

Cassady Cavella

Dr. Walker Edin

COMP 211

17 November 2016

### Participation or Extrinsic: The Illusion of Health

Detrimental advertising goes beyond skewing body image. Appropriate ideas of health are crumbling under the weight of phony products, promotions, and life styles. When nature and nurture combine, individuals vastly differ from their neighbors. Therefore, no picture representation of health should apply to everyone. How can one product have broad appeal to a diverse group when the only unifying factor is being subjected to an advertisement? Ideas of health change as quickly as one billboard to the next. True health stems from a balanced variety in diet, concern for internal factors, and stability- not convincing products and crash diets. The Oxford English Dictionary defines “health” as being “wholesome” (“health”). Regrettably, some consumers are fooled and participate in an illusion of health at a steep price. To help highlight problems that are hidden in normalcy I am researching advertisement claims in contrast to real consumer knowledge, classification of choices as healthy versus unhealthy, and how these factors dictate consumer action and ultimately their health.

First, let’s examine a product that is almost convincing. Neuro drinks are an alluring twist on energy drinks, unless the consumer researches the product beyond the bottle. To reap the benefit of marketing a healthy product while actually selling an energy drink, producers have advertised the Neuro brand cleverly. Neuro claims to enhance a variety of experiences

consumers encounter throughout the day. NeuroBliss, NeuroSleep, NeuroTrim, NeuroAqua, and NeuroDaily are a few ‘flavors’ advertised on the website and in stores (n.p.). On the bottle of NeuroDaily, large font reads “daily health.” The drink contains 250% of daily vitamin D and has only 35 calories. Does that make it healthy? It is certainly not the “wholesome” health referenced in the Oxford English Dictionary (“healthy”). Based on ingredients and logic, the claim of “daily health” is weak at best. But, it is also enticing. Even with weak claims, local consumers are manipulated into an illusion of easily attainable health.

Intentional personal research provides the only efficient way to decide what products meet individual standards, and what should be left on the shelf. Continuing with the example of Neuro drinks, their advertising is done well. The bottles are visually appealing, they do not have fat, and include a large amount of vitamins. So where does the problem stem from? The Neuro website and the advertisements embedded are troubling. The site features a letter from the CEO, Sanela Jenkins, filled with problematic claims. Jenkins, a human rights and international justice activist, is not qualified as an authority in nutrition. Furthermore, the only source she utilizes is “science” (n.p.). The product promises big effects, none of which are backed by credible authority or research.

The next red flag for Neuro is claiming the drinks are gluten free, kosher, and 35 calories. These qualifiers are not bad, but are unnecessary outside of personal heritage and allergies. Recall the Oxford English Dictionary defining health as “wholesome” (“health”). Jenkins writes that Neuro drinks “help your body get what it needs” (n.p.). From a metabolic standpoint, a body needs more than 35 calories. Because consumers are not receiving sufficient energy from calories, Neuro drinks contain extra ingredients to produce their desired effects. Do these additions make them healthy? No. Informed consumers should question who regulates these

ingredients (n.p.). Moderation is the key in allowing these drinks to be healthy. There is no need for excess; there is little to gain from 250% daily value of vitamin D. There is also no need for minimizing calories in the name of consuming more. The product promotes excess in some nutritional areas while lacking ingredients in others. Concerning quality, it is a complete bust.

The final and most concerning problem with the Neuro brand is deception. All companies need to turn a profit, but Neuro comes rooted in deceit to do so. Molly Crockett, a neuroscientist, delivers a speech titled “Beware Neuro-bunk” at TED in 2012. She discusses the effect of the image of a human brain on consumers. Products featuring a brain are proven to be given more credibility (n.p.). Neuro differentiates itself from other forms of energy or otherwise enhancing drinks with their name- Neuro. Producers and advertisers know the word “neuro” along with the image of a brain featured on each bottle entices consumers. This product, like many others, is based solely on appearance and advertising. The content of the product does not prove valuable under scrutiny. Deception is bridging the gap between a bad product and consumers.

In the same TED talk, Molly Crockett refers to the “evolution of a headline” (n.p.). She studies tryptophan and its effect on decision making. Because it is also found in cheese and chocolate, headlines claimed that a cheese sandwich or chocolate would help with decision making (n.p.). The headline does no justice to her work by making light of a complicated neurological study for the sake of being catchy. Consumer knowledge falls short due to the stimulating yet ultimately uninformative information that is rampant in advertisements. The “evolution of a headline” can also be observed in an article by Alexandra Sifferlin titled, “How Fructose May Trigger Body Fat.” This headline overshadows the heart of the study at hand, replacing it with click-bate for internet-browsing consumers. Reading the headline provides a false sense of gaining applicable knowledge.

Consumers want to look and feel healthy. Body fat is a topic repeatedly addressed in and outside of advertising. Through discussing distribution, gain, or loss of body fat, advertisers and the media manipulate consumers extensively. This is because the issue is so personal. The content of Sifferlin's article details a study about mice with diabetes absorbing fructose more quickly than mice without (n.p.). From this, the title "How Fructose May Trigger Body Fat" arises. Her article does not appear to have a secret agenda of manipulation, but it falls short of being academic. This holds true for a huge amount of information browsed through online. Consumers do not even have to go looking for these articles, the bulk of them simply appear on a newsfeed. The title misleads readers about the information. So much information about nutrition, especially how it affects the fat in consumer's bodies, is presented in an unhelpful, unproductive manner. Thus the divide is increasing between advertised health and personal knowledge on the topic.

Furthermore, the article does not answer the question it poses. It reviews the basic points of a study done on diabetic mice who process fructose quickly (n.p.). This review is not what consumers of TIME expect when they open the article. They expect to learn about fructose and its effect on their body. Even so, the headline itself is utilized as educational- a telling example of consumers and their shortcomings. People want to know what is good and bad for them; but, their attempts are damaged by larger attempts to sell products by way of the most interesting headline. This article that appears to have information on diet addresses another topic entirely. In the most positive scenario, people will remember the headline and steer away from excess fructose. The kink in this optimistic argument is that fructose is not bad. Fructose is one of several monosaccharides coming together to form sugars. It is also one of the sweetest monosaccharides, and therefore commonly used (Whitney).

There is nothing about sugar that is inherently unhealthy. It is when sugar is eaten in excess that it becomes unhealthy. The clear line emerging between unhealthy and healthy is excess. Proteins, carbohydrates, and fats all enter the body and become energy. As food is over consumed, ATP levels become high and fatty acid is synthesized. Fatty acid is stored as body fat (Whitney). There are also an abundance of unhealthy factors moving away from excess to the other extreme. The most obvious is malnourishment. A version of this more relatable to northeast Tennessee and several American cultures is romanticizing intentional deprivation of nutrients, mainly carbohydrates, in the name of eating healthy. In an attempt for health, fad diets routinely suggest cutting carbohydrates. As protein becomes the main product yielding ATP energy, the bi-product urea is produced at levels with potentially damaging effects to the kidneys (Whitney). The only balance found in healthy eating is actually observing a balanced diet. Eating a variety of foods in amounts appropriate for specific energy needs is the best path to a healthy diet.

A large factor in incorrectly classifying products and ideas as healthy or unhealthy is taking information from the wrong sources. Advertisers' goal is to sell a product, not to sell the *best* product. Without personal education and reflection of consumerism, it is easy to accept labels at face value. Products like Neuro drinks and articles such as "How Fructose May Trigger Body Fat" are not challenging to dissect. But, they do require careful consideration to determine their worth. The wrong source does not have to be a scheming corporation. It can be as basic as not reading the nutrition label or giving claims about health more weight than they deserve.

The slippery slope of being too trusting and discovering too little individually is reversible. Self-education forms the foundation of the reversal. But, there are too many products to rely on it solely. Researching them all is unreasonable. Finding vendors that are trustworthy provides a good start. For example, Fresh Market is notable because of its wide focus on several

aspects of health. Fresh ingredients go hand in hand with the limited supply of magazines covering topics such as cooking instead of promoting false body ideals and trends. Even in settings such as Fresh Market, personal education should not be set aside. Certain products cycle through popularity; as their recognition waxes the consideration given to overuse wanes. After all, if there are enough articles on Pinterest about coconut oil, it must be good, right? Wrong. Coconut oil is high in saturated fat- considered a “bad” fat (Whitney). Where most plants produce “good” unsaturated fats that are liquid at room temperature, coconut oil produces solid saturated fat. Crisco Pure Organic Coconut Oil contains 64% of daily saturated fat in one tablespoon. This is a health fad, not a health food. The emergence of coconut oil as a diversely applicable product overshadows the fat content. The result is overusing and making unhealthy a product which could be healthy in moderation.

Fresh Market also does well by *not* featuring a supplement section in the front and center of their store like many health food markets do. By leaving this section out, they avoid appearing to claim that their store is *the* solution to being a healthy consumer. Front and center at Fresh Market in Johnson City is a sweets section. Although sweets are not a diet staple, when eaten in moderation there is no reason they should be considered unhealthy. They are a store that promotes quality products to steer consumers in the right direction without trying to coin an entirely new idea of health through their store brand. They provide a good starting point while allowing consumers to exercise their personal knowledge. As a result, Fresh Market thrives as a health food store without manipulating individual ideas of health for profit.

Deepening the meaning of healthy and unhealthy requires consumers to look beyond a foundation of knowledge and balanced views concerning excess. This simplistic view of healthy living does not take social pressures, influence, or busy schedules into consideration. Too often

consumer judgment is not dictated by careful consideration, but by necessity. For example, too much caffeine is bad, but “America runs on Dunkin” (Dunkin Donuts). Heavy outside pressures contribute to health perception and the resulting consumerism. The *American Journal of Public Health* published the article “Cultural Reflexivity in Health Research and Practice.” In this article the authors discuss what and who constitutes health. They write:

This conception of health implies that health is about what people do and what they decide, obscuring the many ways in which health is produced independent of individual behaviors, overlooking how opportunities are restricted in some environments and legitimizing the behaviors of those in positions of cultural authority while devaluing the behaviors of marginalized groups. (404)

People look up to the wealthy and therefore the practices of the low income population become devalued and labeled “unhealthy.” Mimicking the behavior of the wealthy provides an interesting view of health trends in northeast Tennessee. Over the past 20 years eating at home has transitioned from a lower income norm to being considered a healthy alternative to dining out. Oppositely, fast food previously provided an easy meal for those who could afford it. Now, fast food is a staple of the lower income families. This area has followed the journal article’s observation. Being healthy in a stylish way has become popular.

Healthy living becoming more popular has no positive effect on those who cannot afford it. Obesity is one of the most prominent health issues in northeastern Tennessee. This situation fits nicely on top the ideas of “Cultural Reflexivity in Health Research and Practice” (403-408). Those who are the most well off set the bar for what health *looks* like. The scholar Cheryl Warsh wrote a book titled *Gender, Health, and Popular Culture: Historical Perspectives*. The previously mentioned article proposes where the visualized idea of health comes from while

Warsh's book says that "this body ideal became the normalizing lens through which other bodies were judged and condemned" (218). This is harsh but accurate. This standard to live against is a major cause of self-esteem and mental issues trickling into the broad pool of factors composing individual health.

This harshness of Warsh's quote is also a determining factor in consumer action. Overwhelming standards may provoke bad choices. Recall that the wealthy only set the standard for what health *looks* like. Ideally this would be separate from the components of actual health; but, that is not reality. These idealized images of health and being subjected to comparison are damaging to the pursuit of real health. Feeling inadequate financially, embarrassed by factors contributing to personal health, or being envious of people who do not carry those same burdens make advertised health a dangerously appealing illusion. They give a false hope to consumers by advertising an easy shortcut- moving from being viewed through the "normalizing lens" to being the "ideal body" that sets it (218). These feelings overshadow the value of seeing products for what they really are, which is often deceptive. They also blur out the importance of personal knowledge that keeps decision making in check.

Once different financial classes of people have been assumed to have a certain health status, it is hard to undo the resulting mindset. Even honorable attempts to help disadvantaged people backfire. In fact, most of the time they backfire. A good example is a mailing sent out by BlueCare. Because it is free health insurance those who receive it are to some degree low income. The pamphlet is titled "Your Journey to Good Health Starts Here" (n.p.). First, it assumes that the lower income portion of the population have an entire journey to complete before they reach "good health." Upon opening, it reads in bold letters with a large red "x": "YOUR CHLYMADIA SCREENING IS OVERDUE" (n.p.). Although the goal is to promote

screening, it is offensive. This reflects the article on cultural reflexivity because the lower income portion of the population is assumed inferior based solely on finance. The assumption that they should *all* be screened for chlamydia is absurd. They are singled out because of a lower income circumstances; as a result, the safety of their sexual lives is questioned. Low income does not equate with thoughtless and unhealthy. These “honorable” attempts to help the underprivileged assume that qualifying for BlueCare also qualifies participants as likely to be careless. The well-meaning pamphlet conveys more condemnation of life choices than care for those who may need help.

Another unfortunate attempt to help is a pamphlet titled “Watching Child Weight” produced by the Tennessee Health Department (n.p.). Like BlueCare, the Health Department suggests that they have a lower income class in mind. The pamphlet is oversimplified to an insulting degree. They cater to an intelligence level so low it is hardly worth reading. Concerning the people who do need instruction that basic, the content itself is terrible. For example, in a list of suggestions to help children lose weight they include “giving hugs and kisses instead of food” (n.p.). These attempts to educate people who are viewed through Warsh’s “normalizing lens” is ineffective. Consumers are aware of what class they fit into. The over simplicity in the way people communicate with BlueCare participants, people at the Health Department, and lower income families in general can turn any good intention into a pointless endeavor. They should not be assumed incapable of sustaining healthy routines for themselves or their children because they are low income. This only feeds the idea of lower income people as less healthy and less capable. If every attempt to reach out carries an insult to their intelligence, their health, and their personal lives, than assumptions behind those giving help need to be reevaluated.

To recap, advertised health and actual health are very different and often in conflict. True personal health cannot be achieved by buying products. It is composed of fluid variables that differ in individuals. Even with health's fluid and complex nature, consumers may grasp it by similar means. One of which is being an educated consumer. Learning basic health information and researching products can have a big effect on a consumer's personal health. This information also helps bring elaborate claims back to earth, exposing products and ideas that are not intended to benefit the consumer.

In northeastern Tennessee the classification of healthy versus unhealthy is dictated largely by advertisers who generate Warsh's idea of the "normalizing lens" into reality (218). This is a result of the appealing illusion of health that is broadcast across several mediums to all socioeconomic classes, genders, and races. Consumers with no similarities to one another hear the same commercials and drive by the same billboards. In this way, advertisements have a unique advantage to influence a diverse group of people in a uniform way. Cramming such diversity into a common idea yields problematic classification of what is healthy. Another factor influencing classification of health is looking to others for a picture of health. Perceived attractiveness can be easily mistaken for healthiness. The idea of health viewed in this way casts a bleak shadow on a large portion of the community, specifically those with low income.

The solution to breaking the illusion of health and focusing on actual personal health is to first be knowledgeable. Behind every product is someone trying to sell it. Even good products are produced to generate profit. Consumers should know for themselves what is going to benefit them and what will not. Learning about nutrition goes hand in hand with product knowledge to maximize consumer success. The most important and least time consuming aspect of being a knowledgeable consumer is listening to the body. Eating a variety of foods in amounts that suit

individual energy needs is a healthy diet. Unnecessary excess such as the 250% of daily vitamin D and deprivation from certain foods cannot sustain real health. Moderation will keep consumers from falling into an unhealthy life as well as paving the way to a positive view of personal health.

Ideas of health are normalized in an effort to appeal to everyone, but the opposite should be true. To expose these cultural flaws buried in our daily routine, let's be aware of what advertisements are claiming and separate them from individual needs. Consumers should strive to be educated and ready to challenge any idea that compromises a personally held view of health. They should not ease into the illusion of health, but extricate themselves from it. The real benefit captured through responsible consumerism is participation in an individually approved, authentic health.

Works Cited

Aronowitz, Deener, Keene, Schnittker, and Tach, Laura. "Cultural Reflexivity in Health Research and Practice." *American Journal of Public Health*, vol. 105, no. 7, 2015, pp.403-408.

Crockett, Molly. "Beware Neuro-Bunk." TED. London. Nov. 2012.

*Dunkin Donuts*. 2016. Company. Tennessee, Johnson City.

"Healthy." Concise Oxford Dictionary of Current English. 1990.

Neuro Drinks. Advertisement. [www.drinkneuro.com](http://www.drinkneuro.com). 2016.

Sifferlin, Alexandra. "How Fructose May Trigger Body Fat." TIME: Health, 11 October 2016. <http://time.com/4525155/the-link-between-fructose-and-fat>. Accessed 11 October 2016.

Warsh, Cheryl Lynn Krasnick. *Gender, Health, And Popular Culture: Historical Perspectives*. WLU Press, 2011. eBook Collection (EBSCOhost). Web. 1 Oct. 2016.

*Watching Child Weight*. TN Department of Health. 2016.

Whitney, Michael. Macromolecules, 24 August 2016, Milligan College, TN. Lecture.

*Your Journey to Good Heath Starts Here*. BlueCare Tennessee. 2016.