrition. As more natural food stores have opened up in Hawaii, consumers have more choice than ever and are able to be more discerning in their grocery shopping habits.

The purpose of this study was to examine the grocery shopping methodology and mindset of health-conscious in Honolulu. This was done through an analysis of how branding, packaging, and labeling information were utilized by the consumer motivated by health and nutrition. The research sought to better understand the consumer’s beliefs, perceptions, behavior, and motivation behind purchasing habits. This study was relevant to people’s daily lives, health, and the local economic marketplace. Important questions must be asked such as: why do people make the decisions that they do, how do they perceive their health status, and where do they receive information about nutrition?

RQ1: What role does the food product label play for health-conscious consumers in Hawaii towards making their purchasing decision?

RQ2: Does the food product label reinforce the personal belief of being a health-conscious consumer?
Definition of Terms

Product label — is a broad term that indicates the various informational seals, markers, and designations located on the front of package. The government regulated nutritional facts panel is universally formatted and is located on the back of the package.

Purchasing decision — after the browsing, selecting, deliberating period is the conclusive act of buying. This is based upon the fact that one’s intention is the strongest indicator of eventual action (Arvola et al., 2008)

Health-conscious consumer — is a person who shops for nutritional foods such as fresh organic produce and is actively engaged making informed decisions in the grocery items purchased.

Healthy lifestyle — is defined generally as living in a proactive manner prioritizing one’s physical and mental well-being through exercise and nutrition.

Reinforcing a purchasing decision — is the notion of a product validating the customer’s feelings towards having bought it.
Chapter IV: Methodology

This chapter will examine the methodology employed to conduct research on food label literacy and engagement. This section describes how the data was collected, the participants were selected, and the data was analyzed. Interviews, focus groups, and informal participant observations were used to gather information about nutrition awareness and grocery shopping habits. This information was then used to create three distinct health category designations that could be applied as a broad overlay to each individual’s unique attitude, perception, and philosophy towards health.

Data Collection

During grocery shopping the food label provides the connection between the product and the consumer. This is facilitated through text and visual image communication. The purpose of this research study was to ascertain determining factors involved in consumer purchase motivation. These were based upon which product labels were most informative, appealing, and convincing to the customer. The methodology and design utilized a mixed methods qualitative research approach comprised of focus groups and interviews for the purpose of this investigation (Barbour, 2011). The dual format was chosen due to the fact that both methods had valuable and unique attributes to offer. Both research methods were complimentary and in the final analysis, the data from both methods were incorporated together.

Participant Selection Process

In order to facilitate proper data collection for the focus groups and interviews, research subjects were necessary to generate original content. Participants were selected through purposive sampling. This was because people of different ages from different
backgrounds were sought in order to draw information from a heterogeneous demographic. They were chosen referentially through their connection to the researcher and subsequent participant referrals which established connections to their acquaintances. The sample selection was based on collecting a variety of data from subjects who were adult residents of Hawaii. The research sample selection process did not purposefully choose a specific demographic though the interests of health-conscious citizens were aligned with the focus of this study.

**Focus Group**

The focus group research method provided a fertile forum for generating user input and feedback. The focus group is ideal for a larger group gathering to discuss, converse, and stimulate ideas with one another. The focus group agenda consisted of ten open-ended questions along with product label analysis and comparison. Its duration was approximately ninety to one hundred twenty minutes. There were four participants per focus group session, considered a minigroup, that was small yet practical for thorough engagement and participation (Barbour, 2011). Minigroups were considered ideal due to their manageable size, organizational practicality, and opportunity for all involved to speak at length and interact with one another (Greenbaum, 1998). The minigroup functioned similarly to a full-sized focus group in a more intimate setting allowing for more trust and detailed rich content to be generated (Greenbaum 1998). The focus group was conducted by a facilitator who offered a brief background on the topic, outlined the purpose for the study, showed a series of products with labels, then asked the participants questions about their perception of health identity, food label use, and lifestyle practices (see Appendix C for focus group questions).
For this research, there were two mini focus groups conducted consisting of four participants each plus the moderator to evaluate the use and effectiveness of food labels during grocery shopping. The focus groups were audio-recorded and later transcribed in order to analyze the responses. The first focus group was conducted at the University of Hawaii School of Communications conference room. It entailed a slide show and product sampling as well as documentation of how people reacted to being shown the front and back of the labels. The slide show incorporated basic information introducing the topic, research questions, and visual images of food products. The products themselves were brought to the meeting for hands-on interaction, viewing, and comparison. The second focus group was conducted at the Honolulu Community College campus with four faculty members from the Department of Continuing Education. The format was a round table discussion with questions posed by the facilitator and answered by various participants based on their engagement initiative. Sample products for the second focus group consisted of a variety of energy and protein bars from various brands procured from Down to Earth.

**Interview**

The interview was a complimentary method for data collection to be used in adjunct to the focus group. The format was semi-structured following along a main narrative topic (Leedy & Ormrod, 2005). The interviews were recorded and conducted in an informal and conversational manner. The open-ended interview questions were broad in scope yet tied together to a central theme (Creswell, 2018). This provided the interviewee with the opportunity to expound and elaborate upon answers rather than simply responding in short replies. The in-person interviews took place in a variety of
settings such as cafes and public meeting spaces where distractions and noise were minimal. To conduct a one-on-one interview successfully the participant must be willing to open up and share their thoughts in a setting conducive to this type of interpersonal exchange (Creswell, 2018). While the interview had structured guidelines and predetermined questions, when compelling information was provided or alluded to, flexibility was granted in order to follow the tangential train of thought (Creswell, 2018).

The interview consisted of ten people being asked twelve questions based on health, nutrition knowledge, and grocery shopping (see Appendix B for interview questions). They lasted approximately forty-five to sixty minutes. The interview included questions such as: “Can you walk me through a routine visit to the grocery store?” “Can you describe what good health means to you? “How empowered do you feel to make a change in your health? “How much do you utilize food labels when making a purchase? “How does the food label affect your personal belief of living a healthy or unhealthy lifestyle?” “Use of food labels – How effective is a label design in gaining your attention?” If necessary, the participant was asked if follow-up questions could be posed either by phone or email for clarification of answers or further elaboration about vague responses.

Data Analysis

The method of data analysis was through the organized categorization of three health groups based on common themes and recurrent responses. Once the focus group and interview research was conducted, the data was then analyzed. Thematic analytic/analysis were used to organize the focus group and interview responses. Themes
that became apparent were then grouped together for organization and analysis in preparation for the results to be collated into the final writeup.

The data consisted of focus group and interview transcripts as well as notes from the interactions with the participants. During data analysis it was important to be aware that some information presented could take the research in a different direction in which case incorporating the new data may lead to new insights (Creswell, 2018). Once consistent themes emerged, they were grouped together in designated categories of most health-conscious, moderately health-conscious, and minimally health-conscious. The research questions were addressed providing the investigator with sound data and a clear picture of how different consumers used food labels. Connections were established through repeated responses from participants. Categories emerged from the data that were coded to ideas such as: purchasing habits, product preferences, interest and curiosity in trying new products, and willingness to spend more on organic items.
Chapter V: Results

This chapter presents the findings of the study on food label use and lifestyle creation. It is comprised of the following sections: participant demographic information, participant health categories, and research questions addressed. The research project studied food label literacy, grocery shopping habits, and healthy lifestyles amongst residents of Hawaii. It investigated the participant’s nutritional knowledge and perception of personal health. The study research focused on individual’s interaction and relationship with food labels as a means of information collection about the food they bought and consumed.

There were a variety of results based on the preferences and habits of each individual. There was a consistency in people’s attitudes and behavior — those who choose to be healthy purchased healthier food with greater conscientiousness and awareness while unhealthier individuals generally ate for enjoyment and convenience. A sentiment expressed across the board by all participants was the idea that they alone controlled their actions through personal choice. Ten individuals were interviewed and two minifocus groups were conducted consisting of four participants each. The spectrum of lifestyles ranged from: very healthy (most health-conscious), relatively healthy (moderately health-conscious), or least healthy (minimally health-conscious). The consumer’s grocery shopping purchasing habits provided a clear reflection of their personal beliefs.

In addition to the interview and focus groups, there was one participant observation conducted as an adjunct to the interview. The participant observation involved the researcher accompanying the shopper to conduct field research at the
Foodland Farms grocery store at Ala Moana Center. The respondent first checked what was on sale to determine what to get beforehand. She was open to new options and the possibility of trying something new yet wanted to be purposeful and avoid buying anything unnecessary. The participant shopped with a few specific items in mind based on what was on sale. There was a certain amount of quick idle browsing but she generally focused on purchasing the intended products efficiently. The participant went to the store with a general idea of what to buy, went to that section, and then selected the items from an assortment of available options. The process of procuring fruit occurred by first browsing the varieties, eliminating some options such as organic due to its higher cost. Then other options to consider were whether whole or cut fruit was more convenient, such as what would be easy to eat for grab and go. Further deliberations centered around whether to get a single fruit type or variety mix with the final arbiter being simply the price. Yogurt was the next item on the list. The first priority was to check the ingredients, looking for any negative attributes such as high sugar content, high fructose corn syrup, or artificial flavors, then the other ingredients were analyzed. This shopper had an idea of what to get beforehand, kept idle browsing to a minimum, and allowed consideration for some minor impulse buys. This was an adjunct shopping trip, not a major one to get all the necessities but more a quick stop to pick up a few supplemental snack items. The research indicated that individuals utilize grocery stores in all manner of ways, be it for longer shopping visits for the whole week’s meals or brief ones in which only a few items are purchased.
Participant Demographic Information

The participant demographics ranged in gender, ethnicity, and educational background spanning between the age range of participants in their early twenties to mid-sixties. All individuals fit the criteria of being eighteen or older and represented a slice of grocery shopping society. The socioeconomic status of the participants was generally middle and upper middle class who were all residents of Hawaii predominantly residing in the Honolulu metropolitan area. The majority of participants lived in more urban residential areas with ease of access to a variety of food sources and grocery stores. Those with more education were the more health-conscious participants and utilized food labels more than those less educated who were less health-conscious and did not use food labels. There were eighteen participants in total. The majority of them were of Asian descent being either Japanese, Filipino, or Chinese. Two were of Caucasian descent. Four were of mixed Asian and Caucasian ethnicity. Three were from foreign countries: Bolivia, El Salvador, and Russia. The first focus group consisted of four male adults ranging in age from twenty-four to thirty-five. One was Chinese American, one Japanese American, one Caucasian, and one half Japanese and half Caucasian. Two had bachelor’s degrees. The second focus group consisted of four female Asian American adults all faculty members at The Honolulu Community College. They ranged in age from their early forties to mid-sixties and all had graduate degrees. The first focus group was comprised of all males in their twenties and thirties while the second focus group was comprised of all females in their forties, fifties, and sixties. The contrast was marked between the diets of single men compared to women who were married with families.
Participant Health Category

The participant responses from the food label literacy research project were as varied as the individuals themselves. From the interview and focus group research, distinctive themes emerged about proactive or ambivalent attitudes towards food labels and nutrition. The research subjects fell into three categories of personal health interest: most health-conscious, moderately health-conscious, and minimally health-conscious.

The most health-conscious were those who had the greatest knowledge and interest in nutrition, were deeply invested in their health, and actively utilized food labels when making their grocery purchases. The moderately health-conscious were those who cared about their health and possessed adequate nutritional knowledge yet used labels inconsistently and made nutritional compromises due to cost, convenience, or cravings. The minimally health-conscious were the most ambivalent and disinterested in their diets, seeing label use as unnecessary and inconsequential.

The Most Health-Conscious

The types of people who were the most health-conscious had the greatest awareness of their lifestyle along with its effect on their mind and body. They prioritized physical activity and nutrition through a high-quality diet above all else. There were nine people out of the eighteen total who comprised this group. All were college educated and five had graduate degrees. They tended to be among the older interviewees, those with health concerns, or those following a specific lifestyle such as vegetarianism or veganism. Participants in this category were fitness oriented and active in a variety of pursuits such as jogging, yoga, and hiking. They were environmentally conscientious, cultured, well-traveled, and engaged in world affairs. This group of participants had
internalized their health-conscious philosophy which perpetually directed their decisions about food.

Essential to this research was the individual definition of a health-conscious philosophy and its practical application. Participants were asked about what the concept of health consciousness meant to them.

A nutritious diet was one vital component along with the quality of life one individual articulated by saying:

Being able to get out and about to take care of things for myself without pain. That I can appreciate visually and auditorily. I don’t go to doctors a lot so I rely more on my alternative therapists to help me know whether I’m on the right track with my good health. Pain is a big indicator if something is not going well. (SB)

The most health-conscious demographic purchased food with intention to empower their health. They used food labels frequently and knew how to navigate the grocery store aisles adroitly. These participants cooked more frequently rather than relying on prepackaged meals. A healthy diet was considered paramount and worth the extra cost for better quality products. They purchased nearly exclusively fresh, organic, non-GMO, or local produce. Food was seen as a multifaceted resource to be utilized for invigoration, longevity, and a vibrant livelihood. These most health-conscious participants had integrated their nutritional beliefs into their identity and espoused an earnest diligence towards this lifestyle commitment.

A consistent theme among the most health-conscious individuals was self-reliance. They espoused an ethos of having only themselves to rely upon to find valid health information about high quality food. This group consistently expressed suspicions
about the ulterior motivations of government agencies and food corporations. This was due to a growing awareness through popular media outlets that one respondent credited learning from “a documentary I watched; you can pretty much lie on food labels” (AW). As a result of the proliferation of revealing information online, proactive respondents began to distrust that regulatory bodies and companies had their best interest in mind.

When asked about the ability to make informed food choices, one participant responded “to the extent that the label says what is in the product. [I] can’t control what the lobby groups do” (IS). There was a belief by one activist-minded individual to seek independence from the industrial food system because he believed it could collapse at any time. Based on this belief, he didn’t want to be fully dependent solely on grocery stores for his food supply.

Highly motivated individuals had a self-sufficient mindset, believing that they had only themselves to rely on as echoed by one respondent:

Health insurance companies really don’t care about us. They want us to be sick and unhealthy. They own the FDA basically and they can do whatever they want. It made me look out for myself more because I feel like my government doesn’t care about me. (AW)

This lead to a consistent theme that health-conscious participants believed that only they could best take care of themselves and their health.

A major recurring reason for the most health-conscious individuals to pursue a healthy lifestyle was due to health concerns or a chronic condition. In this manner, certain foods were utilized or avoided as a method of addressing medical diagnoses. One respondent addressed this proactively due to “when I started getting my headaches and
they became more intense, I started looking into why I was getting headaches; it could be from caffeine or sugar […] I cut out soda in high school” (AW). Whether it was prophylactic prevention or reactionary, medical concerns were a major impetus for this group to make changes in their diet. Avoiding sickness was cited as another reason for proactive food label use in order to eat nutritiously.

This proactive mindset was to utilize food labels prophylactically to fortify and strengthen the body against the threat of potential future disease. Preventative living and eating was a recurring theme as echoed by one respondent saying “I think it has a lot to do with my dad having cancer, my mom had cancer, my sister had cancer, and I was just trying not to go down the cancer road” (SB). Consumption of nourishing foods became a tangible method to avoid disease or illness. Health-conscious consumers were willing to pay more for what they viewed as better food that was seen as an investment in their future longevity as articulated by one research subject saying “I’ll definitely pay more for the better-quality product. In the long run, the higher cost is worth it for the higher quality product so that you don’t develop an illness in the long run” (JD). Shrewd shoppers know about and will seek out specific vitamins, minerals, and nutrients that can potentially prevent disease (Keller, Landry, Olson, Velliquette, Burton & Andrews, 1997). One focus group participant facing a stern doctor’s warning based on recent test results utilized this type of nutritional knowledge and as a result stated that “I feel more empowered to make a change in what I buy and consume” (SC).

In order to purchase nutritious wholesome foods, the grocery store became a critical destination for the health-minded consumer. This led to the recurring mentality of shopping strategically, taking into consideration multiple factors including convenience,
availability, and cost. While certain products were only found at specific stores, other items could be found cheaper elsewhere, and finally some markets were simply in closer proximity to home. Shoppers developed certain affinities and routines, knowing where to go in the store to get exactly what they wanted. One savvy shopper explained her grocery navigating method as “I recently heard a new tip: shop around the grocery store not through the center” (AW). The more invested in their shopping and nutrition intake, the more time and effort was expended seeking out the highest quality goods for the most reasonable prices.

One highly motivated health-food shopper revealed his philosophy about avoiding the overpriced trendy natural foods store yet procuring high-quality produce at a lower cost nonetheless:

We eat healthy foods but don’t shop at Whole Foods. We shop at Times […] you can get the same stuff at Whole Foods for a lot cheaper. Most of the basic vegetables and fruits you can get for much less cost. That’s where labels come in at because at Whole Foods, they have nicer packaging and people want to upload on social media to show off their cute designs. You can get the same stuff at Times for less but it just won’t look as nice. (JD)

Health-conscious participants used all available resources to stretch their financial expenditure to maximize an optimal grocery shopping return.

The Moderately Health-Conscious

The moderately health-conscious participants had the awareness and wherewithal to generally eat nutritiously yet were inconsistent in their habits. This group was comprised of four from the eighteen people total with most having bachelor’s or associate’s degrees. They consisted of people both married, single, and with children.
Those who had children were strongly affected and influenced by the child’s food preferences and daily needs. These participants faced certain psychological or physical barriers towards eating a healthy diet manifested as feelings of helplessness, frustration, or inability to lose weight. While this group had a high level of motivation, they faced impediments towards reaching their goal of optimal health.

The moderately health-conscious demographic made both healthy and unhealthy food choices. Despite having a solid foundation of nutrition knowledge, not all of their meals were nutritious. The reasons for unhealthier options were generally due to time constraints, impulsive decisions, or accessibility. Laziness and lack of knowledge were also cited as a reason for not eating well. Food purchases consisted of a combination of both healthy as well as premade processed convenience foods. This category of people were interested in good nutrition and tried their best most of the time yet were inconsistent in their eating habits. They tended to scan food labels quickly for calories and sugar content but not necessarily for ingredients or nutritional attributes. This group was the most self-critical because they knew what they should be doing but weren’t doing it, therefore felt guilty for their lack of resolve and discipline. Food was seen by this group as complex and confounding at times frustrating to wrestle with questions simply of what to eat.

Participants who fell in the category of being moderately health-conscious made a sincere effort to make the right decisions to eat right but weren’t always successful. Making a change to take control of one’s health was a significant theme to which one interviewee stated that she felt “very empowered, not motivated (because) it’s lots of work/money/time therefore is sometimes intimidating” (SM). Ironically, there were
inconsistencies amongst participants who focused on minor issues when major ones seemed glaringly obvious. In one case there was an on-again off-again vegetarian who focused on the seemingly less significant issue of removing dairy products due its mucus forming effects yet was neglecting the more glaring issues of being overweight.

Indicative of contradictions was a desire for good health yet behavior that didn’t prioritize it as the interviewee said that food labels played “a partial role (other factors considered are price/brand). The food product label usually is last or second to last to be considered” (SM). Yet another participant, though inconsistent in his diet due to a busy work schedule, stated that he used the food label because “it plays a part in choosing the healthiest food for me and my family” (BT). The moderately healthy participants had good intentions if not always for themselves at least for others they cared about.

Participants voiced uncertainty when faced with selecting from the broad range of food choices available to them. They felt that it wasn’t always clear what was good or bad to eat, therefore they perceived food on a spectrum of ambiguity. The moderately health-conscious struggled with knowing what to do and following through regularly as one focus group member explained “I stopped exercising. So I decided to make better purchasing decisions” (SC). Food labels helped the moderately healthy respondents decide between gradations of options to choose the healthier alternative available. The label provided reassuring information as voiced by a participant who responded, “I feel healthier when the label identifies organic/non-hormone/non-chemical ingredients” (SM). This category was filled with those who were actively trying to eat more nutritionally and improve their health yet struggled to be disciplined.
The Minimally Health-Conscious

The minimally health-conscious participants were ambivalent and unaware about what they ate. This group was comprised of five people out of the eighteen total. They were among the youngest participants. They either had attended some college classes or were currently attending community college. One had a bachelor’s degree. Two lived alone and three lived with their family where home cooking was provided. Two members of this group were physically active — one hiked and spearfished regularly while the other lifted weights at the gym. This group tended to spend more time on social media including posting more pictures of food, travel, and social outings. Social media also influenced their values leading to using meals for selfie portrayals and consumption for enjoyment. These participants engaged in more digital pursuits of entertainment such as frequently watching Netflix and spending long hours playing massive multiplayer first-person shooter video games.

The minimally health-conscious demographic were the least concerned about their diet and lifestyle. Foods purchased were generally packaged, processed, and convenient. This group didn’t grocery shop frequently for fresh produce but instead would pick up snacks when hungry. Eating was seen more as a pleasurable activity rather than a source of health and no major concerns were given towards calories, nutrition facts, or ingredients. While this group knew about nutrition, it was simply not a priority as cravings and convenience were paramount. Frozen pizzas, microwavable meals, and 7-11 bento boxes were frequent sources of sustenance. While fitness and physical activity were engaged in, no major consideration was consistently given towards the quality of
nourishment consumed. Food was not seen dualistically as healthy or unhealthy but rather as a monolithic entity encapsulating all categories simply to be eaten until satisfied.

Those least health-conscious participants lived a lifestyle based on accessibility and spontaneity. Their habits consisted of purchasing brand name packaged products, grab-and-go items, and fast food. These participants also ate junk food frequently. This category of research subjects were more concerned with flavor and that parameter was used as a gauge for a food’s desirability. They had become acclimated to certain tastes such as highly salty or sweet — subsequently more natural and often healthier foods tasted bland or were unpalatable to them.

A major factor in one’s lifestyle and food shopping habits was one’s household living situation. One of the most significant elements evident in respondent’s grocery shopping habits centered around the family. A frequently cited factor influencing food purchase and consumption was that of participants living at home with their parents affecting grocery shopping responsibilities. When asked about health empowerment through food purchases, one respondent stated that she felt “somewhat empowered when I do my own grocery shopping, but considering that my mom cooks home cooked meals as well, I am influenced not to buy a lot of groceries for myself” (LP). There were three individuals interviewed who fell into this category commonplace in Hawaii of young adults living at home with their family. These participants were aware of food issues yet did not do any of the grocery shopping or cooking. This subsequently limited their exposure and opportunity to make independent choices with food. They didn’t have as much control or independence over what they consumed as evidenced by the reply from one interviewee that “[our] mom does the grocery shopping. So, [we're] not there to tell
her [we] want to eat […] once she comes home and starts cooking what choice do you have? That's what's there” (JP). While economics and convenience played the largest roles, these respondents were seemingly naïve about food issues due in part to their reliance on their family’s home cooking.

The least health-conscious respondents espoused a mixture of personal motivations and philosophies. The most confident participant in this group carried an attitude of hubris and ambivalence, as though equating health-conscientiousness with weakness. He stated defiantly “it isn’t hard to change your shopping habits. It’s all mental, you must have strong will power. It is up to you to ultimately decide what you put into your system” (BZ). This hedonistic-minded individual stated that he consumed large amounts of fast food, snack food, and processed meats. They exhibited an inquisitiveness as well as general skepticism about labels towards their own purchasing decisions. This perception of labels and ingredients had both a marketing as well as practical application as one interviewee stated “they’ll label everything so that people will buy it. It's cool […] it's also really good to know these things because this is what it's made of […] this is literally showing you the product broken down into every single piece” (JP). While there was an awareness about food labels, there was also a lack of regard for the relevance it had in their lives echoed by the sentiment of one young woman who admitted “although there’s a lot of resources these days, people won’t feel the need to change unless they really need to” (MA). The least-health conscious attitude was to eat what was desired now and deal with the consequences later.
**Research Questions Addressed**

This section will provide answers to the research questions based on participant responses. The research questions centered around the use of food labels when making a purchasing decision and whether it reinforced the consumer’s personal health beliefs. The first question was behavior-based and received straightforward answers while the second one was more philosophical and received more ambiguous nuanced responses. The research questions were answered in a thorough manner, often consistent with the literature, and new insights were elucidated.

**RQ1: What role does the food label play for health-conscious consumers in Hawaii towards making their purchasing decision?**

The food label played a direct role for health-conscious consumers. Label use rose proportionately along with the individual’s level of nutrition interest. According to this research, the food product label performed a significant informative role for consumers interested in knowing about constituent ingredients in their foods. The more health-conscious a consumer was, the more important and utilized the label was. Motivated customers often immediately recognized what was healthy and unhealthy based on prior shopping experience, label literacy, and product familiarity.

A recurring theme was the intentional use of food labels for reading the ingredient list. The most health-conscious demographic consistently sought out red flag warnings about potentially harmful ingredients they wanted to avoid such as one respondent who stated “I would look for the label that would say no artificial ingredients, non-GMO, the most natural product I can get” (JD). Highly engaged consumers used labels to look for negative ingredients that they sought to minimize or avoid. Therefore “I always read the
ingredients and most of the stuff I don’t recognize. It says no sugar but then there’s sugar […] just using a different name […] I read the first few ingredients to determine what its […] comprised of” (AW). One participant looked for items that “are not high in sodium and sugars (these are the two ingredients I primarily watch for in label if any” (SM).

For healthy consumers, trying a new food product required information before making a purchase. The label was used by health-conscious shoppers for investigation due to the fact that “it plays a role when the product is new to me. I look at the design, type of product, and ingredient list” (NP). The label is indicative of what is contained within the packaging, therefore keen shoppers have learned to recognize key words as one responded “I usually look for labels such as non-GMO, USDA organic, fair trade products, no MSG, high fructose corn syrup, partially hydrogenated oils, lard, white sugar, and flour” (IS). A dedicated health consumer emphasized the point that “food labels are critical. Rarely do I buy a product without knowing what the ingredients are. Huge risk” (MM). Another diligent label utilizing participant replied “I read all my food labels on food products that provide it, particularly paying attention to ingredients that are listed” (LT). The label provided clues about the product’s validity and alignment with the shopper’s strict values.

The motivated shopper utilized labels as an information tool to understand what was contained inside to achieve specific nutrition goals. They sought to develop a sense of control over food as one respondent touted feeling “very empowered” (MM) as the food label “plays a very important role for me. Due to reading the labels, I was able to lose ten pounds in two years due to reading the labels” (IS). The food label provided the external information about the internal food item contained within. The more a person
careed about the contents of the product itself, the more the label would be utilized and valued. Other participants sought other information to determine an item’s quality such as one who stated “I always look at the expiration date because that says how fresh the product is” (SB). The degree to which a person utilized the label was based on that person’s degree of investment in their diet and lifestyle. One interviewee furthered this notions by stating “that’s where the label counts because we try to look for organic and not from a place that uses a lot of pesticides. If I see something that’s local grown, I’ll choose that even if we have to pay a little bit more” (JD).

The less health-conscious a consumer was, the less important the label subsequently was. For those less concerned or aware about their diet or nutrition, the label was of little or no significance. In response to whether the food label played a role during a purchasing decision one participant stated bluntly that “sadly it does not. I am not conscious of what I purchase based on the product label” (BZ). While front of packaging information may be looked at, the nutrition facts panel on the back was generally disregarded by those least health-conscious consumers. One interviewee honestly confessed “I am ignorant when it comes to food labels, by that I mean labels are confusing, I think on purpose. I don’t know what I’m reading. I don’t know what all chemicals do” (JF). The least-conscious respondents had stronger levels of emotional attachment to brands due to familiarity, convenience, and taste preferences; essentially, they stated that it was easier and required less effort to simply buy the same products all the time. Confusion about understanding labels lead consumers to use cost as a deciding factor since the food label was “a good guide [when] buying food but only if we know what we’re reading […] if I don’t know what some ingredients in the labels then I
wouldn’t care that much” (LP). Perhaps most tellingly, one of the least concerned interviewees stated flatly that the food label simply “does not have an effect when I buy food” (MA).

**RQ2: Does the food label reinforce your personal belief of being a health-conscious consumer?**

The food label became a reflection of how health-conscious participants viewed their lifestyle and consumer identity. The product label reinforced the personal beliefs of health-conscious consumers as one focus group respondent stated “how and what I eat is surely a part of my identity” (MM). The more conscious consumers were, the more the label reinforced their personal beliefs. An interviewee emphasized the fact that “quality is a big factor in how I decide what to buy [and] the label comes in with quality because if I see a good [well-made] label, I can tell that it’s probably a good company” (JD). Health-conscious consumers used the label as both a guide indicating what met their purchasing parameters as well as what aligned with their nutrition goals and lifestyle philosophy.

The food label had the effect of reifying health-conscious beliefs and motivating individuals towards proactive grocery shopping habits. A research subject noted that “I try to research products I buy. I don’t take words on the label as true by default” (NP). The health-conscious consumer already knew what to shop for and had an established identity “because I’ve made these choices already that’s why I look for that label. I don’t think the label itself makes me change my ideas about healthful living” (SB). The label became useful to determine what products aligned with and bolstered their lifestyle yet did not fundamentally alter preexisting beliefs.
The most health-conscious participants felt that their lifestyle was reinforced by the product label. They were also the most resolute and ardent in their beliefs as well as committed to healthy living. Reading food labels became ingrained in their identity nearly as a form of health-activism as one participant stated “I choose to be an informed consumer” (LT). Since their foundational principles were strong, the label merely buttressed a resolute preexisting edifice. As one interviewee stated “I think I’m in a good place but there’s always room for improvement […] I have so much knowledge about what is good for me and how to go about it, it really makes me feel good inside” (JD).

While the label helped shoppers to determine which product to choose from, the health-conscious consumers did not require external validation about what they already knew. The positive reinforcement came when the customer felt good about buying and consuming the product “I am concerned with both the inner contents and outside packaging of the product. […] the label comes in because […] the more information is provided, the more informed you are, and the better you feel about the product” (JD).

Concepts of inner and outer value were significant towards the discussion of health in light of the current digital age. It was initially theorized that health food had become trendy as evidenced by the prevalence of organic products and proliferation of grocery stores like Whole Foods. People prominently depicted their nutrition knowledge and fitness activities as status symbols on social media yet this research found that participants overwhelmingly pursued good health for its own sake alone. Trendy health fads were determined to be superficial and unsustainable however “people […] want […] what’s cool and […] popular […] they’re health-conscious […] and they’re trying to look good and don’t want to be fat. So it can also be a little bit of vanity as well” (JD). One
respondent vehemently asserted, “I’m not on social media, which I think is healthy. When I Google something then that spins me out” (SB). Those most invested in their well-being were not doing so for external accolades but rather for their own personal reasons. This was evidenced by one interviewee who stated “I think it became a fad, the right people started getting into it to where it became popular.” (JD). The pursuit of a healthy lifestyle became more about self-fulfillment rather than seeking praise from others. It was found that health-conscious individuals pursued this lifestyle for their own personal reasons rather than for external validation.

One response elucidated the contrast between health trendiness and health for health’s sake alone:

You have this category of people who follow this healthy lifestyle, who are in it because it’s cool and hipster. Then you have the people who legitimately believe in what they’re eating and are not doing it just for the look but to actually feel better because they know it’s better for themselves and better for the environment. (JD)

Despite a hypothesis about the growing trend of self-aggrandizing displays on social media, health-conscious individuals were generally inconspicuous about their beliefs and habits. The health-conscious couple interviewed were adamant about their disciplined diet yet in a subtle manner, pursuing it purely for their own lifestyle choices.

Being healthy was seen as a value unto itself and sought after only for the sake of one’s good health as one interviewee stated:

That’s why there are people who are really into it will do it themselves. I think people that are really into it who aren’t too fancy, they can do the same stuff at
home, buy the natural products, they can make the foods at home and are more low key about it. (JD)

Developing a health-conscious identity was a personal choice that required commitment and discipline, attributes not easily portrayed in a fleeting social media post.

The product label design was found to reinforce the personal belief of being a health-conscious consumer. Though health-conscious consumers were the most discerning and critical-minded, they also were drawn to creatively designed packaging. Aesthetic package appeal translated into a quality item because the company cared enough to invest in the design to target a discerning shopper as echoed by one interviewee who stated “this one looks it’s going to be the healthiest so it probably tastes good as well […] makes you feel better as well” (JD). Being more independent thinkers, they were more apt to think and buy outside of the mainstream box. Stylish packaging led one research subject to admit “I am guilty of being attracted to good design” (AW). The types of designs that were more successful were more appealing and attractive artistically and aesthetically. The mentality was that if significant thought was put into the design as a bonus, then the same or more effort must have gone into the quality of the product. While the packaging design itself was not the reason for the purchase alone, it did engender feelings of positivity toward the product. An interviewee admitted “I’ve bought [a product] before because it looks nice. You go to Whole Foods and things are just packaged cleanly […] but then I see the price and ask myself do I need this, no I don’t need this. (AW)” The design reinforced the validity of the item through its visual and emotional appeal.
The healthiest constituency were also the most aware of their actions and psychological motivations. In the store certain products attracted people as one participant admitted that “I do fall for the label that looks trendy but I try to be aware about the ingredients. It can be part of my identity because it’s a result of my choices” (NP). Those who were most visually engaged with the product were most likely to be captivated by the imagery, subsequently lingered longer in label analysis. This was perhaps due to what one respondent elucidated how “the colors play a role as well, what design looks clean, what’s easy to understand and see the signs that indicate it’s healthy. You develop an eye that can tell immediately what’s good and what’s not” (JD). Those who were the most conscious about what they bought had the most nutrition knowledge, discipline, and resolute commitment to a healthy lifestyle.

To those who were in the middle level of health-commitment, this is where the most flexibility occurred in personal beliefs and behaviors. Some participants were more swayed by fluctuating health trends, advertising, or package claims. One respondent admitted to his susceptibility by replying “food label and education through corporate marketing changes how I view my health” (SC). Consistently, these participants responded positively to healthy labels as echoed by one who stated “the food product label makes me feel better about trying to lead a healthy lifestyle” (BT).

The least-conscious consumers did not use food labels to define their health identity. While they acknowledged the use of the labels for information, it was not internalized regarding how they viewed themselves. This disregard and ambivalence was espoused by one respondent who stated that “food labels can tell me how good or bad it is for my diet but they cannot tell me not to eat it” (JP). A frequently voiced sentiment
was that the biggest factors involved in decision-making were the front packaging labels and the product’s taste.

Further complicating matters was the fact that the information participants didn’t know about led them to subsequently not care about:

Some people are not as educated as to what they’re reading on the label, so as for me, it doesn’t really contribute but more rather what is front and center or what flavor/taste it is. I feel like depending on how you grow up or your culture, it plays a big role and sticks [to] what you are accustomed to. (MA)

While the food label could be used for information or decision-making, it could just as easily be disregarded or unheeded. To those least concerned about their health, the label was just seen as an inconvenience that complicated what should have been a straightforward process of just eating what tasted good.
Chapter VI: Discussion

In this chapter, the results of this study will be compared with the research literature on this subject. Based on this examination, the research results were generally consistent with the existing literature. Certain demographic factors such as age, educational background, and socioeconomic status influenced the beliefs and behaviors of participants with results varying from person to person. As reflected in the literature, those who were more informed and educated utilized food labels more consistently when making a purchase. To those who were health-conscious, the higher cost of goods was seen as a worthwhile and necessary investment in higher quality nutritious products.

The research results were illuminating in a variety of ways. While generally reflecting the current literature, there were new and unexpected revelations elucidated by the research. The data from the discussion analysis were compared and contrasted to the body of literature within the framework of the three respondent health categories. Overall, the more health-conscious the individual was, the more he/she utilized food labels during grocery shopping. Those moderately health-conscious respondents were aware of and likely to use labels periodically based on their mood and motivation. The least health-conscious consumers were generally ambivalent about food labels, nutrition intake, and caloric consumption. While these categories of participants were consistent in their beliefs and behavior, each espoused nuances and individual motivations uniquely underpinning each individual.

Branding

Branding is the method of psychologically creating an identity for the consumer with which to associate the product (Kotler & Keller, 2016). Brand names and semiotic
imagery were found to be significant to all who participated in the research study. Brands matter and people were strongly drawn to them. All respondents were familiar with mainstream brands and their iconography. Brand awareness and ubiquity played a consistent and constant role in how people shopped. Brands gave guidance and a guarantee about the validity of a product. Participants would often buy the same products based on brand reliability as well as a reassurance of quality and consistency (Jones & Morgan, 2015). In relation to this study, most health-conscious were least brand-centric while the moderately health-conscious were more concerned with brands and labels, while the least health-conscious bought nearly exclusively brand name products.

The most health-conscious participants had a complex relationship with food brands. They expressed an aversion to major brands due to the suspicion that the companies didn’t have the consumer’s best interest in mind. These interviewees were pushing back against what Cayla and Arnould (2008) articulated as the utilization of branding as a form of corporate dominance staking control over the global marketplace. Because of the awareness of this commercial monopoly, the most health-conscious individuals avoided buying major commercial brands whenever possible. Mainstream corporate foods were less appealing because the health-conscientious sought information beyond the loud brand semiotics as they valued the authentic information contained within the fine print of the nutrition facts.

The most health-conscious respondents were also concerned with food authenticity rather than loyalty to any specific brands.

One individual voiced his stance on the issue of brand awareness:
I know some brands and based on my familiarity; I can make a decision based on prior experience. If I can’t tell based on the front labeling, I will check the back to read more about it. Especially products from large companies that cater to a mass market audience won’t necessarily be as health-conscious. (JD)

To them, authenticity was communicated through labels they trusted and branding that was in line with their values. This manner of grocery shopping took on a greater significance, encompassing an entire ethos and lifestyle. Food evolved into more than just taste and flavor but rather about fortifying the body with the best possible nutrients.

The food label was more significant to the health-conscious because Janoff (2001) writes how these consumers don’t necessarily shop for specific name brands but rather seek out products falling under an overall label category such as organic. This proactive demographic sought out specific products based on the manner of quality labeling rather than the brand name itself as in past generations. The brand only later factored into the purchase decision if its labeling met their strict criteria. The health-conscious group did not practice consistent brand loyalty as did the other two health categories did but rather were savvier in their shopping approach. Health-conscious consumers were consistently more concerned about the informational content of the nutrition labelling than the brand names.

There was evidenced an increasing trend of branding good health as a sign of wealth and prosperity. Some healthy shoppers sought out certain artisanal-branded products in order to feel unique, special, or elevated above mainstream consumers (Poole, 2013). In the research, some participants made purchases based on its aesthetics such as one interviewee who responded “I remember buying Vox water in the glass bottle but
then in the end I realize that I’m just buying water in a glass bottle but I wanted the bottle. The design was nice and slick” (AW). Instead of overt displays of material possessions, prosperity was communicated through the often intangible inconspicuous practices of a healthy lifestyle (Currid-Halkett 2019). Healthy consumers were not merely buying food to consume calories alone but rather sought vibrant nourishment and products aligned with their proactive identity.

*Food Product Labeling*

The food label is used to indicate the product brand name, logo design, and nutritional facts along with its ingredient list. Packaged foods utilize labels to visually communicate what is contained inside and to differentiate one item from another. The awareness and literacy to read food product labels was in direct proportion to one’s personal investment in their health. Food label interaction and engagement was highest among the most health-conscious consumers. The most health-conscious research respondents had the strongest nutrition label reading habits which had a direct correlation to consumers who consumed a healthier diet (Kreuter, Brennan, Scharff, & Lukwago, 1997). Highly motivated respondents used and gathered information wherever available to improve their awareness and health acuity.

Popular forms of entertainment like television and film were utilized as stated by one participant:

I watched a Netflix documentary on sugar and it basically said that no matter if it’s organic cane sugar or high fructose corn syrup, your body processes it and it affects your body in the same way. So sugar is just not good period [...] in the end it’s all the same. If I had to pick a sugar, I would prefer the more natural one but
it’s not like I want sugar anyway and I try to just cut it out. It’s in everything.

(AW)

What became clear in the research was that interest in one’s health was seen as a personal responsibility. Informative labels communicate the nutritional attributes and health benefits of food products sought after by engaged customers (Laan, Ridder, Viergever, & Smeets, 2012). Just as literacy is required to read, for the label to be recognized and a successful communications tool, the consumer must be interested enough to take an active role in reading it (Cecchini & Warin, 2015). Ingredient list understanding and interpretation was a skill learned by the most proactive health proponents as stated by one saying that “the less ingredients the better. If the ingredient list is a paragraph long, that usually is not a good sign. Why is there food coloring in here? I try to pick for myself less ingredients the better” (AW). The research participants varied in their beliefs and behavior ranging from active to passive that then dictated their nutritional outlook and grocery shopping tendencies.

Health-conscious individuals were more proactive, well-informed, and skeptical of governmental standards and approved labels. They were more invested in what they bought and ate therefore had a stronger opinion about the validity of food labels.

Regarding the collusion between governmental regulatory bodies and corporate lobbying, one respondent opined incredulously:

I don’t really believe in the food labeling, I know that the FDA is owned by those huge food corporations, I know they pay and sponsor them so they have a major huge influence on what can and can’t be done. […] the FDA can really just say anything and until someone complains about it, they don’t have to investigate it.
So in the end, just eat what you think is best. They’re looking out for their own interests. (AW)

Developing the skill to use and understand packaged food information was deemed critical.

Parsing through the jargon and reading between the lines was a trait of healthy consumers as reaffirmed by one participant who asserted that:

Not all the info on there is transparent even when you are well-informed. For example, “natural flavoring” can mean anything, including chemical I don’t want to consume. I also don’t know the farming practices of the farms that provided my produce because labels aren’t always accurate and/or provided; that info is not printed on labels. (LT)

The moderately health-conscious participants were concerned with food labels but not enough so to use them with regularity. The moderately-conscious used labels with less stringency and determination, mainly for the sake of comparing and contrasting similar products. This was evidenced in the literature by the fact that packaging and food labels can help the consumer differentiate between similar products (Laan, Ridder, Viergever, & Smeets, 2012). Participants agreed synonymously that the label was useful to decide which item to choose from amongst the often staggering variety on store shelves. They would use a strategic combination of label and price comparison to determine the best option for their purchasing dollars based on the value and quality.

When shopping for quality and safety, one moderately-healthy participant echoed the sentiment of proactive self-preservation activism by saying:
I was watching a documentary. Whenever there’s the ingredient “fragrance” that just means that that’s proprietary to that company — it’s like a patent, so they don’t have to tell the government what’s in it. You can actually have fire retardant inside the product inside perfumes, whatever has fragrance in it, and they don’t have to report that [...] Because I heard that, I look at my labels now I look at the ingredients for that. So if it’s in there, I won’t buy it. The majority of the products that we use today probably have it. I just know that California is really strict on that so they probably ban a lot of those products but other states probably haven’t caught on as fast. (SC)

The least health-conscious were not concerned about food labels whatsoever and did not make any effort to read them. This was echoed by one participant when he admitted “I don’t read food labels. It’s something that I will sometimes look at but it isn’t the deciding factor” (JF). There was a disregard for food labels and nutritional facts by those who did not see themselves as being health-conscious consumers and the product label became an afterthought. Among the least health-minded, one focus group member vociferously pronounced the sentiment that “labels do not define me of living a healthy or unhealthy lifestyle. It is up to me as an individual to determine if I am healthy” (BZ). These consumers viewed labels more as confirmation of desirable brand and flavor with the front package information taking precedence over the back of packaging nutritional facts. The combination of obfuscation and opacity resulted in what one interviewee admitted “the food labels are something that not everyone can read or comprehend. Things like percents and health terms aren’t explained therefore most purchases on food,
I don’t look” (JP). Food label use became a manifestation of a person’s lifestyle and outlook on health.

**Nutrition & Healthy Lifestyle**

Nutrition and fitness are cornerstones of a healthy lifestyle. Throughout the duration of this study the participants expressed their own interpretation of how to best live with each having nuances and idiosyncrasies. Health was defined differently by each person though in general, the more health-conscious research subjects were more physically fit as a respondent stated “I’ve always had an active lifestyle” (AW). Health-consciousness extended beyond merely diet and nutrition; therefore, the healthiest individuals were also the more physically active and fit. Lifestyle came to encompass all that one participated in, ate, and was involved in — representing the degree to which one was proactively engaged in one’s life. It became clear that the evolution of a personal health identity was important to this study.

A significant aspect underpinning this research was understanding how a person became health-oriented. Good health is the state of living well in body, mind in society without disease (Sartorius, 2006). The adoption of a healthy lifestyle often resulted from an illness or malady that was the catalyst for the individual to make a change. This was also true about one’s upbringing and household situation that were an influence and provided role models about how one did and didn’t want to turn out. Health-conscious research subjects were more independent thinkers and developed their own personal rulebook by which to live.

One participant motivated by the unhealthy example at home helped her to determine her own health parameters when stating:
I didn’t want to be like my parents, my dad always has a cough or aches and pains. It’s frustrating because you’re trying to help but when someone is so stubborn and they’re not listening it’s really frustrating and that’s my dad. I just don’t want to be like my dad; he’s skinny but he has a big belly. He doesn’t care, I care and I wouldn’t want that for myself. It’s really hard to change their habits.

(AW)

This was evidenced in the literature as a great deal of adverse health conditions and maladies stem from a poor diet including high blood pressure, heart disease, diabetes, and obesity (Oatman, 2017). The healthy consumers were self-motivated toward a long-term view of maintaining their health over a lifetime while the unhealthy subjects had a short-term immediate self-gratifying attitude.

While health-conscious practices have long existed, different trends have come and gone reflecting the zeitgeist of that time period. Healthy-lifestyles are prominently depicted on social media through posts displaying nutritious meals or fitness activities. Trendy wellness businesses have sprung up such as cold-press juice bars, boutique gyms, and natural grocery stores like Whole Foods — all costly and out of reach for most. The savvy consumer could see through the overpriced health trends and the socioeconomic complexities involved with overpaying for the façade of wellness and observed perceptively by a participant who understood the trendy health craze by stating:

They feed off of people that are in that fad. Most of the people there you see are the mom who goes to Corepower Yoga and then goes to Whole Foods and then go to soccer practice. Then you have the poor people that just go to Costco to buy the 24-pack ramen noodle. I can see both because I shop at both places. I can see
the difference between really nice-looking customers and obese person just
buying buckets of ice cream, soda, chips, and just about quantity some of which
isn’t even really food. They cannot afford the cool. (JD)

There was a proactive mentality that was exhibited by this group and an ongoing
effort to maintain and improve their knowledge and awareness.

While not deeply affected by new fads, health-conscious individuals were well
aware of social media trends:

Being healthy is popular and seen in a positive light, now getting enough sleep is
cool and people constantly posting pictures of their healthy meals. So that culture
just being around you this whole time, nowadays no one has an excuse like if you
want to know something it’s all on the internet, you can search online with so
much knowledge at your fingertips, there’s really no excuse. (AW)

Food is increasingly becoming oriented towards convenience and expediency.
Unhealthy eaters want their meals quick and easy while healthier eaters are more patient
based on a slow food movement model. In reaction to living in an industrialized modern
society, a lifestyle based on nutritious foods has taken on an agrarian nostalgia to connect
back with nature (Paadberg, 2010). This was most apparent in the health-conscious
category who were more ecologically-minded. They often would spend time outdoors
and established a strong connection to nature through the environment and consuming
mostly plant-based foods. This sentiment was elucidated by an interviewee who
proclaimed “every week we have to get our vegetables” (JD). All of the most health-
conscious individuals attested to the notion that achieving a state of good health was as
simple as eating foods in their natural state in order to retain key nutrients that benefit the body (Nestle & Ludwig, 2010).

It was found during the course of this research that self-motivation was among the highest predictors of living a healthy lifestyle. More important than purchasing power alone was the consumer’s attitude toward shopping in an inexpensive yet nutritionally-dense manner (Aggarwal et al., 2014). The most devoted health-conscious consumers were not in a wealthier income bracket despite having a committed interest in personal as well as environmental health and sustainability issues (Curtis, 2014). Motivated shoppers admitted that it wasn’t always easy and one vegan interviewee replied “I enjoy looking out for my health and try to make informed choices. But I also feel I have little control due to obscure information about food production” (NP). Despite obstacles, a strong commitment, motivation, and attitude were found to be the strongest indicators of successfully creating a nutrition-oriented lifestyle.

While personal motivation was significant towards achieving health-related goals, a lack of motivation and other hinderances inhibited individuals from achieving their desired lifestyle. A recurring theme for the moderately health-conscious was the inconvenience of eating in a healthier manner. This concern was voiced by the fact that there would be “lifestyle change (social outings) would be affected since restaurant selection would be limited (not so exciting/hassle to motivate friends/crowd to go out of their way to eat at healthy place) and don’t want to seem crazy preachy to them” (SM). This moderately healthy participant wanted to eat nutritiously, however, was already predicting failure due to a lack of imagination towards finding healthier options during inevitable social outings. Despite their knowledge, the moderately healthy group as a
whole struggled with psychological and emotional barriers towards creating the vibrant identity they desired.

A healthy lifestyle does not manifest itself without purpose and intentionality. Many people are too busy or stressed to take the time to develop it. They are working multiple jobs and commuting long distances without the ability to slow down and focus on the quality of their food. They need food to be ready immediately, cheap, and don’t have the luxury to care about its quality. Macias (2008) reveals that local organic food is often out of the reach of many due not only to its expense but also the time it takes to freshly prepare foods. The least health-conscious respondents ate more processed, packaged, and fast foods because they were cheaper and fresh healthy produce was out of reach or inconvenient (Oatman, 2017) but also because they had an aversion to fruits and vegetables. As Nestle (2018) warned of the habit-forming dangers of heavily processed foods, so the minimally health-conscious constituency provided evidence of just that type of routinized consumption behavior. To them, healthier whole foods did not taste good, thus the sentiment of one respondent saying “I never crave vegetables” (BZ). The pervasive attitude frequently voiced by the least health-conscious respondents was that they knew what to do to be healthy but they decided that they weren’t going to do it. These participants felt that they had the wherewithal if they so decided, but didn’t take action as one opined “I know I have control over my health but I guess until I reach that “breaking point” I will not feel the need to make a change in how I eat or what I buy” (MA).
Purchasing Decision

A critical juncture in this study occurred after the food label had been analyzed during the time when the participant ruminated over what action to take next. The purchasing decision is the act of choosing what product is desired and making a payment to buy it. When making a purchasing decision, the degree to which the food label was used primarily depended upon the level of proactive health engagement the consumer possessed. The label becomes the recognized visual representation of the product (Viola, Bianchi, Croce & Ceretti, 2016) therefore the degree to which the shopper used the label indicated their interest in learning about that product. One focus group attendee stated “I make a conscious decision to try to buy the best food and to take control of my health” (BT). By seeking to make the right purchasing decision, food labels provided consumers with verification and a sense of validation that they had chosen correctly.

For the most health-conscious individuals, choosing the ideal products often entailed forecasting the consumption consequences beyond themselves alone and taking into consideration its environmental impact. Paadberg (2010) writes that contemporary health-minded individuals sought to use their purchasing power towards altruistic goals.

Those who cared about their own health were found to also care about the environment and have other related ethical concerns as one respondent who stated:

If I know it’s healthy for me, I feel better as well. It does affect my belief that I’m doing something good for myself and it also makes me feel good because I’m supporting something that is good for me and the environment [...] whoever is making this product is probably also self-conscious about a lot of other things that I might care about as well. (JD)
Paadberg (2010) emphasizes that well-intentioned consumers believe that they can help to address global issues simply through their conscious shopping practices. Arvola et al., (2008) contends that the incentive for purchasing organic products stems from the belief of making a positive contribution to oneself and the planet. More so than concerns of cost, taste, or freshness organic shoppers showed the highest levels of motivation based on the belief in the validity of their buying practices due to the perceived overall health benefits for themselves and the environment (Massey, Ocass, & Otahal, 2018).

While altruistic grocery shopping certainly sounds good, the reality is often more starkly cast in light of what is actually affordable for the consumer. A frequent complaint about the purchase of nutritious foods was about its higher cost. Realistically, cost was one of the key issues concerning grocery shopping despite an appealing food label “it would then be the pricing factor that I would consider more” (LP). Healthy food in general costed more and involved additional preparation time. Buying healthy foods can be expensive and “honestly, I would love to go to Whole Foods and just get whatever I want to get but it’s just so expensive that I can’t really afford it unless it’s on sale” (AW).

To the most health-conscious for whom wellness was the utmost priority, cost alone was not seen as an impediment. These individuals were willing and able to pay more or find an ingenious method for procuring better quality food. These healthy and frugal consumers expended more time and effort to buy only what was necessary according to one participant, “I look for quality and quantity, so I’ll choose something with more stuff than something with less because I’m getting a little more for what I’m paying for” (JD). The more motivation and intention to shop healthfully, the more focus
and scrutiny was paid to the nutrition facts panel and food labels rather than just the front of package marketing (Turner et al., 2014). In order to maximize nutritional gain and stretch finances further, one participant stated “in the end, I look at the cost and what the ingredients are. Do I need this? Do I want to eat this? Do I have this at home?” (AW).

One focus group attendee articulated his strategic approach to buying the healthiest possible foods for the least amount of money:

I think my frugality would come from buying bulk items. If it’s in the bin (bulk) then I’m buying it. Usually it’s less per ounce than a prepackaged item. So if I am at Whole Foods, I’ll be in the bulk section buying large amounts of dried fruits and nuts. Which is a way of cutting costs when you’re eating healthy. Eating healthy will always be more expensive. (MM)

Health-conscious customers relied on many sources of information during grocery shopping yet they were also highly discerning when making their selections. While shopping for nutritious products, the experienced consumer developed a solid base knowledge of nutrition and was therefore skeptical about outlandish claims of great health benefits (Keller, Landry, Olson, Velliquette, Burton, & Andrews, 1997). A critical outlook was beneficial as voiced by one participant who asserted “I don’t buy into the trends but still buy normal foods too, best for me and my health, best cost, and best value. I don’t believe that all the labels are true and accurate anyway” (AW). The more motivated a consumer is, the more he/she will patiently analyze the health claims, ingredient list, and nutrition information on the label (Keller, Landry, Olson, Velliquette, Burton, & Andrews, 1997).
When deliberating about what to buy, informative labels became vital reference points in helping shoppers make their final decision. A purchase decision is subsequently more likely to occur if there is a purported benefit that also indicates which constituent vitamin, mineral, or nutrient it is derived from (Hasler, 2008). Those in the health-conscious category sought out and valued as much information about their foods as possible to decide between the variety of options. This leads to the fact that touting nutritional benefits on food labels, it was found, creates a marked increase in consumer purchase decisions (Nestle & Ludwig, 2010). Based on the findings that the more health-conscious an individual was, the more supplemental information that accompanied an organic label, the higher likelihood the customer would trust and therefore purchase the product (Batte et al., 2007). Stran and Knol (2011) write that when deciding what to buy, the higher percentage of those who tended to utilize labels were younger health-conscious educated consumers with a positive nutritional outlook and active weight management strategy. Based on all the many food options available, one activist minded participant said that he felt “very empowered. Today there are more choices” (MM).

The moderately health-conscious consumers were aware of healthier purchasing decisions they felt they should yet didn’t always make. Through the proper use of food labels, these individuals could make healthier grocery shopping decisions thereby addressing the ill effects of a poor diet in the past (Helfer & Shultz, 2014). Once exposed and familiarized with a food label, people were more likely to choose the healthier option (Cecchini & Warin, 2015). If used properly, prudent choices could be made as echoed by a participant saying “I tend to compare food labels nutritionally when two products are similar in price” (SC). The more engaged and aware a shopper is, the more he/she will
scrutinize the product label for detailed information before making a purchase while the less informed shopper will be more susceptible to generalized information (Walters & Long, 2012).

Less informed shopping habits were clearly displayed by the minimally health-conscious participants who used labels only to a cursory degree and often not at all. Perhaps this was due to a lack of knowledge and the label literacy necessary to shop proactively as one respondent acknowledged “my grocery habits are lazy, I don’t make the effort to read or learn what the labels mean. I have the power but I don’t want to put energy to it. Convenience is key for shopping and eating out” (JF). Due to a general lack of self-awareness Chandon, Morwitz, and Reinartz, (2005) report that many people themselves are not able to provide a testimony of what analysis they used to make a purchase. From the research, this category of participants consistently didn’t either plan thoroughly or reflect back upon purchases but rather shopped out of convenience and necessity.

The minimally health-conscious shoppers often made purchases impulsively. Understanding enough about the importance of good nutrition was a basic parameter without which ambivalence prevailed as an interviewee replied curtly “yeah, like me. I don’t understand. Ok, I'll eat what I like” (MA). When looking to buy food motivated by a craving, there is little to no attention paid to the back of package nutrition information and rather only a cursory front of package glance (Turner, Skubisz, Pandya, Silverman, & Austin, 2014). There was a sentiment of freedom and independence amongst the least health-conscious as asserted by one individual who said “I have the power to make good food/health habits and it will always be a personal decision to choose the right foods,
therefore making a choice to eat better is in my own hands” (JP). The power of choice was in everyone’s hands yet which decision was made had deeply intrinsic motivations unique to each individual.

*The Organic Label*

A key component in the contemporary discussion about food with relevance to this study is the organic label. The organic label is a USDA approved designation that mandates specific production and growing methods. The results from this research supported the body of literature that health-conscious customers predominantly preferred and purchased organically-labelled products. This is due in part because organic agriculture is perceived as wholesome and ecologically beneficial by the public (Arvola et al., 2008).

The organic label was appealing to health-conscious customers because it provided an assurance of food quality and safety. Janoff (2001) asserts that consumers purchasing organic products are savvy; seeing beyond the brand names and read deep into the labels, nutritional fact sheets, and sourcing information. The health-conscious public is motivated to buy organic products due to the diminished amount of chemical residue and the belief that the produce is fresher, tastier, and more nutrient dense than conventionally grown crops (Zimmerman, 1999). Moderately health-conscious participants who weren’t always certain about their knowledge felt better buying organic even though “I don’t know if organic necessarily changes the decision but I do tend to buy organic just because it’s there. Maybe there are less chemicals used in raising or producing certain products” (SC). Regardless of whether it was fully understood by all
consumers, the organic label bestowed positive validation like a universal seal of health approval.

The positive effects of the organic label extended beyond the grocery store. Studies show that organic agriculture is healthier both for the public and environment (Paul & Rana, 2012). Nie and Zepeda (2011) describe that purchasing local organic foods is not merely about consuming calories but rather espousing a proactive optimism toward a better future. Arvola et al., (2008) heralds the elevated ethical sentiment ecologically and societally resulting from positive association with organic products. The organic label designation is imbued with an intangible moral yet highly marketable qualities that target a consumer base eager to affect change in the world most conveniently through their purchases (Massey, Ocass, & Otahal, 2018). Buying organic also confers a degree of self-aggrandizement to the buyer who feels that he or she is doing what is best for himself or herself as well as for the environment (Kareklas, Carlson, & Muehling, 2014).

Buying organic signals an investment of money and time in one’s health. Drawing new shoppers to purchase organic came down more to accessibility and convenience rather than the barrier of higher cost (Massey, Ocass, & Otahal, 2018). Willingness to invest more time and effort to cook healthy meals as echoed by the sentiment of a participant stating “we don’t buy a lot of premade foods, we usually make it ourselves” (JD).

Locally-Sourced Food Supply in Hawaii

Foods are considered local if grown in close geographic proximity to market for ease of access to consumers. Local produce is often fresher and more nutritious than imported food due to the shorter distance traveled. As food and sustainability issues
become more prevalent in Hawaii, health-conscious shoppers increasingly have turned towards purchasing locally-sourced foods. Despite a higher cost, these consumers would often willingly spend more seeking out local foods as one participant articulated “most of the time I try to find something that looks fresh and to get it from local markets that’s even better” (JD). Buying local is another way to directly connect with one’s food source in a tangible manner (Cooper, 2007).

Despite the many persuasive reasons to buy local, there are setbacks to the proliferation of local food movements. While local organic produce exists abundantly in Hawaii, Suiyanata (2002) indicates that large supermarket chains prefer to contract with California organic distributors due to their consistency, reliability, and lower cost. Despite less ease of access and availability, committed consumers sought out fresh local foods that they believed in and could trust.

This sentiment was echoed by one devoted health-conscious participant who retorted:

I avoid anything made in California, they are one of the main producing states 80% of the products from the US come from CA, and I know that they are huge on pesticides so that’s why I try to avoid it. I choose to buy local even though I know that they use pesticides in Hawaii but maybe it’s not as bad as other places. If it was organic from California, I probably would buy it. I feel like I don’t have that much power in my choice so sometimes that’s the only product that there is.

(JD)

Buying local also helps to identify what priorities are most important to a shopper such as “…the ingredients in it. Where it is produced and manufactured? If it says China,
I might be a little worried” (SB). Branding local is critical to inform the customer that there is a choice which would support the community farms and provide a connection to his/her food source (Cooper, 2007). Proactive healthy individuals have become more aware of the deleterious effects of industrial agriculture, so shoppers look to see “if the label looks healthier because it’s local then it probably hasn’t been frozen or has chemicals inside of it then I feel like I’m getting a better-quality product for my own health. I usually try to buy those” (JD). In a sign of the times, grocery stores which tended to reflect the cultural and socioeconomic demographic in which they were located are beginning to stock more locally-sourced foods as demand has grown.

The most health-conscious consumers were invested in both their own health as well as that of their local community. There is such a demand for organically produced local food that people will willingly spend more for what they perceive as more desirable (Carter, 2008). One activist-minded individual stated plainly that what he eats is “organic, live, and local is what I choose” (MM). Local food provides a clear sense of its farm source and proximity therefore another participant stated “origin of the food is critically important to me” (LT). Thus, Cooper (2007) implores the notion that the more a person knows about their food, the more they will care and realize that they wield a great deal of purchasing power when deciding to buy local. Beirne (2007) notes the growing trend that most consumers simply want more transparency about their food; nearly an impossible demand from an industrial agriculture corporation opaque in its sourcing yet more than feasible from a local farm. With a growing awareness of sustainability issues, locally sourced produce is becoming more desirable for its freshness, value, and community support (Cooper, 2007).
Chapter VII: Conclusion

The final chapter of this paper will address the findings of the research and comment on the overall project. It will also consist of the limitations of the study, suggestions for future study, and concluding remarks. This study about food label use and health-conscious identity endeavored to understand how residents of Honolulu, Hawaii utilized food labels to make their grocery shopping purchases. Through the lens of food label awareness and engagement this paper sought to ascertain qualitative methods for consumer nutrition communication interpretation. With the intention of determining how much the food label was used when buying a product in order to understand underlying grocery shopping motivation — the intangible aim was to ascertain how much the label affected the participant’s self-perception. With specific interest towards health-conscious awareness, the study sought to understand whether the labels subsequently affected, enhanced, or bolstered participants’ perceptions of themselves as living a healthy lifestyle. It was determined through this study that individuals used food labels based on predetermined personal preferences that fundamentally bolstered a preexisting steadfast and unwavering health identity.

Limitations of Study

The limitations in the study involved gaining the access to a wide selection of health-conscious participants. While attempted, this study and research data also lacked generalizability to all consumers as well as external validity. While health-conscious individuals comprised half the number of participants in this study, a larger resource pool would have provided more insight and in-depth information. Ideally, there would be a wide demographic sample size of natural grocery store customers, feasibility to meet
participants on multiple occasions, and an extended duration of time allotted to gather
data. This is exemplified by a heterogeneous slice of health-minded consumers ranging
from committed co-op members to trendy Whole Foods devotees to frugal college vegans
which would elucidate what goes into healthy grocery purchasing decisions and identity
creation at all societal levels.

**Suggestions for Future Study**

For future study, a survey selecting a broader sample of people would be
beneficial to understand the motivational background of health-conscious consumers. In
this manner, it could be ascertained how they came to live this lifestyle and to determine
whether this could be replicable towards other demographics. It would be beneficial to
study individuals who had previously unhealthy lifestyle practices but then made a
permanent change toward a healthier lifestyle. Understanding how conspicuous health
trends developed through the lens of Thorstein Veblen and his theory of conspicuous
consumption would be insightful towards future research. Greater investigation would
also be worthwhile into how health and wealth have become so inextricably linked. It
would be informative as well to conduct a greater analysis of the changing perception of
food based on the rise of social media. Ideally, the researcher would accompany each
participant on multiple grocery store visits in order to ascertain their shopping habits and
track this over a month-long period.

At a more advanced technological level, a visual heat map of consumer food
labels would provide insight as to where customer concentration occurred. This is due to
the fact that most shoppers only gives products a brief glance for recognition and labels
even less attention. To facilitate visual analysis would entail utilizing eye tracking
technology that traced what details of the package a shopper looked at and for how long. Further suggestions for future study would entail acquiring participants’ medical records to correlate their diet to their health in order to provide certain concrete answers about the effects of eating habits. It would be worthwhile to study what effects could change a person’s eating and grocery shopping behavior. These research interventions would require a great deal of oversight and approval to be implemented, therefore entailing a long-range analysis that could occur tracking those health effects over the long term.

For further study, conducting a grocery shopping participant observation with each research candidate would provide first hand evidence of the purchase deliberation process. This process would be conducted with each individual in order to conduct an ethnography of their trip to the grocery store. This would then allow the researcher to directly observe how the in-store customer browsing, label reading, and decision making process occurred. To expand this research, it would be beneficial to speak with shoppers who frequented Honolulu natural food stores. Setting up an interview table at grocery stores such as Whole Foods, Down to Earth, and Kokua Market would generate a plethora of unique data based on the heterogenous nature of the customer base. This would elucidate a number of promising customer interactions ideally leading to further in-depth interviews. While it is surmised that certain trends would rise to the surface such as greater affluence and education leading to healthier food choices, it would be insightful to learn about how people from all walks of life shopped and ate in a nutritious manner.

To proceed in the future with this subject matter, it is imperative to understand what purpose the food label serves to consumers. Understanding how people make
choices underlies the essence of this study and to conduct this on a large scale, shoppers of all kinds would be surveyed and interviewed. The results of this study matter to the health-conscious community because it empirically reinforces their beliefs and practices. The fact that the food label is critical to the healthy consumer’s grocery shopping methods underlies the importance of understanding what labeling means to this consumer base. Those seeking to eat in a nourishing manner highly prioritize this aspect of their lives therefore the label becomes indicative of who they see themselves as. The results also matter to those looking to improve their health by realizing the potential and utility of food labels to make more nutritious choices. This information matters to educators who teach students the basics of diet through the label vocabulary and nutrition language in order to navigate the complex world of grocery stores.

Further gaps that scholars should consider include studying the effects of socioeconomic disparities in grocery shopping, daily food consumption habits, and entrenched beliefs about the feasibility of eating nutritiously. A significant gap in this research is developing a better understanding of where people acquire their knowledge about nutrition. This attribute was responsible for establishing long term beliefs and behavior. The discussion would best proceed in the direction of addressing the lower socioeconomic demographic of society interested in a healthy lifestyle yet struggling with methods for how to do so.

**Concluding Remarks**

It could be said that all people desire to be in a good state of health yet that is not the reality for many people. Despite living in the United States with technological advancement and modern mechanized agriculture there has come a decline in human
health. Paul and Rana (2012) write that standards of living have gone up around the world yet so have many markers of disease; many attribute this to a rise in the consumption of industrialized food manufacturing. For far too many, healthy eating has simply become a luxury that they cannot afford.

Our perception of health begins early in life with exposure to foods during childhood. This leads to acquiring knowledge and its applicable utilization to create our individual lifestyle. Each person attaches a strong association between their personal identity and lifestyle practices. Thus, throughout the course of the research, it became apparent that people’s beliefs and attitudes were strongly ensconced in their self-perception. This study has shown that those who are more mindful of their consumption will eat healthier foods. It was also determined that health-conscious individuals use food labels more than less health-conscious individuals. While making a significant improvement in one’s lifestyle habits requires a great deal of effort, the first step is a shift in mindset to develop an awareness about the possibility for change.

Upon completion of the research, differing categories were established composed of unique individuals who had all determined what was the ideal lifestyle for themselves. Each person came to embody specific attributes and attitudes based on a lifetime of experience, exposure, and education. The manner in which they came to grocery shop and eat was a manifestation of these deeply cultivated and routinized characteristics. The more frequently participants used food labels, the healthier their choices were. Yet determining how people had become healthy to begin with was unique to each person.

The most health-conscious individuals saw eating as more than merely for pleasure or entertainment but rather for thriving and empowerment. Though healthy food
was often more costly, the health-conscious consumers were not any wealthier than those less health-conscious. For them it was more a matter of priorities and how they wanted to spend their time and money. There was a recurring sentiment amongst this group that attaining good health required initiative and proactivity which no one else would provide for them. Ironically, the categories that shared a similar attitude were the most and least health-conscious stemming from their mutual confidence in their beliefs and behavior. Both groups were self-assured in what they purchased and consumed, believing that it was based on what they knew to be best for themselves. While possessing the knowledge and wherewithal, the moderately health-conscious group had more self-doubt in their attitudes and felt more helplessly affected by external factors. Health-conscious participants used food labels strategically yet they were also more skeptical, critical, and distrusting of government and corporations whose self-interest usurped that of the consumer. The greatest differences amongst the participants was their degree of personal investment in their health, with the most health-conscious being the most active and the minimally health-conscious being the most passive. The health-conscious consumer was healthy for the sake of health and well-being alone without the need for external accolades or validation.

Due to confusion about what to eat and what not to eat, there is a need to explore the utility and feasibility of food labels as an ambassador of nutritional communication for the grocery shopping consumer. Food it would seem, has a different meaning to different people. It is utilized for sustenance, energy, and survival yet it is also consumed either consciously or unconsciously. The food label is therefore a communications tool that is used by each individual differently to shop, eat, and define who they all uniquely
are. All possess the ability to decide what to purchase and consume — the power of choice. Eating better and becoming health-conscious is a lifestyle attribute that requires dedication and commitment which anyone could achieve. It was revealed through this research that once a person became health-conscious, they were able to take better control the role food played in their lives. We navigate the world of health through different lenses and the food label provides a compass to help us find our way.
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Appendices

Appendix A: Letter of Consent

University of Hawaii
Consent to Participate in a Research Project
Eric Grebe, Principal Investigator

Project title: ACTIVELY CREATING A HEALTH-CONSCIOUS LIFESTYLE THROUGH FOOD LABEL LITERACY IN HAWAII

Introduction
My name is Eric Grebe and you are invited to take part in a research study. I am a graduate student at the University of Hawaii at Manoa in the Department of Communications. As part of the requirements for earning my graduate degree, I am doing a research project about food label use in Hawaii.

What am I being asked to do?
If you participate in this project, I will meet with you for an interview at a location and time convenient for you.

Taking part in this study is your choice.
Your participation in this project is completely voluntary. You may stop participating at any time. If you stop being in the study, there will be no penalty or loss to you.

Why is this study being done?
The purpose of my project is to evaluate the use and effectiveness of food labels during grocery shopping. I am asking you to participate because you fit the criteria as a resident of Hawaii who shops for food.

What will happen if I decide to take part in this study?
The interview will consist of 10-15 open ended questions. It will take 45 minutes to an hour. The interview questions will include questions like: “Can you walk me through a routine visit to the grocery store?” “The last shopping trip – What did you buy?” “Meanings attached to food products – Why did you buy it?” “Changes in shopping patterns – What made you change your shopping routines?” “Organic food labelling – How trustworthy do you find various organic food labels?” “Use of food labels – How much do you utilize food labels when making a purchase?”

Only you and I will be present during the interview. With your permission, I will audio-record the interview so that I can later transcribe the interview and analyze the responses. You will be one of about 15 people I will interview for this study.

What are the risks and benefits of taking part in this study?
There is little risk to you for participating in this research project. You may become stressed or uncomfortable answering the interview questions or discussing topics with me due to the structured nature of the interview. If you do become stressed or uncomfortable,
HEALTHY LIFESTYLE CREATION THROUGH FOOD LABELS IN HAWAII

you can skip the question or take a break. You can also stop the interview or withdraw from the project altogether at any point in time.

There will be no direct benefit to you for participating in this interview. The results of this project will help me fulfill the requirements for earning my graduate degree and may indirectly improve your own nutritional awareness, lifestyle, and food label use as well as that of others with whom you come into contact.

**Privacy and Confidentiality:**
I will keep all study data secure and encrypted on a password protected computer. Only my University of Hawaii advisor and I will have access to the information. Other agencies that have legal permission have the right to review research records. The University of Hawaii Human Studies Program has the right to review research records for this study.

After I write a copy of the interviews, I will erase or destroy the audio-recordings. When I report the results of my research project, I will not use your name. I will not use any other personal identifying information that can identify you. I will use pseudonyms (fake names) and report my findings in a way that protects your privacy and confidentiality to the extent allowed by law.

**Questions:**
If you have any questions about this study, please call or email me at [(808) 722-1113 & egrebe@hawaii.edu]. You may also contact my advisor, Dr. Hanae Kramer, at [hanae@hawaii.edu]. You may contact the UH Human Studies Program at (808) 956-5007 or uhirb@hawaii.edu to discuss problems, concerns and questions; obtain information; or offer input with an informed individual who is unaffiliated with the specific research protocol. Please visit http://go.hawaii.edu/jRd for more information on your rights as a research participant.

If you agree to participate in this project, please sign and date this signature page and return it to: Eric Grebe

Keep a copy of the informed consent for your records and reference.

**Signature(s) for Consent:**

I give permission to join the research project entitled, “ACTIVELY CREATING A HEALTH-CONSCIOUS LIFESTYLE THROUGH FOOD LABEL LITERACY IN HAWAII.”

Please initial next to either “Yes” or “No” to the following:

____ Yes  _____ No  I consent to be audio-recorded for the interview portion of this research.
Name of Participant (Print): _____________________________________________

Participant’s Signature: ________________________________________________

Signature of the Person Obtaining Consent: ________________________________

Date: __________________________________________________________________
Appendix B: Interview Questions

1. Can you describe what good health means to you?

2. Where did you learn and where do you now learn about nutrition?

3. How empowered do you feel to make a change in your health?

4. How much control do you feel you have over your health?

5. Can you walk me through a routine visit to the grocery store?

6. Use of food labels – How much do you utilize food labels when making a purchase?

7. How does a food label affect your decision to buy a product?

8. How effectiveness is a label design in gaining your attention?

9. How does food label/package/brand design capture your attention?

10. How often do food labels influence your shopping decisions?

11. What role does the product label play for you when making your purchasing decision?

12. In what manner does the product label affect your personal belief of living a healthy or unhealthy lifestyle?
Appendix C: Focus Group Questions

Can you describe what good health means to you?

How empowered do you feel to make a change in your health?

How often do you buy foods for the benefit your health?

How much do you utilize food labels when making a purchase?

How does a food label affect your decision to buy a product?

How effective is a label design in gaining your attention?

How does food label/package/brand design capture your attention?

How does the food label affect your personal belief of living a healthy or unhealthy lifestyle?

What role does the food label play for you when making your purchasing decision?

What amount of information do you seek to have about the foods you purchase?

**Questionnaire**

1. What role does the food product label play for you when making your food purchasing decision?

2. In what manner does the food product label contribute to your personal identity of living a healthy or unhealthy lifestyle?

3. Through your food and grocery shopping habits, how empowered do you feel to take control of your health?

4. Does the product label reinforce your personal belief of being a health-conscious consumer?