

THE PENNSYLVANIA STATE UNIVERSITY  
SCHREYER HONORS COLLEGE

DEPARTMENT OF PHILOSOPHY

THE ISSUE OF INDIVIDIAL AND COLLECTIVE RESPONSIBILITY IN RELATION TO  
AMERICAN DIETARY CHOICES

INDIGO MURRAY  
Spring 2018

A thesis  
submitted in partial fulfillment  
of the requirements  
for a baccalaureate degree  
in Philosophy  
with honors in Philosophy

Reviewed and approved\* by the following:

Brady Bowman  
Associate Professor of Philosophy  
Thesis Supervisor and Honors Supervisor

Jonathan Marks  
Associate Professor of Bioethics, Humanities, and Law  
Faculty Reader

\* Signatures are on file in the Schreyer Honors College.

## ABSTRACT

This work examines the issue of individual and collective responsibility in the context of American dietary habits. Examination of our contemporary situation along with exploration of some of the factors that shape our reality will provide the foundation necessary for the discussion of responsibility.

The focuses of this work include: American consumption habits relating to sugar and meat, outcomes of an unhealthy diet, some effects of government guidelines and involvement, mass communication and its effects, and individual and collective responsibility. Application of the responsibility argument to our present state aims to bring awareness to the importance of the issue and to delve into who or what is accountable for making positive changes. I posit that it is the public's individual and collective responsibility to not only bring awareness to the issues caused by our contemporary diet, but to make changes that promote and maintain better health as well. Because the government and the food industry are two driving forces behind unhealthy dietary habits, and are therefore two sources of the problem, it is unwise to argue or believe that they can also become part of a sustainable solution.

**TABLE OF CONTENTS**

|   |     |
|---|-----|
| ABSTRACT.....   | i   |
| Acknowledgments.....  | iii |
| Introduction.....   | iv  |
| Section 1: The Facts of the Problem.....                            | 1   |
| Section 2: An Exploration of the Problem – Our Current Reality..... | 9   |
| Effects of Governmental Dietary Guidelines.....                     | 9   |
| Effects of Advertising.....   | 14  |
| Section 3: Individual and Collective Responsibility.....            | 19  |
| Governmental Purpose and Responsibility.....                        | 21  |
| Industrial Purpose and Responsibility.....                          | 23  |
| The People’s Purpose and Responsibility.....                        | 25  |
| Shared Responsibility.....  | 27  |
| A Brief Summation.....  | 33  |
| Conclusion.....   | 34  |
| Bibliography.....   | 35  |

## Acknowledgments

I would first like to give thanks and extend deep gratitude to María Schmidt, Assistant Dean for Multicultural Programs of the College of Education. Had it not been for Dean Schmidt's confidence and faith in me from the very beginning, I would not have been able to have a Penn State experience. She is why I chose Penn State. She granted me an opportunity not many are offered, and I have worked for four years to show her how much it is appreciated and that she chose correctly. Next, I would like to thank Dr. Vincent Colapietro, Liberal Arts Research Professor of Philosophy, for extending a listening ear and encouragement that has led me to further embrace my intellect and pursue my interests. I extend a big thank you to William Paris, Graduate Student of Philosophy, for being so willing to help shape my ideas and give me direction regarding my thesis topic. The conversations we engaged in were always informative and enjoyable. Next, I would like to thank my thesis advisor, Dr. Brady Bowman, Associate Professor of Philosophy, for agreeing to work with me and for consistently challenging me in ways that always lead to new insights. His guidance and instruction have helped me become a better writer and more concise with my words, and his way of conversing has helped me maintain high speaking standards. I would like to thank Jonathan Marks, Associate Professor of Bioethics, Humanities, and Law, for his knowledge and willingness to work with me during the thesis writing process. Conversations between us helped me find more reasons to be passionate about my topic. Lastly, I would like to extend the biggest thanks to my family: my mother for her unwavering support, my father for his constant reminders of the fact that "I am built for this", and my sister Jasmine for always knowing when I need encouragement and for pushing me to do my best. This project was made possible because of you. Thank you.

## Introduction

The premise for this project did not stem from a conventional source, such as the classroom, philosophical book, or essay; rather, it came from a recurring theme I observed over the span of several years. As these observations grew in frequency, one glaring realization manifested – there is a serious issue that continues to go unnoticed, and because of this, nothing is being done to solve it. The way we in the United States have been conditioned to eat is alarming, for we consume foods that contribute to sickness and disease.

This project has three main sections – the description of the problem, the explanation of the problem, and the philosophical argument. Because health is a subject I am passionate about, I will apply the philosophical argument about individual and collective responsibility to American dietary choices, which is something concrete and current. I am cognizant of the abundance of unhealthy foods available to us and the way we choose to continue to eat said foods impacts us individually and nationally. To keep the scope of application relatively narrow, the focus is on sugar (and by extension, all foods containing it) and meat products, though dairy, processed foods, genetically modified organisms, and more are categories worthy of attention and close study.

A description of our collective consumption habits will be given, along with explanations about the ways government involvement and food manufacturers and their efforts shape our reality. I will then examine the way responsibility is (Carried out? Actualized? Attributed? Split?) in the context of American dietary habits to explore how ignorance of this issue leads to a lack of desire to improve and problem solve. To do this, I will discuss how the ubiquitous and pervasive nature of mass communication allows for the normalization of the issue, making it a part of daily life and preventing it from its being seen as a serious problem.

By the conclusion, I will have explored the initial problem and established it as legitimate and current, explained why we can only realistically rely on ourselves to change positively, and discussed why we cannot rely on institutions that are part of the problem to be part of any beneficial solutions.

## Section 1: The Facts of the Problem

“Eat Western diets, get Western diseases – notably obesity, diabetes, heart disease, and cancer.” (*Gary Taubes, Why We Get Fat 168*)

Part of the Western world, specifically the United States of America, is experiencing an ongoing problem – one of overconsumption. This problem began early in the twentieth century, when the main causes of death and disability among Americans “were infectious diseases related in part to inadequate intake of calories and nutrients,” such as tuberculosis and diphtheria (Nestle 2, 31). In an attempt to correct insufficient caloric intake, health officials, nutritionists, and the food industry encouraged people to eat more of all kinds of food. Because economic improvements impacted how people ate during this century, Americans gained access to a greater variety of foods, improved their diets, and decreased the number of nutrient deficiencies. These dietary and economic shifts changed the way we view nutrition. “We shifted to overnutrition, which is eating too much food or eating too much of certain kinds of food” (Nestle 3).

This shift in attitude and habit has led to an increase in food production, consumption, and diet-related diseases and illnesses. The surplus of food production and subsequent consumption created a dangerous relationship between supply and demand that has in turn led to the distribution of unhealthy foods, to false health claims, and to the normalization of high numbers of persuasive food commercials. Because there are too many unhealthy food-like products to discuss in detail, I am focusing on two products that are either found in a large

number of unhealthy food products or are the unhealthy food products people in the United States are consuming, and doing so in excess — sugar and meats. The problem of food overconsumption is not new or controversial. It has become a norm of living in the United States, maybe even to the point of complacent acceptance. This is a legitimate, measurable problem, confirmed for example by sickness rates, consumption trends, and ingredient content. It comes down to the fact that the foods we eat and have been eating for decades are not healthy for us, and not enough is being done to fix this problem. Paul B. Thompson, author of the book *From Field to Fork*, provides the opinion of Dr. David Kessler, former head of the U.S. Food and Drug Administration. Dr. Kessler, in short, places blame on the food industry. Kessler argues that “chain restaurants and food manufacturers – the companies that make and market processed foods in boxes, cans, and freezer containers – have engaged in decades-long research to determine neurological triggers for appetite” (Thompson 80). In doing so, these food companies and manufacturers have been so successful that “they have now developed formulations that are virtually irresistible to consumers” (80). The purpose of this section is to show that we are surrounded by unhealthy foods, that eating meat and eating products containing sugar are harmful practices, and that not enough is being done to address and solve the harms these practices cause.

When speaking of the Western diet, it is important to understand what it consists of. According to Gary Taubes, author of *Why We Get Fat* and *The Case Against Sugar* states, “mainstream nutritionists and public-health authorities... define the Western diet as copious meat, processed food, sugar, and total calories, with few vegetables, fruits, or whole grains” (*Why We Get Fat* 170). Moreover, these foods are pervasive throughout Western society. Products containing sugar and/or meat products line shelf after shelf in almost every grocery

store across the United States. As of 2016, there are 38,441 grocery stores in the U.S., 26,712 of which are conventional supermarkets, 4,327 of which are supercenters (vendors of both groceries and mass merchandise), and 3,382 of which are natural/gourmet food markets (“U.S.: Number Supermarket/Grocery Stores 2016”). These foods make up school breakfasts and lunches in elementary, middle, and high schools, irrespective of whether they are public or private.

According to the National Center for Education Statistics, there were 98,271 total public schools and 33,619 private schools in the United States (“The NCES Fast Facts”). These foods are found in every college and university campus cafeteria and store. According to the NCES, there were 7,236 Postsecondary Title IV Institutions in 2014. 4,724 of these are degree-granting institutions (“The NCES Fast Facts”). These foods are found in gas stations with stores and in rest stops in every state of the country. They are found in vending machines located in dorm and apartment buildings, offices, bowling alleys, hospitals, college classroom buildings, shopping malls, and more across the entirety of the United States. The problem is just as pervasive as the availability of unhealthy food. According to Paul Thompson, “the ordinary drive to make a profit has led food companies to compete with one another to develop foods with salty-sweet tastes and fatty-crunchy mouthfeel” (80). The reasons why we prefer these foods and taste combinations may be found in evolutionary history, but “as these foods have become ubiquitous in grocery stores and restaurants they have crowded out the more healthful alternatives that were more typical of human diets in the past” (80).

An ingredient that has become extremely difficult to avoid is sugar. Sugar is not only found in sweet foods like “candy bars, cookies, ice creams, chocolates, sodas, juices, sports and energy drinks, sweetened iced tea, jams, jellies, and breakfast cereals (both cold and hot)” (Taubes, *The Case Against Sugar* 79). Sugar is also found in “peanut butter, salad dressing,

ketchup, barbecue sauces, canned soups, cold cuts, luncheon meats, bacon, hot dogs, pretzels, chips, roasted peanuts, spaghetti sauces, canned tomatoes, and breads” (79). According to Taubes, food products low in fat, specifically saturated fat, were marketed as uniquely healthy in the 1980s. Fat calories were replaced with sugar calories to make said food products taste better, and the sugar was often disguised under “one or more of the fifty-plus names by which the fructose-glucose combination of sugar and high-fructose corn syrup might be found,” some names being: “sucrose, dextrose, fructose, maltose, lactose, glucose, honey, agave syrup, high-fructose corn syrup, maple syrup, brown-rice syrup, molasses, evaporated cane juice, fruit-juice concentrate, and corn sweetener” (80, 225). Foods that were gluten free, MSG free, and containing 0g trans-fat per serving were also marketed as healthy, though they contained sugar. Fat was removed from candy bars while sugar was kept in or even added, and these were marketed as health-food bars. Fat was removed from yogurt and sugars were added, and it became a “heart-healthy snack” suitable for breakfast and lunch (80). This trend led to the idea that “if a product wasn’t sweetened at least a little, our modern palates would reject it as inadequate and we would purchase instead a competitor’s version that was” (80). The trend of calorie replacement continues to this day.

Another food product that is all too common in the American diet is meat. Parts of chickens, pigs, cows, and turkeys have found a home in the refrigerators of American households in excess for decades in the forms of drumsticks, thighs, loins, ribs, steaks, legs, feet, cold cuts, nuggets, hot dogs, burgers, meatballs, bacon, sausage, jerky, stock, and more. Meat, though not as discreetly persistent as sugar, is a large part of the average U.S. citizen’s diet. NPR’s 2012 article, *A Nation of Meat Eaters: See How It All Adds Up*, reveals that in 1909, total U.S. meat consumption was 9.8 billion pounds, while the projected total meat consumption for 2012 was

52.2 billion pounds. The trend of total meat consumption between these two points in time shows a relatively steady increase from 9.8 to 52.2 billion (Barclay). According to a 2018 article from The Seattle Times, the average consumer will eat “222.2 pounds of red meat and poultry this year, according to the U.S. Department of Agriculture” (Durisin & Singh). Meat has a place in virtually every meal served in the home or at a restaurant. A quick glance at almost any restaurant menu, save for vegetarian or vegan sections, reveals a heavy reliance on meat during meal times.

As noted before, unhealthy food options have been crowding out the more healthy options. The persistent result of eating this way is not only the creation of a dietary category, the Western diet; it has also led to the creation of a category of illnesses, the Western diseases. Western diseases are chronic conditions that are associated with the high calorie and sedentary Western lifestyle. These illnesses include: “obesity, diabetes, heart disease, hypertension and stroke, cancer, Alzheimer’s disease and other dementias, cavities, periodontal disease, appendicitis, ulcers, diverticulitis, gallstones, hemorrhoids, varicose veins, and constipation” (Taubes, *Why We Get Fat* 168). According to Taubes, the diseases and conditions previously listed are common in modern, Western societies and are “uncommon, if not nonexistent” in societies that are more traditional. Taubes furthers his argument by stating, “... when traditional societies take up Western diets, these diseases will appear shortly after” (168). When looking at studies of Western diseases comparatively, there’s little room for controversy. “Colon cancer is ten times more common in rural Connecticut than in Nigeria. Alzheimer’s disease is far more common among Japanese Americans than among Japanese living in Japan; it’s twice as common among African Americans as among rural Africans” (169).

The foods we are buying and consuming are unhealthy for us. Their negative impact on our health does not just come from the ingredients — it also comes from the amount we consume. Though there is a positive correlation between the amount of unhealthy food consumed and increased disease rate, the correlation alone is not enough to demonstrate a causal relation. However, there are findings that prove diet impacts health. According to Taubes, “nutritionists have found it in themselves to blame our chronic ills on fats and cholesterol, on protein and meat, on gluten and glycoproteins, growth hormones and estrogens and antibiotics, on the absence of fiber, vitamins, and minerals, and surely on the presence of salt, and on processed foods in general” (*The Case Against Sugar* 81-2). The Centers for Disease Control and Prevention lists poor diet as one of the contributing factors of heart disease (“Heart Disease”). Taubes provides information about additional research that shows there is a connection among sugar, insulin resistance, and diseases such as diabetes and cancer (*The Case Against Sugar* 408). Because there is significant reason to believe that sugars – sucrose and high-fructose corn syrup in particular, the nearly fifty-fifty combinations of glucose and fructose – *are* the dietary trigger of insulin resistance and metabolic syndrome, it is likely they are a primary cause of many Western diseases (408). In 1981, Oxford University researchers Richard Peto and Sir Richard Doll posited that three out of every four cases of cancer in the United States might be preventable with appropriate changes in diet and lifestyle. Diet, they argued, seemed to play the largest role. “According to Peto and Doll’s analysis, at least 10 percent of all cancers, and perhaps as much as 70 percent, were caused by something that they were eating” (444).

Now that we have established the causal link between diet and health, let us explore the extent of the damage caused by unhealthy eating. We know that the majority of food we have been consuming is not beneficial. As a study conducted in 2000 by researchers from the U.S. and

Australia shows, “the modern foods that today constitute more than 60% of all calories in the typical Western diet – including cereal grains, dairy products, beverages, vegetable oils and dressings, and sugar and candy – ‘would have contributed virtually none of the energy in the typical hunter-gatherer diet’ (Taubes, *Why We Get Fat* 167). Though this data is not the most recent, both personal experience and consumption trends show that the food products available today have not changed drastically over the past eighteen years. So what does an overconsumption of calories that serve little energetic purpose look like? It looks like high or increased rates of Western diseases, such as obesity, diabetes, heart disease, and cancer. For example, in a 20-year timespan from 1980 to 2000, the prevalence of obesity among men approximately increased from 12% to 25% and among women from 15% to 35%. From 1988 to 2004, the prevalence of obesity in children from ages 2–19 rose from approximately 8% to 18% (“Overweight & Obesity Statistics”). The number of individuals in the U.S. population diagnosed with diabetes follows a similar trend. In 1958, 1.58 million people, 0.93% of the population were diagnosed with diabetes. In 1985, this number rose to 6.13 million people, which is 2.62% of the population, and in 2015, a staggering 23.4 million people were diagnosed, 7.4% of the population (“Diabetes Data & Statistics”). Between 1999 and 2013, coronary heart disease, the most common type, has killed over 370,000 people annually (“Heart Disease”). During this same time frame, about 610,000 people died of heart disease every year in the United States, which is one in every four deaths (“Heart Disease”). In 2005, the estimated number of new cancer cases was 1,372,910, and in 2018, that number rose to 1,735,350 (“Cancer Facts & Figures 2018”).

It is important to note that the above information provides statistics on a less considered form of malnutrition. Though it is usually thought of as lack of proper nutrition caused by

shortage of food in general, it is also caused by either not eating enough of the right foods or being unable to use the food one consumes. The effects of malnutrition include wasting, being underweight, and stunted development as well as overweight, diet-related diseases, and obesity. Despite myriad effects of poor diet influenced by unhealthy food choices, not much action has been taken on a collective level.

Even though “people are increasingly developing food preferences and beliefs that reflect a lack of confidence in the industrial food system, or a distrust of the science used to determine whether a given food is safe”, their dietary choices and levels of health do not reflect their concerns (Thompson 40-1). The fact that rates of Western illness are still so high reflects lack of action on individual, social, industrial, and political levels. The most worrisome aspect of this problem is that it is not one that is separate from us. It is something that we, both individually and collectively, either fall victim to or overcome with every bite we take. In the words of Paul Thompson, “we are what we ate, and we may yet pay for it” (41).

## Section 2: An Exploration of the Problem – Our Current Reality

“The assumption among Americans is, ‘If it’s on the market, it is okay’ (*Exposed*)

### Effects of Governmental Dietary Guidelines

The purpose of this section is to explore the factors that helped create our current reality and to examine how that reality is maintained. Though there are myriad factors and structures that contribute to the construction and preservation of our society and our habits, the focus will be on mass communication in relation to the “eat more” mentality and American dietary habits. In order to understand why we face the problem of overconsumption, we have to understand the factors that influence our behavior.

To start, a description of our current situation is important. Simply put, we live in a society that has learned to embrace the practice of eating more. Since the early twentieth century, this idea has been pushed onto the public so it could support and sustain the growing market of food products (Nestle 2). Nutritionists, doctors, commercials, and our government spread this message, if indirectly in some cases, and we still adhere to this message today (Nestle 22, 29, 67, Taubes, *The Case Against Sugar* 213). The biggest problem with the “eat more” ideology is that it promotes achieving health in a way that could potentially be unhealthy and is often times difficult to attain. This idea was also introduced as a solution to the problem of high rates of diet-related illnesses in the 1900s, and, ironically enough, it is what motivates overconsumption today, which increases the likelihood of contracting a diet-related illness. It was and still is believed an increase in calorie intake, regardless of the source, is sufficient enough to combat illnesses related to poor nutrition (90). But this mentality, paired with the large percentage of empty and unhealthy calories consumed by millions of people in the United States, has led to a

completely different set of illnesses, appropriately dubbed the Western Illnesses (Taubes, *Why We Get Fat* 168). Ideally, we would have started consuming more healthy types of food such as fruits, vegetables, grains, beans, and healthy fats in order to combat these illnesses and create and maintain healthier eating habits. Unfortunately, this has not been the national trend of consumption for almost a century, though individuals have been switching to a diet rich in plant foods. Although there have been changes in this trend on an individual level, the change is not substantial enough to alter the reality of our contemporary situation, which is that the nation as a whole is still consuming meat and sugar in excess.

The increase in consumption created an opportunity to earn long-term financial gains, and in a capitalistic society, that is a difficult prospect to pass up. Food manufacturers benefited and continue to profit from our eating habits to this day. Taking a look at the average American's shopping cart at any grocery store proves this. To increase sales and profits, food companies have focused on ways to market their products out to the public, their main mode of communication being advertising. These companies spend "enormous creative energy and huge sums of money" to entice people to buy and consume their products (Nestle 174). These marketing efforts have little to do with good nutrition, however, and everything to do with promoting food sales (174). Food and food service companies spend more than \$11 billion annually on direct media advertising in magazines, newspapers, radio, television, and billboards. In 1999, McDonald's spent \$627.2 billion, Burger King \$403.6 million, Taco Bell \$206.5 million, and Coke and Diet Coke \$174.4 million on direct media advertising. Even small products have impressive advertising budgets, as illustrated by expenditures of \$117 million for Wrigley's chewing gum and nearly \$80 million for M&M candies (Nestle 21). At the turn of the 21<sup>st</sup> century, food companies spend a total of more than \$33 billion annually to advertise and

promote their products to the public. The majority of this astronomical sum is used to promote the most highly processed, elaborately packaged, and fast foods. Nearly 70% of food advertising is for convenience foods, candy and snacks, alcoholic beverages, soft drinks, and desserts, whereas just 2.2% is for fruits, vegetables, grains, or beans (Nestle 22). If health were more of an immediate concern for food companies or advertisers, there would not be such a drastic difference between these two numbers. This stark contrast not only supports Nestle's insight about the food industry's priority; it also reveals that advertising efforts go against the dietary guidelines issued by the government.

Our government officially started creating dietary guidelines in 1980. The purposes of these guidelines include "informing government health programs and policies" along with "determining the foods America produces, buys, and eats," and helping people make "healthy food and beverage choices" (Heid). The dietary guidelines are created by two agencies, which are the U.S. Departments of Agriculture (USDA) and Health and Human Services (HHS) and are issued every five years. The USDA is in charge of strengthening America's farming, food, and agriculture industries. The purpose of the HHS is to enhance and protect the health and wellbeing of all Americans (Heid). According to Markham Heid, contributor to TIME Magazine, the guidelines are "grounded in the most current scientific evidence," but a number of leading nutrition experts refute this claim, stating that the guidelines are too heavily influenced by food manufacturers, food producers, and special interest groups. Because of this, many experts say, "some of the government's diet advice continues to promulgate out-of-date research from years past" (Heid).

Since the start of this trend, controversy has surrounded the practice of the government creating said guidelines. One of the main reasons behind this controversy is that the

recommended guidelines did not always reflect the most current research (Heid). Though some good has come from revision of these dietary guidelines, such as reduction of trans fat in food products in 2005 and the suggestion to reduce sugar consumption in 2015, many aspects of the guidelines only create confusion. One example of this is recommended daily allowances (RDAs). The focus on RDAs is confusing to people and is not helpful. It is confusing mainly because “people do not eat nutrients one by one but in combination, in the form of whole and processed foods” (Heid).

The question of the level of influence the food industry has on creating these guidelines is one worth addressing. According to Marion Nestle, American academic and author of *Food Politics*, the question of influence should not be a question, but a fact. Food companies convince people to eat more of their products “through advertising and public relations, but also by working tirelessly to convince government officials, nutrition professionals, and the media that their products promote health – or at least do no harm” (1). Nestle notes that the actions food companies take are often political, entirely conventional, and nearly always legal to obtain government and professional support for the sale of their products (1). These actions are “thoroughly analogous” to the workings of any other major industry (e.g. tobacco) in influencing health experts, federal agencies, and Congress. “Promoting food raises more complicated issues than promoting tobacco, however, in that food is required for life and causes problems only when consumed inappropriately” (2). In 1986, Marion Nestle had direct experience working for the Public Health Service and she found that agency officials had learned to avoid interfering with food products’ marketability by resorting to euphemisms, focusing recommendations on nutrients rather than on the foods that contain them, and giving a positive spin to any restrictive advice about food: “Whereas ‘eat less beef’ called the industry to arms, ‘eat less saturated fat’

did not” (Nestle 4). In similar fashion, the phrase “eat less sugar” sent sugar producers right to Congress, but that industry could tolerate “choose a diet moderate in sugar” (4). In 1988, the *Surgeon General’s Report* recommended that the public “choose lean meats” and suggested limitations on sugar intake “only for people particularly vulnerable to dental cavities” (4). Nestle states, “the food industry devotes enormous financial and other resources to lobbying Congress and funding research on food and nutrition, publicizing the results of selected research studies favorable to industry, sponsoring professional journals and conferences, and making sure that influential groups — federal officials, researchers, doctors, nurses, school teachers, and the media — are aware of the benefits of their products (4).

The food industry’s efforts are seen in political, nutritional, and social spheres. Their influence not only shapes the language used in government guidelines; it selects research that informs said guidelines. Both the language and the data that impact the dietary guidelines are compromised in the sense that an industry that does not operate with people’s health in mind has some control over what occurs. The food industry’s influence on government guidelines prevents the use of strict language that would encourage people to stop eating unhealthy foods. Because excess sugar and meat consumption are not banned or strongly discouraged, the food industry can push their products by way of advertisements and continue to develop new food-like products with profit in mind. Though dietary guidelines do not explicitly encourage people to eat meat or sugar, their euphemistic language is not strong enough to dissuade anyone from eating meat or sugar. Because of this, it can be said that these dietary guidelines condone the “eat more”- mentality, which is the thought that spurred the overconsumption trend. The government’s softened language is all the food industry needs to profit off of millions of people and provide foods linked to many diseases and illnesses. It is clear that the lack of government

prevention is something that allows for food advertisements to continue existing as they do. Because of their pervasive nature, advertisements operate “so far below the consciousness of everyone that it is accepted as part of daily life or ignored” (Nestle 21).

### **Effects of Advertising**

Advertisements are an inescapable part of daily living. They are also a largely unquestioned part of our lives. Because of this, it cannot be assumed that the definition and purpose of advertisements are known and understood. Advertisements are defined as notices or announcements in a public medium that promote products, services, or events. The purpose of many advertisements today is to persuade the viewer to take a particular action or want a certain product. Many advertisements we see today employ a variety of tactics to be considered effective. There is usually strategic use of association, repetition, and slogans and jingles, in these short and deliberate clips. Association is one of the most important tools a successful advertisement uses. Many food products are shown to improve a particular aspect of daily life. Good advertisements are relatable and provide insight into how a particular product could make people happier, stronger, more energized, more confident, loved, cooler, and more. They can also showcase how a particular product can make breakfast adventurous and dinner important to a family, for example. Repetition is also crucial because people are more likely to remember something they see more often than something they see less often. Multiple commercials for a Snickers candy bar would make the candy seem more appealing than one lone commercial could. Slogans and jingles add to an advertisement’s immediate and lasting impact. Having a song that is memorable and sums up the purpose or function of a particular product is helpful for retention. The most important thing to note about advertisements is that they show individuals choosing to

consume a product for a desired outcome, and ensure they show how their product helps achieve said outcome (Nestle 21). Advertisements have successfully been presented to us in a way where we believe we have the power to choose whether we consume something. The reality, however, is that advertisements do not readily present us with the opportunity either to participate or to opt out of consuming a particular thing; instead, they provide us with options, all of which continue our participation in the “eat more” culture. This is not to say we as individuals do not have the choice to opt out, because we do. Food advertisements’ aim is to show their product in a positive light, which makes it difficult for viewers to make a decision that is not influenced or shaped by persistent marketing messages. Simply put, in an advertisement dominated culture, it is difficult to have unbiased opinions, just as it is difficult to choose to not participate in the consumption of unhealthy food products.

According to Marion Nestle, it is in the interest of food companies “to have people believe that there is no such thing as a ‘good’ food except when it is theirs (21). Food companies also want people to believe there is no such thing as a bad food, especially when the product in question is theirs (21). Food companies want consumers to believe “all foods, especially theirs, can be incorporated into healthful diets and that balance, variety, and moderation are the keys to healthful diets” (21). The shift from food type to methods of managing consumption makes all advice about restricting intake of a particular product inappropriate and irrelevant (21). The subliminal nature of food and beverage advertising is “a tribute to its ubiquity, as well as to the sophistication of the agencies that produce it” (22).

Advertising is not something we can simply walk away from. It is not something that appears and remains on television screens. Advertisements continue to influence our choices even while we go grocery shopping. Marion Nestle sheds light on the concept of “slotting fees,”

which are payments that ensure a product will have space on supermarket shelves in order to maintain or increase sales (22). Research shows that the placement of food products can influence people's consumption habits. In 2009, an in-store experiment was performed to investigate the effects that shelf placement had on consumer's purchase of potato chips. Factors such as taste, mouthfeel, and the number of bags of chips were taken into consideration and measures were taken to reduce their impact on findings. The results show that the target brand of chips was most often purchased when placed on the middle shelf. The number of purchases of the target brand of chips was not as high when the brand was placed on the high shelf and the low shelf (Sigurdsson).

The effects of advertisements on behavior are not completely known, though it is easy to see how effective they can be. People are generally consuming the foods that they see advertised on a daily basis. Food companies' insistence on continuing the practice of advertising, "despite protestations that advertising is a minor element in food choice and that the ubiquity of advertising dilutes its impact" is troubling (Nestle 22). If it is such a small factor, why have billions of dollars been spent annually, and why are we still exposed to countless advertisements?

It is important to note that our collective reality is maintained by a combination of food company's efforts and our own actions. Every time we turn on the television, we allow ourselves to be exposed to certain advertisements. Every time we purchase meat or a product containing sugar, we make it easier to maintain our current eating habits and make our habits more difficult to break. Though the reality we live in today has been crafted and engineered in particular ways to guide us to consume more, it does not have to continue to be our reality tomorrow. We could choose to eliminate these unhealthy products from our diets, yet to do so would almost be like

removing ourselves from important aspects of our society, which is another issue. To what extent must we do so? Is getting rid of these products enough, or should we remove what continuously exposes us to these products, such as television? Should we avoid most aisles in grocery stores to not fall victim to subtle marketing tactics? Advertisements, along with causing many issues, leave me with more questions than answers. This indecision can easily lead to confusion, which could perpetuate the cycle of nutritional ignorance.

Though it is difficult to measure the impact of prolonged exposure to advertisements that promote products that are not healthy, it is easy to see that their pervasive existence is not doing anything to ameliorate the problem of overconsumption that is plaguing this country. It might even be fair to say that advertisements play a key role in shaping our collective food desires. It would be strange for one to be exposed to certain brands daily for years on end without developing a taste, desire, or affinity for those brands. If advertisements have become part of our environment, and our environment plays a crucial role in our development, we in part have been shaped by advertisements and are still being shaped to this day. Our governing body is unable to provide the guidance that could potentially encourage people to stop eating so much sugar and to stop eating so much meat. The food industry's influence simply does not allow the government to urge its citizens to eat less. These two factors allow food companies to influence and even force us to consume certain products. Our choice to participate in this consumption system has been made for us – we do not choose whether we want to participate, but how. We are provided with so many sugar-ridden and meat products that choosing amongst the options given seems like the only action we can take. We are confused about what good health is, just as we are unsure of how to achieve it. This disconnect between diet and healthy living is all the food

industry needs to make a profit and encourage us to choose products that put us at higher risk for illness with every bite.

### Section 3: Individual and Collective Responsibility

“...It is time to restore the American precept that each individual is accountable for his actions.”

*(Ronald Reagan)*

The purpose of this section is to explore the concept of responsibility as it relates to the complex problem of unhealthy eating habits. To recapitulate, the issues at hand are food overconsumption in the United States and its associated complications such as diet-related illnesses. Lack of awareness of these problems is also an issue. The problems exist because of a three-way interaction among the government, the food industry, and the public. The government has been a source of confusion in that its euphemized, ineffective language allows the food industry to promote unhealthy food-like products to the masses. The food industry achieves this mainly through the advertisements we have come to accept as a normal part of daily living. The public condones the behavior of both the food industry and the government by consistently exposing themselves to advertisements, purchasing unhealthy foods, and consuming such products. Acceptance of the food industry's practices, even on a subconscious level, allows the food industry to continue selling their products and makes it difficult to recognize that the dietary lifestyle it promotes is in fact unhealthy and dangerous. Consequently, eating too many unhealthy food-like products is not even seen as a problem. If those who are impacted by an issue fail to see it as such, they feel no need to look for a solution or to identify those who are responsible or call them to accountability. What need is there for a solution if there is no problem? One of the lasting causes and effects of these problems is the creation of a false correlation between advertised goodness of a product and its actual nutritional value. Government agencies, the food industry, market researchers, and advertising agencies work

together, with the results of their partnership being the promotion of poor health rather than the protection of public health.

Responsibility is a crucial, yet frequently overlooked aspect of the problem of overconsumption. It seems as though the responsibility of each of the three contributors is clear: the government is meant to regulate, the food industry is meant to create food-like products and make a profit, and the public is meant to consume (Mettler). When discussed in this way, each role seems normal, and this normalcy gets in the way of questioning each party's duty. Responsibility itself is a term that might be taken for granted. To prevent this, it is important to note that responsibility is characterized by accountability and having control.

Individual responsibility consists in individual's ability to choose and cause their own actions, while collective responsibility consists in "arrangements appropriate for addressing widespread harm and wrongdoing associated with the actions of groups" (Risser). In both instances, morality is an important guiding factor, but will not be discussed in detail. There are too many potential moral reasons behind people's desire to improve their consumption habits, and it is extremely difficult to argue with confidence that it is either one particular reason or a combination of certain reasons that motivate someone to act in a particular way. This is not to discredit the need for morality; it is to show that a more practical focus is in order for this issue.

Though the source of the more abstract idea of responsibility is not directly relevant, its more tangible basis is. The idea that responsibility is at least in part determined by purpose is a key component of my argument that the responsibility to solve the problem of poor dietary choices lies with the public. This is the most realistic distribution of responsibility, as the purposes of the public are less rigid and restrictive than those of the government and the food industry, and it is unwise to place responsibility of finding solutions into the hands of the

institutions that create the problem. To support these claims, I will explore each of the three sources of the issue to discuss both their purposes and the responsibilities based on them.

### **Governmental Purpose and Responsibility**

According to the Preamble of the Constitution, the purpose of the federal government is to “establish Justice, insure domestic Tranquility, provide for the common Defense, promote the general Welfare, and secure the Blessings of Liberty to ourselves and our posterity” (U.S. Constitution). The determination, though broad, is easy to understand and apply. In terms of the issue of the habit of overconsumption, the relevant governmental purpose is to promote the general welfare. General welfare encompasses the health, peace, morality, and safety of the government’s citizens (*General Welfare*).

However, there is one issue with the purposes of the federal government, and it involves location. These responsibilities were discussed in the Preamble of the Constitution, and the Preamble “has never been regarded as the source of any substantive power conferred on the Government of the United States or on any of its Departments” (*Jacobson v. Massachusetts*). According to Justice Harlan, the federal government and its departments “embrace only those expressly granted in the body of the Constitution” (*Jacobson v. Massachusetts*). He furthers this argument with the example of securing the blessings of liberty to all under the sovereign jurisdiction and authority of the United States, stating, “no power can be exerted to that end by the United States, unless, apart from the Preamble, it [can] be found in some express delegation of power, or in some power to be properly implied therefrom” (*Jacobson v. Massachusetts*). In sum, the government is actually not responsible for anything listed in the Preamble if it is not again discussed in the body of the Constitution. The only other mention of the general welfare in

the body of the Constitution is in the Taxing and Spending Clause, which gives Congress the authority to collect taxes in order to pay the debts of the United States, to fund the common defense, and to provide for the general welfare of the United States (U.S. Constitution). With this second mentioning comes confusion, as the meaning of general welfare is still not fully known. Even though the general welfare is meant to be provided for via tax money, the Taxing and Spending Clause's main focus is granting the government the power to levy taxes. Because promotion of the general welfare of its public is not part of the federal government's purpose, the government has no constitutional responsibility to take part in resolving the national issue of overconsumption and its resulting effects.

It would be remiss of me, however, to ignore the fact that, despite not being constitutionally obligated to do so, our federal government has programs and agencies in place to safeguard the public's health in many ways. When it comes to protecting and promoting public health, certain initiatives are in place, such as Medicare and Medicaid, which assist subgroups that are in need of medical care. The FDA is an example of an agency focused on ensuring the safety and efficacy products such as prescription and non-prescription drugs, vaccines, surgical implants and prosthetics, dietary supplements, bottled water, food additives, infant formulas, cosmetics, and tobacco ("About FDA"). Though the FDA states it also regulates "other food products," it states that the USDA plays the lead role with meat, poultry, and eggs ("About FDA"). The United States Department of Agriculture (USDA) is responsible for "providing a safety net for millions of Americans who are food-insecure and for developing and promoting dietary guidelines based on scientific evidence," amongst efforts centered on animals, biotechnology, climate, conservation, forestry, recreation, research and science, and trade (*Food and Nutrition*). The Department of Health and Human Services aims to "enhance and protect the

health and well-being of all Americans.” (*Public Affairs*). This agency fulfills that mission by “providing for effective health and human services and fostering advances in medicine, public health, and social services” (*Public Affairs*). Dietary guidelines, one of the many outcomes of government influence on the public is created by the USDA and HHS. Honest labeling requirements, taxes on unhealthy substances such as soda and tobacco, and mandated reduction of harmful ingredients in food products are some additional positive initiatives and outcomes of the work of government agencies. However, it was argued in the two previous sections that governmental public health related efforts and guidelines do not do enough to protect public health. This could be because government agencies’ purposes and goals, which would be sufficient if they were reached, are not being met, the agencies’ goals themselves are not satisfactory, or any additional explanation not considered here. Regardless of the reason or reasons behind these agencies’ lack of success, the millions of people suffering from Western illnesses attest to this shortcoming, as does the undetected and pervasive nature of the food industry’s influence over consumers’ choices.

### **Industrial Purpose and Responsibility**

The food industry, like the government, has a set purpose. According to A.E. Mettler, there are four main objectives the food industry strives to hit: “customer satisfaction, safety, providing information, and the maintenance of commercial viability” (Mettler). Food manufacturers’ effectiveness is measured by customers “wishing to buy [their products] for quality and convenience reasons, by the law of the land in meeting legal requirements for safety and labeling, and by its generation of profit in terms of commercial viability” (Mettler). In this same National Center for Biotechnology Information (NCBI) abstract, it is stated, “whereas it is

commonly expected that [the food] industry should fulfill a role in nutrition education, this is seen as a primary role of health professionals whilst [the food] industry needs to provide full and detailed information” (Mettler). Lastly, it is noted that the food industry “works hard at trying to satisfy the requirements of consumers, the industry, health professionals, and its critics” (Mettler). The troubling aspect of this is that “nutrition scientists and practitioners typically believe that food companies are genuinely interested in improving health” (Nestle 2). In sum, the purpose of the food industry is all about ensuring that certain products sell and continue to be profitable. It is important to understand that in this description of the food industry’s purpose, creating healthy foods and focusing on consumer health are not priorities. In fact, their priority is making sure that laws about safety and labeling are followed, which is troubling, since the food industry has influence over Congressional activity, and over laws and guidelines by extension (Nestle 2).

Because their purpose is centered on profit, marketing, and production, and not on the health value of their food-like products, the food industry has no obligation to work to solve the problem of overconsumption. For the food industry to do this, manufacturers would have to ignore their purpose and engage in activity that would make them go against their purpose. It is not realistic to place responsibility into the hands of the food industry. Companies with the need to hit the bottom line cannot be expected to do anything that would prevent them from reaching their goals and fulfilling their purpose, and to believe otherwise could lead to the compromise of effective solutions.

## The People's Purpose and Responsibility

We occupy an interesting space in this problematic trifecta of causes. Within this three-way relationship, we are to obey, consume, and accept. We are meant to expose ourselves to advertisements from many forms of media, listen to their persuasive messages, crave sugary snacks, purchase fast food on the way home from work or school, and believe that the ways the food industry and the government work together is normal and therefore acceptable. We are to participate within this detrimental relationship daily, and collectively, we choose to do just that. We have chosen to accept unhealthy foods into our daily lives to the point where receiving unexpected sugary food-like products or meat is seen as a pleasant surprise. Roses accompanied with a box of chocolate, Snickers bars and Reese's Peanut Butter Cups, cupcakes, chicken nuggets, hamburgers and cheeseburgers, and more are expected as gifts on certain holidays or are acceptable gifts. Just like our government and food industry, we too fulfill our purposes. Unlike the government and food industry, however, we are the only ones who experience negative consequences on individual and collective levels. While the government collects funds from the food industry, food manufacturers create unhealthy foods to stock shelves across the country. While food manufacturers stock shelves and make impressive profit, we consume their products and get sick. Not only are we the only ones not making monetary gains; we are also the only ones being negatively impacted because of our ignorance of the problem.

Our collective position within this problematic relationship is unique because there is more to our purpose within the realm of food and healthy eating. Despite pervasive conditioning, we are capable of making choices. We choose specific brands over others. It is important to note that our power to choose can and does extend beyond the selection of unhealthy foods we are presented with. Within certain limits, we can choose whether to participate in the consumption of

unhealthy food. The general maintenance of a good quality life is a purpose that motivates us to engage in activities that sustain us and ensure that we are able to provide for others and ourselves if we are supporting more than just ourselves. Herein lies the application of both individual and collective responsibility. We are responsible for the preservation and improvement of our own health, and if we are part of a family or group where our actions can be influential, we have a responsibility to do what is best for ourselves, not just for our own sake, but also for the benefit of those around us. The collective in this sense remains relatively small, and its small size is appropriate because would not be fair or logically consistent to compare the scope and impact of collective effort of a group of individuals to that of an industry or institution. Because we have the purpose of ensuring our lives are of good quality, we have the responsibility to ensure what we do contributes to our wellbeing.

The individual responsibility we have to care for our own health leads to a sense of collective responsibility. In order to care for ourselves, we, to varying extents, should ensure that our surrounding area allows for us to continue upholding our obligation to ourselves. This could take the form of ensuring our grocery stores have ample healthy food products and making sure our schools have healthy options for lunch. On a larger scale, we also should care for our individual health so as to not become a burden to our communities. There is a social cost element to the maintenance of individual health, as diet-related illnesses can become a financial responsibility government agencies and the public must bear, though they might not be the ones dealing with these diseases. There is also a political civic engagement component to individual and collective responsibility. Taking action by participating in the democratic process by way of voting for and electing government representatives and officials who will promote public health is one way to improve the national issue of overconsumption of healthy food. Representatives

can argue on behalf of the public and can voice their concerns in an arena where changes can be made. I have already shown that diet plays a crucial role when it comes to our health in the previous sections, and because it does, diet is linked to our wellbeing. This connection is what places both individual and collective responsibility in our hands. We are the only ones with a more direct and pressing obligation to do well for ourselves and those under our care or influence.

### **Shared Responsibility**

I have briefly stated why I do not agree with giving full or partial responsibility to the government and the food industry. It is simply not feasible to ask or expect institutions to do what will either not directly benefit them or will hinder them from fulfilling their purpose. I also mentioned that it would be difficult to have effective solutions when one of the reasons for the problem is involved. To explore this further, I will draw on two essays focused on the idea of responsibility.

The essay by Tempels et al, “Big Food’s Ambivalence: Seeking Profit and Responsibility for Health” explores the apparent “split corporate personality” of food companies, as “they contribute to public health problems and simultaneously engage in activities to prevent them” (Tempels et al 402). This essay argues that efforts food companies take toward promoting health can be effective even though the companies are concurrently contributing to the problem (Tempels et al 404). Another important argument is centered on the idea that the troubling and complex behavior of food companies can be improved (different word) by way of “additional governmental legislation and rule setting that can curb the negative corporate impact on population health” (Tempels et al. 403). The final major argument of this essay focuses on shared responsibility. “Responsibility for population health can be seen as shared among

multiple actors” and should “venture beyond the concepts of government and personal responsibility” (404). Tempels et al further supports this argument by stating that the different actors that contribute to this problem all have the responsibility of tackling population health problems (405). I do not fully agree with any of the three arguments in this essay.

The argument about the effectiveness of corporate initiatives to promote better health is incomplete. Though Tempels et al shed light on issues industrial involvement brings, there is no discussion about the comparative benefits and drawbacks of said involvement. It is unclear whether the benefits of food companies’ involvement in health initiatives outweighs or cancels out the effects of their contribution to the problem that needs to be fixed. These topics remain separate throughout the essay, and though mentioning some major downsides of corporate involvement is important, it is unclear whether said involvement is enough to encourage us to ignore how it benefits the companies while it benefits the public. However, I cannot completely disagree with the effectiveness argument. Exposure to information and opportunity is crucial, and I believe that initiatives, such as sponsorship of sports teams and tournaments, create chances for people to become more active. However, health initiatives should not come with tradeoffs that could potentially compromise the validity of said efforts and have negative effects on participants.

The argument about additional government action is not feasible, at least not for the federal government of the United States. As discussed earlier in Section 2.1, the food industry influences Congress and much of the research that is considered during legislative deliberation and the formation of dietary guidelines. It is unrealistic to believe our government would be able to create additional legislation that is not under the influence of the food industry or of the research it funds. It is also difficult to imagine the government passing laws that would undo

laws and strengthen euphemized language that allow for the food industry to create their products and advertise them the ways they do, even through agencies that focus on public health.

The final argument Tempels et al makes is rooted in ethics and morality rather than in the more tangible realm of responsibility guided by purpose. Though shared responsibility amongst the causes of poor public health is quite an ethical solution, it ignores the reality of our contemporary situation. Expecting institutions to improve or fix something without being prompted either by public outcry or by legal consequence is not practical. Evaluating the purposes of the federal government as a whole reveals that public health is not a focus. This is complicated by government agencies who have made promoting public health a priority, for they have chosen to take on the responsibility of focusing on public health.

Marks's essay, "Caveat Partner: Sharing Responsibility for Health with the Food Industry" rejects Tempels et al's concept of split corporate personality. Marks's challenge to the split corporate personality focuses on three drawbacks of corporate involvement: the creation of "health halos," diverting attention away from the nature of food companies' unhealthy products, and the false nature of the paradox of corporate involvement (Marks 360). Health halos are created around certain foods when they are indirectly promoted as healthy by association and become issues when they "exacerbate unhealthy diets" (360). Continuing with the example of programs that encourage people to pursue an active lifestyle, Marks states that the "activities are usually designed to distract attention from the unhealthy nature of the company's products" (360). Tempels et al conclude that there is a sort of balance between institutional involvement in health initiatives and contribution to the problem of poor health, and Marks believes that the equivocal behavior Tempels et al describes as paradoxical fails to show the oppositional nature of the food industry's strategies. Because of this, Marks is not convinced that these strategies are

oppositional, but rather are “parts of a broader corporate strategy whose goal is to protect commercial interests” while undermining public health (360). The second main argument introduced focuses on the idea of institutional integrity. Institutional integrity requires “consistency among what an institution does (its practices), what the institution says it does (its mission), and what it is obligated to do (its purpose) and Marks believes this concept should be applied to institutions, as well as to individuals (360). Lack of consistency amongst the requirements shows that a particular institution lacks integrity. Another key argument in this response essay is that governments, not corporations, are the guardians of public health. Marks does not agree that governments “should collaborate with industry to protect and promote public health” (361).

I agree with Marks’ first and second arguments and partially disagree with his third stance. His first main point shows that food companies can easily exaggerate the impact of adding some healthy ingredients in their products, which gives them room to claim that their products are healthier than they actually are. This overstatement can easily cause confusion in the minds of those who consume their products, which is something the food industry capitalizes on (Nestle 21). The way involvement in health initiatives can distract attention away from how unhealthy a particular food company’s products are can be confusing to participants. Even though the effects of advertising are not fully known, association between an unhealthy food product and a healthy activity such as a sports tournament can potentially encourage participants to see said product as healthier than it actually is. The fact that involvement in health initiatives benefits food companies by potentially causing confusion is one reason why involvement does not measure up to the harmful impact of unhealthy foods. The final component of Marks’ first point is that involvement in both the creation and solving of the problem of poor public health do

not oppose each other or cancel each other out. I agree with Marks' idea of seeing these seemingly paradoxical actions as complementary rather than oppositional. By having something positive to offset the negative, finding complete fault in a food company's can be difficult.

Institutional integrity should be applied to institutions, and I think focusing on a company's practices, its mission, and its purpose provides a comprehensive measurement of consistency. Though lack of integrity can influence a food company's reputation, I am unsure how much weight a company's integrity holds. If a food company with a poor reputation cannot be prevented from creating lucrative partnerships or selling unhealthy products, why would institutional integrity be measured? If, as Marks states, "a public health agency collaborating with industry may undermine its public health mission and purpose, and in turn, erode its integrity," what would the consequences for lack of integrity be? Is lack of integrity enough to make food companies or other agencies financially undesirable? What impact could lack of integrity have on public opinion? Though I do agree that institutional integrity should be applied and measured, I am not sure of any impact potential outcomes it would have.

I partially disagree with Marks' final argument, which is that governments are the guardians of public health. As discussed above, the federal government is not legally responsible to guard, focus on, or improve public health or anything dealing with general welfare of the public. Despite not having any mandated legal obligation, government agencies have taken responsibility for monitoring and protecting public health. This taking on of responsibility does make agencies liable for not living up to their mission statements and purposes, though the consequences for failing to do so are not clear outside of loss of integrity. Additionally, I believe we should be the primary guardians of our own health for our health is crucial for maintenance of a good quality life. It should be our responsibility to educate ourselves about nutrition and to

make good decisions based on what we learn. I do not believe the government should be the primary or sole guardian of public health, and in the same vein, I do not believe the work of government agencies should be discounted or discredited. Subsection 2 of this section does support his argument that responsibility to improve public health should not be shared with the food industry, however, albeit for differing reasons.

## A Brief Summation

Through the examination of the purposes of the government, the food industry, and the public, a discussion of each contributor's responsibilities could be had. The results of the discussion find that the federal government as a whole is not legally obligated to focus on or prioritize public health. The food industry is also not obligated to focus on public health. The public is the only component that is not as tightly bound to this three-way relationship or to its purpose within this relationship. The public has purposes outside of this connection, and therefore has additional responsibilities. One purpose we have is to ensure that we maintain a good quality of life, and part of good life quality is good health, which is heavily influenced by the foods we eat. Because of this, diet plays a crucial role. The purposes of being a consumer of unhealthy foods as well as striving toward good life quality appear to be at odds, but despite this, we have the power to choose whether we contribute to the nationwide issue of overconsumption of unhealthy foods. We also have a variety of avenues to exercise our individual and collective power.

## Conclusion

We have a serious problem in the United States – we collectively eat too many unhealthy food products. Millions of people today are suffering from diet-related illnesses, appropriately dubbed the Western diseases. Even more people are unaware of the problem itself and continue to accept our food system as it is. We have accepted the food industry’s persuasive and pervasive marketing tactics to the point where they are normalized. Because of this, we generally do not look at the food industry as a source of the problem, nor do we look at the actions our federal government and its agencies take. The efforts of the food industry and the government have created and maintained an ideological dilemma where marketed goodness and association are closely tied with nutritional value, which both creates and exacerbates the problems of poor public health and the lack of initiatives to improve this situation. Though government agencies have taken on the responsibility of promoting the public welfare, they should not be seen as the primary or sole guardians of public health. The responsibility to maintain individual and collective health should be seen as ours, and we are capable of making the changes necessary on individual, community, and political levels.

## Bibliography

- “About FDA.” *U S Food and Drug Administration Home Page*,  
[www.fda.gov/AboutFDA/default.htm](http://www.fda.gov/AboutFDA/default.htm).
- Barclay, Eliza. “A Nation Of Meat Eaters: See How It All Adds Up.” *NPR*, NPR, 27 June 2012,  
[www.npr.org/sections/thesalt/2012/06/27/155527365/visualizing-a-nation-of-meat-eaters](http://www.npr.org/sections/thesalt/2012/06/27/155527365/visualizing-a-nation-of-meat-eaters).
- “Cancer Facts & Figures 2018.” *American Cancer Society*, [www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2018.html](http://www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2018.html).
- “Diabetes Data & Statistics.” *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 14 Nov. 2017, [www.cdc.gov/diabetes/data/](http://www.cdc.gov/diabetes/data/).
- Durisin, Megan, and Shruti Date Singh. “Americans' Meat Consumption Set to Hit a Record in 2018.” *The Seattle Times*, The Seattle Times Company, 2 Jan. 2018,  
[www.seattletimes.com/business/americans-meat-consumption-set-to-hit-a-record-in-2018/](http://www.seattletimes.com/business/americans-meat-consumption-set-to-hit-a-record-in-2018/).
- “Food and Nutrition.” *USDA*, [www.usda.gov/topics/food-and-nutrition](http://www.usda.gov/topics/food-and-nutrition).
- “General Welfare.” *The Free Dictionary*, Farlex, [legal-dictionary.thefreedictionary.com/General Welfare](http://legal-dictionary.thefreedictionary.com/GeneralWelfare).
- Heid, Markham. “Food Industry Lobbying and U.S. 2015 Dietary Guidelines.” *Time*, Time, 8 Jan. 2016, [time.com/4130043/lobbying-politics-dietary-guidelines/](http://time.com/4130043/lobbying-politics-dietary-guidelines/).
- “Heart Disease.” *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 28 Nov. 2017, [www.cdc.gov/heartdisease/facts.htm](http://www.cdc.gov/heartdisease/facts.htm).
- “HENNING JACOBSON, v. COMMONWEALTH OF MASSACHUSETTS.” *LII / Legal Information Institute*, [www.law.cornell.edu/supremecourt/text/197/11](http://www.law.cornell.edu/supremecourt/text/197/11).

Marks, Jonathan H. “Caveat Partner: Sharing Responsibility for Health With the Food Industry.”

*American Journal of Public Health*, vol. 107, no. 3, 2017, pp. 360–361.,

doi:10.2105/ajph.2016.303646.

Mettler, A E. “The Role of the Food Industry.” *National Center for Biotechnology Information*,

U.S. National Library of Medicine, [www.ncbi.nlm.nih.gov/pubmed/3463120](http://www.ncbi.nlm.nih.gov/pubmed/3463120).

Nestle, Marion. *Food politics: How the Food Industry Influences Nutrition and Health*.

University of California Press, 2013.

“Overweight & Obesity Statistics.” *National Institute of Diabetes and Digestive and Kidney*

*Diseases*, U.S. Department of Health and Human Services, 1 Aug. 2017,

[www.niddk.nih.gov/health-information/health-statistics/overweight-obesity](http://www.niddk.nih.gov/health-information/health-statistics/overweight-obesity).

Public Affairs. “About HHS.” *HHS.gov*, 18 Mar. 2016, [www.hhs.gov/about/index.html](http://www.hhs.gov/about/index.html).

Risser, David. “Collective Moral Responsibility.” *Internet Encyclopedia of Philosophy*. Web.

<http://www.iep.utm.edu/collecti/>

Sigurdsson, Valdimar, Hugi Saevarsson, and Gordon Foxall. “BRAND PLACEMENT AND

CONSUMER CHOICE: AN IN-STORE EXPERIMENT.” Ed. Ron Van Houten. *Journal of*

*Applied Behavior Analysis* 42.3 (2009): 741–745. PMC. Web.

Taubes, Gary. *The Case Against Sugar*. New York: Alfred A. Knopf, 2016.

Taubes, Gary. *Why We Get Fat: And What to Do About It*. Anchor Books, 2011.

Tempels, Tjidde, et al. “Big Food’s Ambivalence: Seeking Profit and Responsibility for Health.”

*American Journal of Public Health*, vol. 107, no. 3, 2017, pp. 402–406.,

doi:10.2105/ajph.2016.303601.

“The NCES Fast Facts.” *National Center for Education Statistics (NCES) Home Page, a part of*

*the U.S. Department of Education*, [nces.ed.gov/fastfacts/display.asp?id=84](http://nces.ed.gov/fastfacts/display.asp?id=84).

Thompson, Paul B. *From Field to Fork: Food Ethics for Everyone*. Oxford Univ. Press, 2015.

*U.S. Constitution*

“U.S.: Number Supermarket/Grocery Stores 2016.” *Statista*,

[www.statista.com/statistics/240892/number-of-us-supermarket-stores-by-format](http://www.statista.com/statistics/240892/number-of-us-supermarket-stores-by-format)

## Academic Vita

Indigo Murray  
Ism5039@psu.edu

### Education

The Pennsylvania State University  
Major: Philosophy  
Minors: Rhetoric, Communication Arts and Sciences  
Honors: Philosophy

Thesis Title: The Issue of Individual and Collective Responsibility in Relation to American Dietary Choices

Thesis Supervisor: Brady Bowman  
Faculty Reader: Jonathan Marks

### Teaching Experience

Date: September 2016 – May 2018

Title: Teaching Assistant for Bi Sci 003

Description: Designed interactive lesson plans, facilitated engaging class discussions, communicated learning expectations, and graded fairly for 2 recitation sections, 12 students each. Offered and accepted salaried part-time Teaching Assistant position for 2017-2018, which entails training Teaching Assistants and providing assistance during course lectures

Institution/Company: The Pennsylvania State University

Supervisor's Name: Christopher Uhl

Date: May 2016

Title: Social Justice Student Teacher

Description: Taught self-designed socio-economic status lessons centered on issues in social justice for 2 weeks in Washington D.C.'s Anacostia Senior High School via Penn State's Social Justice Fellowship

Institution/Company: The Pennsylvania State University, Georgetown Law School

Supervisor's Name: Efrain Marimon

### Research Experience

Date: October 2017

Title: Community Narratives Project Research Assistant

Description: Facilitated discussions centered on diversity, safety, the Penn State community, similarities, and differences and assisted with data collection

### Awards and Programs

Bunton-Waller Fellowship Recipient

Chaiken Family Trustee Scholarship Recipient

Dean's List: Fall 2014, Spring 2015, Fall 2015, Spring 2016, Fall 2016, Spring 2017, Fall 2017

College of Liberal Arts Superior Academic Achievement Award: Spring 2015, Fall 2015, Spring 2016, Fall 2016, Spring 2017

START Diversity Essay Contest Winner: Spring 2016, Smeal College of Business

TRIALS Program: Summer 2017, Harvard Law School: extremely selective and highly rigorous 5 week residential scholarship program that helps gain admission to leading law schools via LSAT prep, lectures, and lawyer work observation while experiencing an authentic law school community

Language Proficiency: Proficient in Spanish