

## **Food Well-Being In Low-Income Families**

### **Autoria**

Luisa da Motta William Guilhermino e Silva - luisawilliam@gmail.com

Bacharelado em Administração / USP - Universidade de São Paulo

Andres Rodriguez Veloso - veloso@usp.br

Prog de Pós-Grad em Admin/Faculdade de Economia, Admin e Contab – PPGA/FEA / USP - Universidade de São Paulo

Murilo Lima Araújo Costa - lima.muriloac@gmail.com

Prog de Pós-Grad em Admin/Faculdade de Economia, Admin e Contab – PPGA/FEA / USP - Universidade de São Paulo

### **Resumo**

The objective of this paper was to identify factors that impact food well-being in low-income families in São Paulo, Brazil. Therefore, it was designed a data collection instrument based on Food Well-Being theories that was applied during 17 in-depth interviews with low-income women, including C/D/E. The content analyzes enabled the identification of factors that explain Food Well-Being dimensions in the low-income families' context. The results point out that Food Well-Being is harmed by one's intrinsic aspects such as lack of knowledge, time, and resources to work on improving family diet. Furthermore, extrinsic factors such as healthy food unavailability at surrounding retailers, religion, media, and family members influences also play important role in determining Food Well-Being. These factors together are interchangeable, composing Food Well-Being level of a family.

## Food Well-Being In Low-Income Families

### Abstract

The objective of this paper was to identify factors that impact food well-being in low-income families in São Paulo, Brazil. Therefore, it was designed a data collection instrument based on Food Well-Being theories that was applied during 17 in-depth interviews with low-income women, including C/D/E. The content analyzes enabled the identification of factors that explain Food Well-Being dimensions in the low-income families' context. The results point out that Food Well-Being is harmed by one's intrinsic aspects such as lack of knowledge, time, and resources to work on improving family diet. Furthermore, extrinsic factors such as healthy food unavailability at surrounding retailers, religion, media, and family members influences also play important role in determining Food Well-Being. These factors together are interchangeable, composing Food Well-Being level of a family.

**Key-words:** Transformative consumer research, Food Well-Being, Low-income, in-depth interview, customer behavior.

### 1. Introduction

The Brazilian population has health-harmful eating habits since chronic diseases caused by overweight and obesity are the main cause of death among adults (Goulart 2005; Food Guide for the Brazilian Population 2014). The phenomenon affects all social strata, but it impacts more negatively the low-income stratum because the association of low levels of education and poverty explains the existence of health-harmful consumption habits, which generate obesity and direct impact on people's health (Goulart 2005).

At a certain point in Brazilian history, especially during early 2000s, there seemed to occur an opposite trend. Technological, political and social changes, including the increase in formal jobs and access to credit (Ponte and Mattoso 2014), positively impacted the social rise of thousands of people to the "C" class or - the "New Middle Class" (Neri 2010).

However, the economic problems experienced by Brazil in the last decade, added to the Brazilian Government's inability to deal with the pandemic caused by COVID-19 (Scott and Martin 2021), brought back a worrying scenario. According to *Época Negócios* (2016), about one million families will enter the classes D and E with an income of up to R\$ 2.166,00, in the next ten years, indicating the expansion of poverty in the country and the retraction of consumption in economy. This situation was enhanced by the problems caused by poor management of the pandemic.

In this scenario, the consumption of foods high in calories, sugars and sodium increases, generating growing negative impacts on the population with less access to information and quality food (Goulart 2005; Food Guide for the Brazilian Population 2014). According to these authors, the low-income population consumes up to three times as much of these foods as recommended. Simultaneously, despite the intense reduction of malnutrition in children, micronutrient deficiencies and chronic malnutrition are also other prevalent eating disorders in vulnerable groups of the population (Food Guide for the Brazilian Population 2014).

Paradoxically, while there is an improvement in hunger indicators, a worsening in the quality of food consumed by the lower social classes is arising (Cotta and Machado 2013). The "Food well-being" (FWB) model, helps to understand this phenomenon by listing the various influences that can negatively impact the food well-being of individuals: food socialization, food marketing, availability of food, food knowledge and food policies (Block et al. 2011).

Considering the model by Block et al. (2011), an outlook of how different factors can impact food well-being may be provided: (1) there may be barriers related to the assortment of products available for sale in certain regions that prevent access to better quality food; (2) products available for sale have low nutritional value and are calorically dense; (3) products with lower nutritional quality and more caloric density end up being those with lower prices (Cotta and Machado 2013). Additionally, the greater capillarity of these products at points of sale, the local culture and the influences of the closest social groups such as family and friends, among other aspects may be explored in order to understand the phenomenon. From this reveals is the objective of this study: to identify the factors that impact the Food Well-Being of low-income families. This type of research is important to understand the nuances of behavior that are related to the environment of low-income consumers. These specific aspects enable the construction of public policies, communication programs, or other initiatives that seek to improve the Food Well-Being of this population. Furthermore, the present study contributes to transformative consumer research once it highlights consumption practices of vulnerable individuals (Mick et al. 2012) and engages with human capabilities (food knowledge), providing insights that strive for transformative impact (Sridharan et al. 2017).

The following is the theoretical framework, focusing on the concept of Food Well-Being. After that, the data collection method is presented - 17 in-depth interviews with low-income women (classes C / D / E), including homeless people. In the data analysis section, the reports of the women interviewed are compared with the theories of Food Well-Being, a summary table is then presented with the dimensions and factors that explain this phenomenon. The discussions and final considerations are finally presented.

## **2. Background literature**

In this section, the concept of Food Well-Being will be presented in the perspective put by Block et al. (2011), bringing contributions from the literature on each of the dimensions in order to support the construction of the data collection instrument and the data analysis procedures.

### **2.1 Food Well-Being model**

The seminal work by Block et al. (2011) brought a new perspective to understand the food well-being of individuals and groups. According to the authors, a connection between food well-being and the existing positive psychological, physical, emotional and social relationship with food at the individual and social levels is valid. This process is influenced by cultural, environmental and legal factors that govern people's attitudes and eating behavior, positively or negatively affecting the food well-being of individuals. The analysis of this influence can be understood from five main factors: food socialization, food marketing, food availability, food knowledge and food policies. Understanding how these factors influence social groups is essential so that these groups can use this knowledge to make decisions that increase their well-being. In addition, policy makers, professionals and food business executives can use the wealth of this information to generate positive impacts on the social well-being of social groups (Bublitz et al. 2011). Below, each of the five factors are detailed and discussed.

*Food socialization* is associated with explicit exposure to the food variety and the implicit learning of the relationship with food as it is presented to the individual by agents such as parents, other family members, caregivers (nannies) and institutions such as schools (Bublitz et al. 2019). Since most of the habits are acquired on a daily basis, a solid family structure encourages the creation of a family routine and, consequently, the adoption of regular consumption habits. According to Appelhans, Waring, Schneider, and Pagoto (2014), the existence of regular meals within families is a variable that has a sociological role that tends to

benefit children's nutritional health. However, the existence of single-parent families is significant, which negatively impacts these aspects (Aguiar, Torres, & Meirelles 2015; Schnettler et al. 2018).

*Food marketing*, through the use of price, promotion, product design and distribution strategies, influences the individual's choices for food consumption (Dority, McGarvey, & Kennedy 2010). Noteworthy are the side effects that marketing can generate, especially in vulnerable populations, such as children (Connell, Brucks, & Nielsen 2014). It should be noted that the food marketing effects are also experienced by those people (eg, parents and caregivers) who are responsible for making purchasing decisions in the child's place. In addition, the effect that licensed characters can have on the child audience is unequivocal (Leonard, Campbell, and Manning 2019), although these characters do not have sufficient strength to persuade consumers to change their unhealthy food choice to a healthier one. (Scott and Vallen 2019). Even with the strong appeal of the licensed characters, the choice of the "right brand", often associated with the strategy of an efficient purchase, is essential for the low-income consumer, who believes that it may be more costly to make a wrong purchase than to acquire a more expensive but trustworthy brand (Motta & Casarin 2006).

The Food Well-Being paradigm explores how *food availability* and the choices of individuals influence not only consumption, but the selection of healthy options, thus recognizing the social factors that impact those living in food poverty (Bublitz et al. 2019). The growth of large cities, globalization and internationalization of large companies significantly impacted the type of product available for sale in large cities, generating so-called food deserts, places where there is low availability of food in general but specifically of high nutritional quality (Hamidi 2020). In these terms, ultra-processed foods not only gained notoriety because of their lower price (Bublitz et al. 2019) and convenience but also because international supermarkets chains developed efficient distribution systems enabling greater population reach (Machado 2016). Studies show that the strong presence of large retailers coupled with the difficulty of transporting people to other regions have tied them to the purchase options of these companies, contributing considerably to malnutrition (Morland, Wing, and Roux 2002) once there is a correlation between the amount of healthful foods available on supermarket shelves and the diet quality of the residents in a certain neighborhood (Dimitri & Rogus 2014). Furthermore, studies show that retailers who provide healthy and fresh options are more difficult to be found in low-income residential neighborhoods (Scott & Vallen 2019).

Regarding *food knowledge*, three elements may be listed: formal knowledge about food and nutrition, knowledge of procedures to prepare a meal and motivation to apply food knowledge (Bublitz et al. 2019). Studies demonstrate that general income and education are interconnected (Salvato, Ferreira, and Duarte 2010), causing low-income populations to have lower levels of food knowledge and, therefore, are exposed to making decisions that are harmful to their own health (Palumbo et al. 2019; Hartmann, Dohle, & Siegrist 2013). In addition, these populations face additional problems due to the lack of financial resources to purchase household items and ingredients necessary to prepare nutritious meals (Bublitz et al. 2019). The dynamics of modern life undermined the transfer of knowledge about eating practices between generations, encouraging the growth of a segment of consumers in which people live at a fast pace and show a preference for fast and easy to prepare foods (Soliah et al. 2012).

*Food policy* refers to, but not only, food safety and food security policies that influence Food Well-Being (Voola et al. 2018). This dimension is one of most impact on Brazilian population as NCDS (Chronic Noncommunicable Diseases), especially low-income children obesity (Lindsay et al. 2009), drive the attention of the federal government (Assis 2017). Therefore, policies and programs for nutrition and health food were developed, such as the National Health Promotion Policy (PNPS), the National Food and Nutrition Policy (PNAN), the Action Plan for Confronting Non-Chronic Diseases, and the Health at School Program (PSE).

Other important national program that is relevant to the studied phenomenon is the Bolsa Família once it is considered one of the oldest, largest, and most popular conditional cash transfers programmes in the world (Sánchez-Ancochea & Mattei 2011), having benefited 684,650 São Paulo citizens in 2018 (Controladoria Geral da União 2021).

However, according to Bublitz et al. (2011), to advance in Food Well-Being, it is not enough just wide public policies, but also the family's own recognition of its level of food well-being as well as the existing motivation to progress to a healthier life, being adaptability to possible changes in lifestyle and consumption habits desirable.

### 3. Methodology

Concerning to achieve the initially proposed objective - to identify the factors that impact food well-being of low-income families - a data collection instrument was developed based on the theories of Food Well-Being. Starting from a qualitative and phenomenological perspective, it was decided to design an interview script and then conduct in-depth interviews with low-income women. A total of 17 interviews were conducted in the city of São Paulo, being five in Social Assistance Reference Centers (CRAS), administered by the Municipality of São Paulo, with “Bolsa Família” beneficiaries, and 12 with mothers of students enrolled in “cursinho popular” - government funded preparatory for both entrance exams and national exams courses. At the time, the interviewees had a per capita family income of up to R\$ 600.00 and belonged to classes C, D and E, according to IBGE classification (Brazilian Institute of Geography and Statistics 2009).

Qualitative research seeks to understand the phenomenon that is observed through the analysis of the subjective character of the object, under its social, cultural, and other dimensions that are suitable for the study, that is, through pillars that, if quantified, would risk not adequately represent reality (Berg 2004). According to Legard, Keegan and Ward (2003), there are two main forms of approaching qualitative research: the first, called ‘miner’s metaphor’, proposes the adoption of questions that lead to the topic in question seeking quantification. In other words, it “digs” data or meanings from a pure subject. The second approach is the ‘traveler metaphor’ that treats the interviewer as a traveler in unfamiliar territory, where he conducts observations and talks with locals. The questions can force the inhabitants to clarify their own opinions and positions. This metaphor has a postmodern feature aimed at social research. The questions were asked according to the ‘traveler metaphor’, to understand more broadly the routine that the interviewees live. The interviews were conducted exclusively with women, given that in less favored social classes, women usually have the final decision to purchase food (Frabasile, 2016). The average age of the interviewees was 45,27 years old. All interviews took place in person and were recorded for later analysis using the content analysis technique. The average time duration of the interviews was 15 minutes. Data collection was conducted during April and May of 2018.

Table 1

#### Data collection instrument

Food Well-Being’ model factors				
Socialization	Marketing	Availability	Knowledge	Policy
What are your family's eating habits?	Who does the shopping? How is the choice of food made?	How do you acquire the food in your home?	Who cooks in your home? How did the person learn to cook?	Tell us how you and your family started receiving

				Bolsa Família? Do you know of other government policies?
Aspects to be explored/understood				
What do you eat	Media influence (e.g., TV programs, commercials from retailers)	Where do you buy food	What knowledge do you consider most important	Since when you receive the benefit
Who they you with (alone, family, friends)	Product purchase decision variables (e.g. nutritional composition, taste, packaging, price, brand)	Payment Terms	Traditions and family recipes	How did you learn about the program
Where meals are eaten	Purchase differences for yourself, spouse and children	Food you want, find, and do not buy	Tools you use (appliances and how to use them)	Opinion about the program (if it helps and how much it helps)
Impact of lifestyle on food consumption (e.g. religion, veganism)	Ultra-processed foods (whether you buy them and what you think about them)	Food you want, find, and buy	Cooking methods	How you use the benefit
Eating Rules at Home Who sets the rules	Organic products (if you buy and opinion about them)	Food you do not want, find, and don't buy	Whether there is knowledge transfer	
Opinion about family food well-being				
What could be improved in the family's diet				

The data analyses method consists of the application of several techniques in order to give meaning to the information obtained, and may follow the following process (Campos, 2004):

1. Pre-exploration of the collected material: reading of all the information obtained in the research in order to understand the main messages, ideas, opinions and stories by the interviewees;
2. Selection of the units of analysis (or meaning units): usually defined based on questions that the research seeks to answer, to establish a link and greater cohesion within the project. Short phrases related to the theme are commonly used for the naming of each unit.
3. Categorization and subcategorization: more general statements that can encompass some themes at once in order to separate the information obtained based on common characteristics and thus perform an analysis that leads to new knowledge. Categorization

can be divided into two classes: aprioristic (the interviewer establishes categories prior to data collection) or non-aprioristic (categories are defined based on the two other stages of content analysis obtained).

### Data analysis

*Food socialization* is related to the process of acquiring knowledge about food. This process seems to have been extremely undermined due to the dynamics of modern life. Factors such as the entry of women into the labor market, the distance of the workplace from workers' homes, and lack of time have directly impacted eating behaviors. Nowadays there is a need to consume quick foods that are easy to prepare and transport, or as one interviewee puts it - "I was not accustomed to eating ready-to-eat food, but today, with the everyday's rush and eating out most of the time, I do eat some junk food". The families only get together for meals at the end of the day, when the family members are exhausted and the preference for practicality in preparation becomes a relevant attribute in the families' choices. Despite this, there is still a preference for typical Brazilian foods - rice and beans - and cases are also reported in which the habits were inherited from the family - "I was raised eating salad, that's why I like it [...]". It is interesting to note that there are healthy behaviors - "At home, we eat a lot of vegetables, we like a lot of pumpkin, manioc, lots of salad, rice and beans that are the basics, you can't do without at home"- that are the result of acquired habits and not of an elaborate knowledge about the nutritional quality of what is being prepared and consumed. Additionally, there seems to be a romanticization of the habits of "eating out", because although the home allows better control of food preparation, what is prepared by others is "tastier".

The interviewees also report motivations directed at controlling the eating habits of family members, questioning how they ate during the day at school, but they recognize the difficulty in having control over this dynamic. In this topic the interviewees point to a dual dynamic, on one hand they report a lot of control - "I didn't let them eat junk food, I didn't let them eat sweets", but on the other hand they feel unable to control the eating habits of the family - "I might not even know what the kids eat right, because he leaves in the morning and comes home at night every day[...]". For families with children, this process occurs under the influence of the school environment, where children are exposed to other habits - "Due to classmates influence [...], - and due to availability of products - "there, at school, he will find lots of sweets, there is the school canteen, so he ends up eating it";. Finally, another point of influence is religion, which has a significant impact on the consumption of certain foods - "We are Jehovah's Witnesses, so we don't eat blood" - and also drives the attempt to transmit habits - "many things we don't eat are because I'm an Adventist. I try to raise my daughters the same way".

### Food Marketing

Despite low-income consumers being marginalized by marketers, attention to the bottom of the pyramid segment has been increasing since Prahalad's publication in 2004 (Filho, Falcão & Motta 2021). Hence, Food Marketing can be noticed by the interviewees.

Topics connected with food marketing, that is, issues related to the marketing context (promotional mix, consumer behavior, brand building, loyalty, etc. ) and food, can be identified in the following quotes: brand loyalty - "I have a brand preference" and "I don't usually change brands"; willingness to pay premium prices - "Sometimes I set aside the price and choose quality"; risk aversion when buying - "that's no use buying cheap, that cheap can be expensive if it's not good "; connection between brand and quality - "I have a brand preference. It's more the quality of the food". These reports point to circumstances in which the interviewees are under a high influence of marketing actions, giving high value to brands and recognizing their influence in the decision-making process, which can be explained by the referred literature that low-

income consumers believe that it may be more costly to make a wrong purchase than to acquire a more expensive but trustworthy brand (Motta & Casarin, 2006). This high involvement with the brand is specially perceived in fast-moving consumer goods (Chikweche, Stanton & Fletcher, 2012).

On the other hand, some other reports corroborate to recent researches that point out that because of their tight budgets, low-income consumers show lower levels of brand loyalty (Kumar, Vohra and Dangi, 2017) choosing cheaper brands over quality (Gbadamosi, 2009; Huang & Gale, 2009; Leibtag & Kaufman, 2003) despite their willingness to purchase premium brands (Filho et al. 2021) as can be seen in "I usually have flyers from two different supermarkets so I can compare" and "of course there are brands that I like, but I end up surrendering to the price because the situation is difficult".

Regarding their children, the interviewees recognize the difficulty in making changes - "My children don't even give it a try experiencing a different brand". Children reluctant in trying other brands may relate to licensed characters explained in the literature background that have despite having influence on children (Leonard, Campbell, & Manning 2019) these characters do not have sufficient strength to persuade consumers to change their unhealthy food choice to a healthier one (Scott & Vallen 2019).

### **Food availability**

The dynamics of the families regarding aspects of food availability are directly connected with the mothers, as they are responsible for managing the household in terms of food. These women are involved with the purchase of products and with cooking. In low-income households, the predominant family format is often one in which the man works, and the woman takes care of the house, but in many cases the woman also works, generating an additional burden in her activities. Because of this issue, women report that food shopping is preferably done in places that are close by, practical, and have affordable prices. At times when there are more resources to devote to shopping (time and money), women report a preference for large supermarket chains that feature promotions and allow economies of scale. The interviewees report the growth in the number of products offered in retail stores, there being a much wider range of options nowadays - "In the old days there weren't many things to eat, there weren't many options". This finding is contrary to the cited literature that explains Food Deserts which are places where there is low availability of food in general (Hamidi 2020). However, the author also explains that low availability is specially noted when considered high nutritional quality food, characteristic of which the interviewee is not fully aware of as it is possible to verify in the following topic. Furthermore, among these new options are the processed and ultra-processed food that gained notoriety because its lower price (Bublitz et al. 2019).

### **Food knowledge**

When analyzing the interviewees' discourse, it can be noticed that the family's food knowledge is based on the knowledge of adults, especially women. Most of the interviewees recognize the role of the mother in the acquisition of food knowledge (ability to prepare several dishes) since the beginning of adolescence. Currently, the expanded knowledge, especially for the new food products that have been created and incorporated into the retailers' assortment, is obtained from other sources (websites, blogs, television programs, TV news, etc.). The interviewees are motivated by curiosity and the desire to learn more about healthy eating habits. The learning obtained from these various sources is reflected in their behavior - "About the juice cartons, I found out by watching on TV, they usually show those surveys and I found out that I consumed all that sugar, and I didn't know about the sugar". This curiosity in learning more is



interesting if it is considered that low-income consumers have lower levels of food knowledge and, therefore, are exposed to making decisions that are harmful to their own health (Palumbo et al. 2019; Hartmann, Dohle, & Siegrist 2013). The willingness to learn more may be explained by the increasing number of Brazilian consumers who are now more aware of the health benefits their food choices can bring (Federação das Indústrias de São Paulo & Instituto Brasileiro de Opinião Pública e Estatística - FIESP/IBOPE 2020).

Another socialization agent that impacts the respondents' behavior is the medical doctor, who often brings information about the risks involved in inadequate eating habits.

### Food Policy and Bolsa Família

The food policies, which would also serve as a foundation in this awareness-raising process, were not known by the interviewees, with the exception of the Bolsa Família Program, since some of them benefit or have already benefited from the program - in all, five of the 17 interviewees. Even so, although the Bolsa Família provides financial conditions for the purchase of some food, this is not always the destination of the amount received, according to the results. As most of the interviewees who receive or have received the benefit are homeless, they usually get food from restaurant donations, and cannot choose what to eat. The money from the program is seen by them as a reserve for food, in case donations are lacking, or as a reserve for another expense, in case food is not a problem. For the interviewed women who were living on the streets, feeding themselves is the main objective in detriment to the quality of the food, healthy or not. All three of the interviewees that are homeless have been in this situation since they were little, so it would not be possible to learn to cook with their families, since there has never been a home for this kind of coexistence. Table 2 summarizes the main aspects that explain each of the dimensions of Food Well-Being from the interviews conducted with the low-income women.

Table 2

#### Food Well-Being dimensions and interviewees description

Dimensions that influence Food Well-Being
<p><b>Food socialization</b></p> <p><i>Modern Life and practicality:</i> “I was not accustomed to eating ready-to-eat food, but today, with the everyday’s rush and eating out most of the time, I do eat some junk food”.</p> <p><i>Absence of eating rules:</i> “We do not have eating rules because we never thought it would be needed”.</p> <p><i>Quantity x quality:</i> “Whenever we gather together, we make a mess. Table full of food”.</p> <p><i>Habits transmission:</i> “I was raised eating salad, that’s why I like it [...]”</p> <p><i>Eating in and eating out:</i> “At home, I believe we have the control of using less cooking oil and things like that because it is bad for your health. Eating at home is indeed healthier, but eating outside is tastier, isn’t it?”.</p> <p><i>Other socialization agents influence (School, Classmates and Religion):</i> “Due to classmates influence, when they reach 13, 14 years old, you can push it but ‘I don’t want it, I don’t like it’, because they’re already used to other things at school, you may not give it to your kid to takeaway,</p>

but there, at school, he will find lots of sweets, there is the school canteen, so he ends up eating it”; “We are Jehovah’s Witnesses, so we don’t eat blood. We don’t eat anything that contains blood, that’s all”; “Many things we don’t eat is because I’m an Adventist. I try to raise my daughters the same way”.

### **Food marketing**

*Brand Preference:* “Specially at the time when we used to buy more junk food, I used to surrender a lot to the brand. It was Sadia’s smoked sausage. These brands, Sadia and Perdigão, we did buy”;

*Risk-aversion:* “I go by the brand and by how much it costs. Sometimes I set aside the price and choose quality, that’s no use buying cheap, that cheap can be expensive if it’s not good”. “I usually choose a product by quality, a brand that I am already used to, I usually don’t change brands”.

*Financial restrictions and price:* "When I go to the supermarket, what matters for me is the price [...]"; "Of course there are brands that I like, but I end up surrendering to the price because the situation is difficult".

*Search for sales offers:* “At the door [of the supermarket] we usually get a little flyer with the promotions and that's where I look. I usually have flyers from two different supermarkets so I can compare. But even if there's a promotion, I end up choosing the one I like in the end. The day it's on promotion, I buy more, but of the same brand”.

### **Food availability**

*Variety and geographic location:* “In the old days there weren’t many things to eat, there weren’t many options. I was raised on a small farm, so we didn’t have access to lots of food”; “On the countryside, specially during dry season, there was not much food”.

*Income:* “In the past, my parents weren’t used to buying food, they couldn't afford it”.

*Monthly x weekly purchases:* The monthly purchase was mentioned by the interviewees as the purchase at the beginning of the month, when they prioritize the most durable foods to last throughout the month;

### **Food knowledge**

*Media as educating agent:* “About the juice cartons, I found out by watching TV that researches point out that it contains sugar, I was consuming all that sugar and I didn’t know it”.

*Limited application due to routine and scarcity:* “I watch some things (recipes?) on TV, just some because sometimes the recipe requires lots of ingredients, making me modify it to less ingredients”.

### **Public Policies**

*Food policies ignorance:* The food policies that could serve as a foundation to the consciousness process were not known by the interviewees.

*Unhealthy food to avoid hunger:* For the interviewed women who were living on the streets, feeding themselves is the main objective in detriment to the quality of the food, healthy or not.

The results of the study and the interviewees' statements are presented in Table 2. This table provides a broader understanding of how low-income families deal with the issue of food in the dimensions proposed by the theories of Food Well-Being. Based on the results found and the analysis carried out in this section, the next topic of this work is presented with the main discussions and conclusions generated.

### **Discussion and findings**

The central objective of this work was to identify the factors that impact the dietary well-being of low-income families. To this end, a data collection instrument was designed based on the theories of Food Well-Being, which was applied during 17 interviews with low-income women, including classes C/D/E. The content analysis of these interviews made it possible to compile Table 2, where the dimensions of Food Well-Being and the factors that act on these dimensions affecting well-being in the context of low-income families are presented. The results indicate a dynamic in which Food Well-Being is harmed by intrinsic factors of individuals (lack of knowledge, time, and resources to improve the family's diet). In addition, there is also the impact of factors extrinsic to individuals (lack of availability of healthy foods at nearby retailers, influences of religion, influence of media, influence of family members). These factors interconnect and create the level of well-being of a given family.

An important aspect of this analysis is that in many cases food purchasing decisions are highly influenced by marketing factors, such as product brand, convenience of preparation, promotional prices, among others. These efforts, given the time and money constraints of the families, end up explaining the behavior of the interviewees. They often surrender to purchases that are not exactly what they would like, but are what is possible at the moment. Another important aspect concerns the pressure that the mothers interviewed suffer from their children to buy foods that are not healthy.

The most worrisome aspect of the analysis concerns the lack of knowledge. The interviewees often report a concern with healthy eating, but make wrong decisions due to not having a correct or complete understanding of what healthy food is. While this aspect is worrisome, it also gives room and points to directions that can be followed to design public policies to increase the Food Well-Being of the low-income population.

Regarding future research, it is worth noting the insights gained and illustrated in Table 2 and how they may help future research. These insights provide an initial understanding of how low-income families connect with food. From this knowledge it is possible to build new research that can bring knowledge that provides the basis for better public policies. In addition, these insights explain to a certain degree the impact that marketing campaigns can have on this audience. This impact must be analyzed from an ethical perspective, especially by companies that have children as their target segment.

Finally, the limitations of this work are highlighted. The process of conducting interviews with low-income respondents is challenging, especially when it comes to homeless people. Throughout the construction of this study, there was a learning process on how to conduct this type of activity, but in the first interviews the results obtained were below what was possible due to the difficulties in building empathy and connection with the interviewee.

This limitation may be seen in the average time duration of the interviews which was only 15 minutes. In addition, the process of categorizing the interviews was carried out by one of the study's authors, with support from another author. Further categorization, providing a new opportunity to look at the raw interview data, could bring more empowering insights into the results.

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