Social media analysis

Mother and child promotion:
A preliminary analysis of
social media marketing of infant formula

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Memo prepared for
Feeding infants and children:
Is industry marketing undermining health?
A cross-disciplinary meeting to identify research questions and
explore opportunities for action

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Introduction

The science is clear: breastfeeding is good for the health outcomes for mothers and babies, and prominent organizations like the American Academy of Pediatrics, the American Nurses Association, and the World Health Organization are unanimous in recommending exclusive breastfeeding for the first six months of an infant’s life. But while many women want to comply with those recommendations and exclusively breastfeed their children, breastfeeding rates decline rapidly after women leave the hospital. Women in low-income communities and communities of color are, for a host of reasons, least likely to breastfeed their infants.

One barrier to successful breastfeeding may be the widespread marketing of infant formula. Infant formula marketers spend millions on direct-to-consumer advertising each year and consequently, women are exposed to formula marketing not only in hospital and healthcare settings, but also through direct-to-consumer advertising in retail stores, in print ads, and online. Traditionally marketing happens through the “4 Ps”: product, place, price, and promotion. A “fifth P,” personalized marketing, is emerging as an important component of digital marketing. Marketers exploit each of the Ps to target customers, but promotion is the most visible, because it includes the advertisements and offers we see, like coupons or billboards and more recent types of digital marketing. Because low-income women, particularly younger women and immigrants, have significantly higher fertility rates than affluent, well-educated women, US formula marketing in all forms, by definition, targets these groups.

Though infant formula marketing is extensive, addressing it can be overlooked in efforts to increase breastfeeding rates — and digital marketing in particular is understudied. To begin to address these gaps in the literature, we summarize here what is known about infant formula marketing and present a preliminary analysis of one aspect of digital advertising.

The Four Ps of Marketing

- **Product** refers to the product lines designed specifically for different consumers.
- **Place** describes where products are sold and consumed, including digital & physical spaces.
- **Price** refers to the price of their products set to appeal to certain customers.
- **Promotion** refers to anything from advertisements and coupons to digital marketing through smartphones.
A brief overview of the literature on infant formula marketing

Most research and advocacy to date has focused on the marketing and distribution of infant formula within hospital and other healthcare settings.\textsuperscript{12, 23-26} Hospital policies to remove infant formula marketing are important because of the impact of doctors’ recommendations and hospital-based advertising on women’s feeding decisions and beliefs about breastfeeding.\textsuperscript{15}

There is less research to date on the content and impact of infant formula marketing, though there is evidence that exposure to formula marketing may undermine breastfeeding initiation, dilute exclusivity, diminish women’s confidence in their ability to breastfeed, and shorten the duration of breastfeeding.\textsuperscript{14, 27-30} Additionally, formula labels may cause confusion among mothers and pregnant women,\textsuperscript{31} which is especially troubling in light of a recent review of infant formula labels, which found limited evidence for many of the health claims that appeared.\textsuperscript{32}

Despite the well-documented racial disparities in breastfeeding and increasing attention to racial equity concerns within the breastfeeding field,\textsuperscript{33} targeted marketing of infant formula — that is, marketing of formula to women from low-income communities and communities of color — is also understudied. Research suggests that African American women are more likely to receive infant formula in hospitals than are their white counterparts, but it is unknown if this disparity is mirrored in other marketing channels.\textsuperscript{34}

The World Health Organization adopted the “International Code of Marketing of Breast Milk Substitutes” in 1982.\textsuperscript{35} The code broadly bans marketing, and includes provisions that bar the distribution of free samples to mothers, the promotion of products in health care facilities, and use of words or pictures that idealize artificial feeding. Though the effectiveness of the Code is up for debate — a number of violations have been documented \textsuperscript{36,38} — it is the primary tool regulating infant formula marketing internationally. The United States did not sign on to the code,\textsuperscript{35} and despite ongoing efforts by medical and legislative bodies in the United States to promote breastfeeding\textsuperscript{39} and encourage responsible marketing in line with the Code,\textsuperscript{40} US formula companies continue to violate its principles.\textsuperscript{18, 41}

Digital infant formula advertising — and the industry’s compliance with the Code in digital spaces — is poorly understood, though we know that marketers are leveraging an ever-more-sophisticated range of digital data-collection practices to track and target consumers with unprecedented levels of personalization. The analyses of formula marketing that do exist tend to focus on print
advertising, product labels, television commercials in international contexts, or other types of physical products like hospital discharge bags. Only a few analyses have explored examples of web-based or other digital marketing. This gap in the literature is troubling in light of evidence that formula marketers, like other food and beverage advertisers, are increasingly using digital strategies — like social outreach, apps, or online communities — to reach mothers. Digital marketing, moreover, is uniquely problematic in that the widespread adoption of mobile devices and the broad use of social media enables marketers to reach a pregnant woman far earlier — indeed, as soon as she in some way signifies her status. The ability of digital marketing to reach consumers early and constantly with carefully personalized content has created a new marketing paradigm and with it, a new challenge for anyone who seeks to reduce the influence of infant formula marketing on breastfeeding rates.

Given the rising influence of digital marketing in general, we wanted to know: how are infant formula companies using one key tactic, social media, to connect with potential customers?

**A preliminary analysis of social media marketing of infant formula**

Three infant formula brands are made by companies who control the majority of the marketplace: Enfamil (made by Mead Johnson), Similac (made by Abbott), and Gerber Good Start (made by Nestlé). All three companies maintain elaborate websites, YouTube channels and social media presences, and offer branded apps, among many other digital tactics. For this preliminary analysis we evaluated a snapshot of just one aspect of this extensive digital presence: Tweets and Facebook posts, and posts from “mommy bloggers” sponsored by formula companies. Sponsored blogging, sometimes called “influencer marketing”, is a controversial practice whereby popular bloggers (in this case, parent bloggers) with existing readerships create content for a sponsoring company. The blogger’s popularity allows the company to capitalize on the trust and online relationship between the blogger and her fanbase.

**What we did**

We captured Facebook posts, Tweets, and sponsored blog posts from three major formula producers. We collected and coded as much data as was feasible from each platform, regardless of slight differences in timeframe, although we focused our analysis on content published in 2015 and 2016.

We manually downloaded and coded Enfamil and Similac Facebook posts published over 6 months (February 2016 to August 2016). Gerber does not have a corporate Facebook page. We used
Twitonomy to download Tweets posted in 2015 and 2016 from the @Enfamil and @BabyNes (Gerber) accounts. We were unable to obtain Tweets from Similac’s corporate account. Finally, we searched Google to find blog posts sponsored by Similac, Gerber, and Enfamil, using phrases like: “[post/blog] sponsored by [Similac/Enfamil/Gerber formula”].

**What we found**

We found and coded 923 Facebook posts and Tweets. Gerber’s Twitter presence is currently centered on advertising BabyNes, a Keurig-like automated formula dispenser “inspired by breast milk,” though the brand is active in other ways on various social media platforms. Enfamil’s Twitter posts accounted for nearly three quarters of the sample. The company used Twitter primarily to engage customers and maintain contact with them by responding to customer complaints, comments, or accolades: this type of customer service engagement comprised 94% of Enfamil Tweets. Overall, customer service engagement accounted for 81% of Tweets.

We also found and coded 61 sponsored blog posts published in 2015 and 2016. The majority of blog posts in the sample were sponsored by or referenced Similac. Due to their longer format, we categorized each blog by theme. Sponsored blogs that appeared in this sample often promoted a product or promotional campaign.

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<tr>
<th>Themes in infant formula company-sponsored parenting blogs</th>
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<tbody>
<tr>
<td>Blogs dedicated to <strong>general brand-building</strong> or product reviews (24% of blogs).</td>
</tr>
<tr>
<td>Blogs promoting <strong>specialty formulas</strong> to address dietary or medical needs (24%)</td>
</tr>
<tr>
<td>Blogs promoting <strong>the Sisterhood of the Motherhood</strong> marketing campaign (21%)</td>
</tr>
<tr>
<td>Blogs promoting Similac’s <strong>non-GMO formula</strong> (16%)</td>
</tr>
<tr>
<td>Blogs promoting a <strong>giveaway, sweepstakes, or coupon</strong> (15%)</td>
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**What claims do formula marketers make about their products on social media?**

We analyzed in-depth the posts, Tweets and blog posts that went beyond customer service engagement (355 substantive pieces coded across platforms). Marketing claims that promoted formula appeared often on Twitter and in sponsored blogs (56% of Tweets and 66% of blog posts), but seldom appeared on Facebook (24% of Facebook posts).

The majority of marketing claims focused on the health benefits of formula for infants. The most frequent claims focused on the nutrients provided by a particular brand, or its general “nutritional
value.” Other more specific health or nutrition claims positioned formula as superior to breast milk in combating colic, or explicitly equated infant formula with breast milk.

| Claims about the benefits of infant formula for babies across all platforms |
|---------------------------------|-------------------------------------------------|
| **General nutritional value**   | Tweet: @thatsBetsyV: A new innovative way to give your child all the nutrients they need with Gerber BabyNes machine #giveaway #blogger 7 |
| (70% of health claims)          | Sponsored blog post: Enspire™ by Enfamil® costs a little more due to premium components, but this is totally worth it, because I know that it’s Enfamil’s closest formula to breast milk. Because Enspire™ narrows the compositional gap between formula and breast milk, I know that I want my baby to have it.51 |
| **Similar to breast milk**      | **Fights colic**                                |
| (17% of health claims)          | Tweet: Enfamil: It takes time for a baby’s digestive system to mature and work smoothly. Learn how to help ease the transition. http://t.co/FwnpMSgbKA52 |
| (13% of health claims)          | |

Comparisons between breast milk and formula were relatively common on blogs. These comparisons appeared in 1 out of 5 blog posts, as when blogger Momma Without a Clue posted: “After all, the nutritional benefits of breast milk can’t be found in a formula. Or can they?”53

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<tr>
<th>Example of a health claim on Facebook.5</th>
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<tbody>
<tr>
<td><img src="image" alt="Example of a health claim on Facebook" /></td>
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Product claims that weren’t about the health benefits of formula for babies focused instead on the value of the formula for parents. One set of claims emphasized the convenience of using infant formula or framed formula as a responsible or necessary option for parents. Another set of claims emphasized parental choice and often included language that evoked a defensive relationship between formula feeding parents and others — positioning the formula maker as protecting formula feeding parents from judgment, as when one Facebook post mused “Formula feeding: Feeling like you need to explain your decision?” A third set of parent-targeted claims celebrated formula as a way to help fathers feed their children and be involved in parenting.
How else do formula marketers promote their products? Occasionally, Tweets and Facebook posts intended to market formula did not explicitly make claims about the product. Instead, they promoted events like product launches or included generic, but branded, parenting tips. For example, one Enfamil Tweet urged, “To help build your infant’s communication skills, keep talking! All the sounds he hears help him pick up and edit his language. #Babytalk from Enfamil.” Facebook posts also occasionally engaged parents by encouraging them to share pictures of their children in comments.

A small subset of Tweets subtly aligned the product and company with parents’ hopes and dreams for their new babies. These Tweets also tied the brand to the aspirational and motivating #feedingpositivity hashtag.

| Convenience (42% of parent-targeted claims) | Tweet: @nuttynetty27: #FeedingPositivity my daughter could use it, she’s a new mom who needs something fab like @BabyNes to make life easier |
| Options (32% of parent-targeted claims) | Sponsored blog post: It’s those kind of individual choices that I’m so adamant families, moms and babies make for themselves. Because we are all different. Different parenting styles, different lifestyles, different priorities leave us needing to support each other while we research, choose and execute those parenting choices. Tweet: @AudreyMcClellan: What a terrific and healthy conversation we're having at @BabyNes event! Options, best for parents. #FeedingPositivity |
| Fathers can be involved in feeding (26% of parent targeted claims) | Tweet: An #EnfaDad is a part of the everyday rituals. Tag this post with a great #dad you know. Tweet: Life is a lot more manageable when both parents are caring and willing to share the load - Matt Schneider @citydads group #FeedingPositivity Tweet: “Have both parents involved from day 1, it's key to family bonding with baby" - @DrMommyCalls #FeedingPositivity https://t.co/onQ1WMWd9t |

Images that evoke parental choice from marketers’ Facebook pages.
Conclusions

We know that breastfeeding confers health benefits to mothers and children, but many women are unable to meet their breastfeeding goals. One systemic approach to reduce barriers to breastfeeding may be to reduce exposure to infant formula marketing. Research and advocacy to promote breastfeeding has traditionally focused on reducing formula marketing in hospitals and other medical spaces. Digital direct-to-consumer marketing has grown rapidly and can target parents with unprecedented personalization and frequency. Not only is such marketing understudied, it also represents a new marketing paradigm in which parents receive personalized marketing for infant formula — and they receive that marketing aggressively, continuously, and starting early in pregnancy.

Our preliminary analysis of infant formula social media marketing reveals that marketers use a range of social media strategies (including Twitter, Facebook, and sponsored posts on parent blogs) to reach customers. Much social media outreach emphasizes not only the health benefits of specific products to infants, but also the benefits to parents. We also identified a number of examples of formula companies using social media to tap into the emotional and psychological aspects of parenting by, for
example, evoking positive values (like choice or freedom from judgment), providing parenting tips, or aligning themselves with parents’ dreams for their children.

Our analysis, though preliminary, raises a host of questions about infant formula marketing, and digital marketing in particular:

• Compared to traditional marketing, does digital marketing of infant formula foster complex emotions, visual experiences and brand relationships among new and expecting parents?

• What other platforms or digital tactics are marketers using to target mothers? What is the impact of these new tactics, where, for example, parents are the “brand ambassadors” bringing messages to other parents in a more nuanced and emotional way than billboards, coupons or gift bags could?

• How are marketers reaching new and expectant mothers where breastfeeding rates are low, as in low-income communities and communities of color?

• What are the health implications of this marketing for infants and parents? What are the psychological and emotional effects of the marketing?

• What are the policy and regulatory strategies that could be used to reduce the influence of this marketing and protect parents and children?

We need a research agenda that encourages scholars to answer these and other questions, to uncover and understand how formula marketers may undermine breastfeeding — and consequently the health of mothers, children and the generations that follow.
Citations


