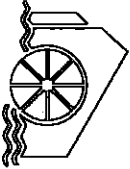


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Chapter 6

INVENTING BABY FOOD: GERBER AND THE DISCOURSE OF INFANCY IN THE UNITED STATES

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The consumption of food is an extraordinarily social activity laden with complex and shifting layers of meaning. Not only what we eat, but how and why we eat, tell us much about society, history, cultural change, and humans' views of themselves. What, when, and how we choose to feed infants and toddlers—the notion of “baby food” as opposed to “adult food,” and whether these foods are nourishing and satisfying—reveal how mass production, consumption, and advertising have shaped our thinking about infancy and corresponding parenting philosophies and practices. This essay explores the naturalization of mass-marketed baby food through an examination of the origins, development, and early marketing of the Gerber Products Company. Specifically, it relates how in one generation, from Gerber's beginning in the late 1920s to the 1950s' postwar baby-boom years, mass-produced solid infant food, especially fruits and vegetables, shifted from being an item of rarity into a rite of passage—a normal, naturalized part of an infant's diet in the United States.

While scholars have amply researched and analyzed the shift from breast- to bottle-feeding in the United States and elsewhere, the important historical, cultural, and nutritional implications of solid infant food in this change have not been adequately explored.¹ An in-depth historical examination of the subject is important, as late-twentieth-century studies show that before the age of four months, an infant's gastrointestinal system is ill equipped to receive anything but breast milk or its equivalent (though, there is much debate over the adequacy of formula substitutes as well). Too early an introduction of solids can put undue stress on kidney functioning. Foods displacing breast milk (solid food as well as formula) limit the ingestion of important antibodies, enzymes, hormones, and other substances that assist in a child's optimal development. Moreover, studies

show that children who are breast-fed develop fewer bacterial and viral illnesses, food allergies, incidences of diarrhea, ear infections, and perhaps even cancer. Thus prevailing wisdom at the turn of the twentieth century exhorts breast-feeding to the age of twelve months—with the American Academy of Pediatrics advocating the nursing of infants to two years of age if possible—and the introduction of foods at four to six months.²

In the space of about a hundred years (from the mid-nineteenth to mid-twentieth centuries) normal feeding patterns of infants in the United States changed from near-exclusive provision of breast milk (whether by mother or by wet nurse) and an introduction to solids later in the infant's first year, to bottle-feeding and the introduction of solids at six weeks postpartum. These interrelated changes from breast to bottle and from late to early introduction of solids were both products of many well-known social and economic components of the late nineteenth and early twentieth centuries: industrialization, mass production, and advertising of the food supply; changing consumption patterns; the discovery and promotion of vitamins; evolving notions of the body and health; the promotion of science as the ultimate authority; and the medicalization of childbirth and infancy, yielding the medical establishment's increased prominence and power. While mothers and health professionals alike welcomed commercially mass-produced baby food as a convenient, affordable way to provide more fruits and vegetables year round for American babies, the creation and marketing of Gerber baby food, which from its inception has dominated the U.S. market, helped spur the introduction of solid foods into babies' diets at increasingly earlier and earlier ages. Gerber baby food thus functioned as not only a supplement to but also a substitute for breast milk, playing an important role in the dramatic decline of breast-feeding in the twentieth century. To explore these issues, I will examine the discourse of late-nineteenth- and early-twentieth-century “pre-Gerber” infant feeding patterns, detail the origins and development of Gerber baby food, and analyze early marketing campaigns in the 1930s directed toward women as both professional dietitians and mothers.

A word about sources and their interpretation: the following ideas and arguments rest largely on close readings of (among other types of data) over two dozen household and child-care advice manuals. These materials, as well as Gerber's advertising campaigns and corporate literature, are documents largely prescriptive in nature, and thus problematic. While they divulge much about the ideas of the “experts,” they are less successful in helping us understand what and how women actually fed their infants: how they used the foods, what meanings women inscribed upon them, and how women received and made use of the advertising information and images. Historian Jay Mechling rightly views with skepticism any demonstratable connection between advice manuals and actual practice. Arguing that people gain most of their notions of “correct” child-rearing

from their parents as well as the larger culture in which they were raised, he regards any instruction through child-care manuals as supplemental at best. "Childrearing manuals are the consequents not of childrearing values," Meckling argues, "but of childrearing manual-writing values,"¹³ which is to say, the values of those people writing the manuals, embedded in the existing culture and patterns of behavior. During the period explored here, Meckling notes, the "source of advice is connected with the rise of a specialized subuniverse of knowledge, language, and power [and] communicates quite clearly that childrearing knowledge was specialized knowledge" held by a growing number of "experts," whether in home economics, nutrition, or the medical profession.¹⁴ Thus, "to whatever extent there appears to be a sharing or at least a complementarity of these internal states across several authors," Meckling concedes, "the historian can generalize further about some sector of the belief system of a historical American society."¹⁵

While this belief system may not directly coincide with mothers' actual infant feeding practices, it is possible to tease out some information from the experts' publications regarding how, what, and when mothers fed their infants.¹⁶ Fortunately, for our purposes we can use these sources of information for what they do best—to uncover a newly emerging discourse regarding infant food and feeding practices from such "experts." While the manners in which women actually did feed their infants become visible here through a limited number of primary documents, a full understanding of actual practices, a crucial part of the larger historical dynamic, must be saved mostly for another day. Nevertheless, a focused examination of the "expert" discourse becomes the first step in unfolding the very important story of women and solid infant feeding practices in the United States.

"ARTIFICIAL" INFANT FEEDING IN THE NINETEENTH CENTURY

To understand fully the effects of mass-produced baby food it is important to revisit the development of artificial infant formulas, the forerunners of mass-produced solids such as Gerber. Existing scholarship indicates that in the preindustrial Western World, 95 percent of children were breast-fed, either by their mothers or wet nurses. Breast-feeding, often called "wet-nursing" whether performed by the infants' biological mother or by another woman, contrasted with the remaining small percentage of infants who were "dry-nursed," or "brought up by hand," that is, fed mixtures of boiled flour and water or animal milk, variously called *pap* or *panada*.¹⁷ While the earliest-known infant feeding devices date back to the second or third centuries, we know little about how they were used.¹⁸ Cross-cultural research as well as common sense, however, indicates that the weaning process took place over a period of months or years. Preindustrial-era infants were at some point introduced to *pap* mixtures as a supplement to breast milk, which then gradually became a more prominent part of their diet.¹⁹ Until the early twentieth century, however, infants

exclusively dry-nursed or fed artificially usually failed to thrive, because of either inadequate nutrition or contaminated animal milk or water.²⁰

In the mid-nineteenth century, experts admonished (and there is evidence to suggest at least that it was mainstream practice) that infants live on a liquid diet of breast milk or modified cow's milk for most of their first year.²¹ Women passed around home recipes for breast milk substitutes or, for those with the means or access, found them in the published household advice manuals common to the period. A pediatrician writing in the twentieth century described the practice as "the grandmothers' aphorism, 'only milk until the eruption of molars' (12-16 months)."²² According to one researcher, "Milk alone was believed sufficient until the baby showed signs of failure, and often the young child's diet was confined to little more than milk until he or she was two years of age. Meat was considered damaging."²³

Advice manuals recommended that cereals or meats (not necessarily in that order) be introduced when teeth began to appear, between six and nine months of age, but only as thin gruel mixtures, beef broth, or juices. Such "foods," as they were characterized, over a century later would be constructed as "liquids." "The food for children should be light and simple," advised Mrs. Sarah Josepha Hale in 1857, "gruel alone, or mixed with cow's milk, mutton broth, or beef tea; stale bread, rusks, or biscuits, boiled in water to a proper consistence, and a little sugar added."²⁴ Hale recommended that weaning could take place as early as seven months but more commonly after twelve months.²⁵

While mothers fed infants the "strength-producing" meats and cereals in the first year, advice manuals recommended that children not be given fruits and vegetables until two or three years of age. This was in part the result of Americans' wary attitude in general toward fruits and vegetables. Medical opinion, as well as folk practice in the United States, was still influenced by the centuries-old Galenic theories of health and disease, which dictated that eating fruit made people, especially children, susceptible to fevers.²⁶ Properties inherent in the fruits and vegetables were thought to cause severe diarrhea and dysentery, especially in the summer. An 1880s' newspaper illustration, for example, depicted a skeleton disguised as a fruit seller offering produce to little children, indicating that raw, unboiled fruits and vegetables led to cholera.²⁷ While there is no question that fruits and vegetables could cause harm, especially in such turn-of-the-century urban metropolises as New York City, with its inadequate, overloaded water and sewer systems, the actual culprit was most likely bacteria residing on the outside of the produce or contaminated water or milk that happened to be ingested, rather than anything innate in the produce itself.²⁸ Given the laxative effect of fruits and vegetables if consumed in excess, however, it is easy to understand how people made the assumption. Moreover, in this era before the discovery of vitamins, most people felt that fruits and vegetables provided excessive bulk and roughage, and

contributed little in the way of nourishment helpful to infants.¹⁹ Advice manuals of the mid-nineteenth century reflected while even attempting to modify this prevailing ideology. "[T]he growing creature requires food that contains the elements of the body . . . food that abounds in albumen, fibrine, gelatine, and the earthy salts," said Joseph B. Lyman and Laura E. Lyman in their 1867 guide. "[W]hat substances do we find richest in the constituents of perfect food? *Flesh, milk, eggs and wheat bread.*"²⁰ However, they noted, "There is in the minds of thousands of anxious mothers a great dread of fruits of all kinds as being dangerous for the young."²¹ Attempting to dispel these commonly held notions, the Lymans advised that the problem was children's consumption of fruits to excess, not the produce itself.

By the late nineteenth century, the industrialization and advertising of the food supply laid important groundwork for changing recommendations concerning infant care and feeding. Before 1900, most Americans' diets were monotonous regimes of soups, stews, bread, dairy products, fresh meat when available, salted or smoked when not, and fruits and vegetables only when seasonal unless preserved through pickling, jams, and preserves, drying, and some home canning. Improvements in stoves and kitchen devices made food preparation easier, iceboxes and refrigerators kept foods fresher; all, in many ways, made cooking a less arduous task for women—although there were most certainly trade-offs, as many scholars have pointed out. Canned goods, especially canned produce, though commonly available in the late 1800s, were too expensive for most. By the 1920s, however, manufacturers produced canned goods in sufficient quantity to present more affordable prices, allowing Americans to consume (among other things) more fruits and vegetables year-round. With this industrialization of the food supply, Americans' diets became more varied and their nutrition subsequently improved, though it can be argued that canned goods and other processed foods diminished taste and nutrients, leading to Americans' acclimation to salt and sugar in heavy quantities.²² To sell these mass-produced items, major enterprises engaged the proliferating advertising firms to create increasingly sophisticated appeals. The increased number and circulation of magazines and newspapers and the growth in population and literacy rates ensured audiences for corporate advertising.²³

Moreover, *fin de siècle* Americans turned increasingly to science as the ultimate authority, including in matters of health and the human life cycle.²⁴ An effect of this was the increased stature, whether self-generated or not, of the medical community. Doctors supplanted midwives in delivering babies, who now entered the world more often in hospitals than in homes. Employing wet nurses as an alternative to mothers' breast-feeding, a common practice among wealthier women, became less common as wet-nursing, most often performed by poor women, immigrants, and women of color, became more stigmatized, and as safer non-breast-milk alterna-

tives became available.²⁵ Instead, during this "chemical period" in infant feeding, medical authorities took charge, partially by devising complicated "percentage" formulas only they could administer as breast milk replacements.²⁶ As Rima Apple and others have amply demonstrated, the result was the medicalization of motherhood. Profoundly influenced by prevailing behaviorist theories of psychology, authorities advised that parenting instincts and common sense must take a backseat to science. Infants were to be fed on strict schedules, for example, and were not to be picked up when crying, which would only reward their negative behavior, experts told women.²⁷

Doctors and child-care experts still considered breast-feeding best if a woman's breast milk supply was adequate, no doubt in part because of the high infant mortality rates occurring in the burgeoning cities that had limited access to fresh, clean cow's milk. Marion Mills Miller in 1910 advocated that "no other milk, however skillfully modulated, no 'infant's food,' however scientifically prepared," could fully replace mother's milk.²⁸ In their 1920 manual, Martha Van Rensselaer, Flora Rose, and Helen Cannon, eminent Cornell University home economists, gave recipes for artificial formula but called it "the next best thing" if a "baby cannot be fed by its own mother."²⁹

As the medicalization of motherhood developed, child specialists offered more and more reasons why breast-feeding was inadequate. Improved technology helped artificial formulas and cow's milk to become regarded as safer and more healthful alternatives for infants. Optimistic faith in science required little reasoning about why formula feeding was equal to—if not better than—breast milk. Formula feeding was easier for doctors to measure and regulate, allowing them to tinker with the makeup of artificial formulas when necessary. Anxious mothers, becoming less and less confident of their parenting abilities and common sense, wanted what was best for baby and voluntarily relinquished their authority. Hospital deliveries that whisked babies away to the nursery fostered a sterile and awkward climate for mother-infant bonding and discouraged breast-feeding. Taking their cues from the medical community, home economics experts recommended not only that an infant's mouth be swabbed and rinsed with fresh water after every feeding, but that a woman's breast be cleaned with a boric acid solution before and after nursing as well.³⁰

Thus an unintended consequence of the medicalization of motherhood was the decline of breast-feeding. Mothers became more and more convinced that they did not have sufficient milk to nurse their newborns. Although most certainly some women could not physically breast-feed, and the new mothers who performed paid employment outside the home found it logistically difficult to do so, it is not surprising that around the turn of the century the numbers of women breast-feeding their infants declined (though they would still remain relatively high through the 1930s

when compared to the numbers just two decades later).³¹ No doubt many simply did not want the bother of nursing their infants. Wealthier women, who had always breast-fed less often than other women, now turned to using artificial formulas instead of employing wet nurses. Middle-class women followed suit, with working-class women and women of color gradually ceasing to breast-feed accordingly.³²

By the late 1880s several brands of "proprietary foods," mass-produced, mostly grain mixtures to be added to milk or water—the forerunners of today's infant formulas—appeared on the market, including Leibeg's Food, Nestle's Milk Food, Carnrick's Soluble Food, Eskay's Albuminized Food, Imperial Granum, Wells, Richardson, and Company's Lactated Food, Wagner's Infant Food, Mellin's Food, as well as Borden's Eagle Brand condensed milk.³³ Most included cereal grains as part of their "formulas," some included dried cow's milk as well, but nearly all designated their products as "food" rather than "liquid," as formulas later were characterized. Brightly colored and elaborately etched trade cards, the popular turn-of-the-century advertising medium which women and children in particular delighted in collecting and trading, illustrate this demarcation of infant formula as food. Advertising slogans included: "Nestle's Milk Food: Baby's Friend"; "Imperial Granum: The Incomparable Food for the Growth and Protection of Infants and Children"; "Wells, Richardson, and Company's Lactated Food: A Scientific Food for Infants and Invalids"; "Wagner's Infant Food: Infants and Children fed on Wagner's Infant Food are remarkable for muscular strength, firmness of flesh, and a lively and intelligent appearance"; and "Mellin's Food for Infants and Invalids: The only perfect substitute for Mother's Milk."³⁴

Home economists and nutritionists, women in these newly emerging fields that employed the latest scientific discoveries about food and nutrition, did not much like proprietary, or patent, foods. "They cannot compete successfully with carefully made milk mixtures in substitute or artificial feeding," advised Flora Rose of Cornell University's recently established Home Economics Department:

Perhaps the strongest case against the patent foods is their lack of the food-stuff known as mineral matter or salts, which is so essential to healthy growth and development. Many cases of malnutrition result directly from the use of such of these foods as are deficient in fat and mineral matter. A common ailment among babies thus fed is rickets, an ailment that is serious and may be lasting in its effects.³⁵

What Rose called "mineral salts" were indeed important. Confirming what many chemists and nutritionists suspected, within the next decade researchers discovered vitamins in foods, including vitamin D, which prevents rickets. Some evidence indicates that most mothers, at least in rural areas, did not feed their infants mass-produced proprietary foods. While

Cornell University home economics students in the 1920s added a small amount of Mellin's Food to their month-old charges' formula, a 1933 study of over seven hundred infants in upstate New York indicated that only 6 percent of mothers had ever fed their babies patent foods, half using brands which were to be mixed with milk and half those to be mixed with water, most stuck to the well-known and trusted Holt's formula of cow's milk diluted with water and with sugar added.³⁶ Still, the increasing availability and promotion of such products, along with the rise in safer, cleaner cow's milk thanks to certification programs and pasteurization, contributed to the number of women who bottle-fed their infants.

It makes sense that manufacturers and advertisers constructed these liquid formulas as "solid" rather than "liquid." This was the infant "food" of the time, after all, the nourishment on which babies survived, as there was not yet a tradition of feeding infants under nine months real solids, especially fruits and vegetables. While a very small supply of canned fruits and vegetables for infants was available, these were sold at apothecaries and used as medicine. They were clearly not designed for everyday use.³⁷ Without a mass-produced baby food such as Gerber (or Heinz or Beech-Nut) there was no solid commodity known as "food" with which to contrast the infant formula, the second generation (such as Nestle's Lactogen) of which was being developed in the 1920s.³⁸ As parents and doctors became more acclimated to artificial infant formulas, however, it was only a small step to the earlier and earlier introduction of solid foods. In just a few short decades, authorities' opinions about the subject changed dramatically.

WOMEN AND INFANT FEEDING IN THE PRE-GERBER TWENTIETH CENTURY

The first three decades of the twentieth century, a time characterized by the arrival of the culture of modernity, were a period of great change not only for women but also in the realms of economics, politics, the arts, science, and social and religious thought. In the 1910s and 1920s, still before Gerber's era, infant feeding practices had begun to change noticeably, most prominently in the larger role fruits and vegetables were to have in an infant's diet. Still, experts recommended a relatively late introduction of solids, and grassroots evidence indicates that most mothers still began their infants on solids at relatively later ages, after six months of age or older.

During these decades scientists had begun to identify as "vitamines" (the spelling was later modified) the specific nutrients in foods that were previously called "mineral salts." Vitamins, scientists learned, existed not only in meat, grains, and dairy products, foods they had always considered vital to nourishment and growth, but also in fruits and vegetables, which had previously been regarded as benign at best and as suspicious by many, although several nineteenth-century groups did espouse the virtues of a vegetarian diet.³⁹ The promotion of fruits and vegetables as vital to human growth and nourishment was heightened during the Great War as the federal

government found it difficult to recruit able-bodied young men and maintain their health while in the service. Government officials and military physicians immediately employed and propagated the new knowledge of vitamins to help solve this problem of recruits' poor health.⁴⁰ By the 1920s, home economists and dietitians were introducing Americans to the notion of vitamins and advising them not only to consume more fruits and vegetables themselves, but also to feed more such foods to their children as well.

Early-twentieth-century household advice manuals, though at times contradictory, reveal this increased emphasis on fruits and vegetables while still recommending the introduction of solids in the second half of the infant's first year. A 1914 advice manual, with the delightfully straightforward title, *How to Cook and Why*, by Elizabeth Condit and Jessie A. Long, for the first time enthusiastically endorsed fruits and vegetables specifically for their "mineral matter." "As in all questions of feeding," related the authors, "it is the food given the children which is of the greatest importance. Serious results follow in the unhealthy development of their bodies when their food lacks mineral matter and the acids found in fruits."⁴¹ They recommended introducing a barley-flour-and-water mixture and strained, diluted orange juice at between six and nine months of age, but still did not advocate the introduction of solids until between nine and twelve months. Cornell's Flora Rose recognized the importance of vitamins, referring to them as "fat-soluble" and "water-soluble growth-promoting substances."⁴²

In 1928, on the eve of Gerber baby food's introduction, Carlotta C. Greer, in her *Foods and Home Making*, gave both vitamins and vegetables a prominent place in advice for infant feeding. Experts advocated orange juice for infants, Greer informed, "because it contains vitamins and minerals."⁴³ "Scientists working on the effect of food on the body are proving that fresh vegetables are needed to make us healthy."⁴⁴ "Both babies that are fed on mother's milk and those that are fed on modified cow's milk should have certain food other than milk," Greer advised, although "the young baby must not be given solid foods."⁴⁵ Greer recommended a teaspoonful of orange juice introduced at three weeks of age, cereals at five to six months, vegetables at six months, toast or zwieback at seven months, and egg yolk at twelve months.⁴⁶ While she advocated the introduction of certain foods, fruits, and vegetables much earlier than previous advice givers, she still recommended the relatively later introduction of cereals and meat (the latter which Greer did not recommend during the first year at all). Indeed, while some well-known authorities in the 1920s advocated that a one-year-old should consume a diet almost entirely of liquids—whole milk or whole milk with a cereal dilutant, orange juice, and perhaps simple cereal gruels and beef juices—increasingly these recommendations were viewed as "conservative" or "old-fashioned." More usually experts advocated a diet similar to Greer's: the early introduction of orange juice and cod-liver oil, and solids, specifically egg yolk and cereal, at five to six months of age.⁴⁷

Grassroots evidence—what and how women were actually feeding their babies in the pre-Gerber decades of the twentieth century—seems to indicate that while some women no doubt introduced solids at an early age, the mainstream consensus and practice was not to rush their introduction, especially fruits and vegetables. For example, a collection of letters written in the 1910s to Cornell Home Economics Department professor Martha Van Rensselaer reveals glimpses of both early and later introduction of solids. The letters were written mostly in response to Flora Rose's *The Care and Feeding of Children* series of pamphlets. The pamphlets, part of the Cornell Farmers' Wives Reading Courses (later called the Cornell Study Clubs), contained study questions which women were to fill out and send back to the home economics department. While most of the letter writers praise the courses and the information, and some are testimonials to the good advice contained in the pamphlets, a few take stern issue with the information.⁴⁸

Mr. W. J. Gilchrist's January 30, 1911, letter, for example, indicates that he and his wife followed Flora Rose's advice to breast-feed exclusively until at least nine months: "We have now a fine healthy child of 9 months. No little credit is due to the information contained in the above mentioned tract. As the baby is about to start on artificial foods, would you kindly inform me where we can procure part 2 of [*The Care and Feeding of Children*]?" Another 1911 letter from a German immigrant whose English is self-taught reveals the opposite.⁴⁹ "Dear Miss Van Rensselaar," begins Mrs. Marie Christ. "I [raised] 6 babies myself and have got them all. 3 strong boys, and 2 girls, one girl got drowned, 7 years old." Responding to the study question "Is it as common as it used to be for mothers to nurse their infants?" Christ replied, "I think no and these is lots of reasons for it":

Some have to work to hard, and that was my reason, because I could not nurse a one. Some are to[o] [weak] in their whole system and some do not want the bother. . . . I think there is not hardly a one among thousands in the european country who thinks that just the nursing of the mother should be enough after a babie is 3 months old, and some start earlier than that, to feed them something besides the nursing. [They] look at they nursing just as we do, to the tea and coffee given to a five year old one. Nobody would think that would be enough for a whole meal. [They] all feed them something besides the nursing, thousands of mothers just simply [y] cook a porridge from half water, half milk and sugar and god wreath flour. [The older they] get, the less water they [y] put in. I know babies and my oldest boy never got a drop of water after he was 4 months old.

"What the american babies needs," Christ concluded, "is more nourishing food, less [waking], less candy, and cookies, and [cakes], and a little toughening."⁵⁰

While the letters indicate that women introduced solids to their infants at various ages, a 1933 Cornell study (still in the early years of

mass-produced baby food) of the feeding practices of over seven hundred infants in upstate New York revealed on average the late introduction of solids. While sixty percent of infants were fed orange juice during their first three months and infants received cod-liver oil at 5.2 months on average, the average age at which solids were introduced included: cereal at 7.5 months; vegetables at 9.4 months; fruit at 8.1 months; egg at 10 months; meat, 11.6 months; and fish, 12.1 months—much later than the practices that occurred only a couple of decades later.⁵¹

GERBER: CREATION NARRATIVES AND ICON

In the late 1920s, with changing attitudes toward fruits and vegetables and the discovery and promotion of vitamins, the market was ripe for the introduction of industrialized canned food for babies, especially produce, and Gerber stepped up to fill the niche. According to company legend, a narrative prominently featured in late-1990s Gerber public relations, the Gerber Products Company grew not out of a corporate-driven search to develop a new product and generate a consuming public, but out of the genuine need and inventiveness of a mother trying to prepare mashed peas for her seven-month-old child. Those canned fruits and vegetables for infants previously brought to market were expensive, manufactured in limited quantities, and available only at drugstores. Now that fruits and vegetables were a recommended part of a six-to-twelve-month-old's diet, women largely cooked and strained fruits and vegetables for their toddlers, an often onerous process. Thus, in the summer of 1927, Mrs. Dan Gerber, wife of the Fremont Canning Company's owner Dan Gerber, "following the advice of a pediatrician," we are told, was trying to strain peas for her infant daughter. Finding the job tedious and time-consuming, she asked her husband to try his hand at the task. According to the company history, "After watching him make several attempts, she pointed out that the work could be easily done at the Fremont Canning Company, where the Gerber family produced a line of canned fruits and vegetables. Daniel Gerber, covered in strained peas, thought his wife had a good point." From this, we are told, came the idea to market strained vegetables and fruits along with the company's regular line of canned produce. By late 1928, strained peas, prunes, carrots, spinach, and beef vegetable soup were ready for the national market.⁵²

We do not know whether this creation narrative is "true," especially since in its 1930s advertising Gerber related a very different version (discussed later). However, the facts could most certainly be accurate. Since women at the time performed most of the work surrounding child-rearing, it makes sense that one mother, frustrated at the time it took and messes it created to prepare the now-vital fruits and vegetables for infants, would seek time- and labor-saving methods. That the husband of "Mrs. Dan Gerber"—we never learn *her* given name—processed canned fruits and vegetables already makes it more plausible. Whether accurate or not, the

story creates a compelling, personalized portrait of the beginnings of Gerber—a homey, "authentic" happening far removed from the cacophony of noise and the mire of produce by-products of the industrial canning factory. The story of a woman's ingenuity transforming child-rearing in the United States enhances the purity and trustworthiness of the product, a key factor to Gerber's success, and also mutes the profit motive of the company.

The new baby food products were so successful that within a matter of years the Fremont Canning Company changed its name to the Gerber Products Company, and abandoned its line of regular vegetables to become the exclusive makers of baby foods. Part of the canned goods industry, which in general experienced solid growth during the Depression years, Gerber baby food did extremely well.⁵³ First producing pureed vegetables and fruits (the process was termed "strained" at the time), it soon added a line of cereals and within a few years introduced chopped produce and dinner combinations for older toddlers. While in 1930 the company produced 842,000 cans of baby food, by 1931 the number had risen to 1,311,500 cans; one year later, in 1932, Gerber manufactured 2,259,818 cans of baby food.⁵⁴ Despite competitors' quick development of their own mass-produced strained baby foods—only one "drugstore" baby food, Clapp's, began selling in the supermarkets, while by 1935 Gerber's biggest competitors, Beech-Nut, Heinz, and Libby's, had entered the baby food market—Gerber managed to maintain its dominance of this new market.⁵⁵

Evidently Gerber had hit a chord with consumers, mothers, and health professionals. Conditions were such that commercially canned baby food provided mass quantities of preprepared strained fruits and vegetables to a public primed to accept them: canned goods were becoming more affordable and familiar to more Americans; advertising was hitting its stride; fruits and vegetables were more commonly recommended for infants; and doctors and health professionals were becoming more and more involved in (and controlling of) infant health and everyday care. Women at home full-time or part of the considerable number of working mothers—employed as domestics, factory workers, seamstresses, teachers, secretaries, clerks, or telephone operators—no doubt embraced and benefited from already-prepared solid infant food. Moreover, Gerber baby food was not the only new phenomenon emerging at the time that significantly altered child-rearing. Commercial diaper services, more homes wired for electricity, washing machines, refrigerators, and other innovations of technology in the home altered women's work in general as well as child care in particular.⁵⁶

Few Americans today are unfamiliar with the winsome, compelling Gerber baby who has graced the labeling and advertising of the Gerber Products Company since the early 1930s. Indeed, since its first full-scale production and marketing of commercially canned solid baby food, Gerber has dominated such competitors as Clapp's, Stokeley, Libby, Heinz, and

Beech-Nut in U.S. market share.⁵⁷ The Gerber name is synonymous with baby food, and the icon of the Gerber baby has traditionally symbolized quality and trustworthiness (so much so that a 1998 survey found Gerber to have the highest consumer loyalty of any commercial brand in the United States).⁵⁸ In 1928 the Fremont Canning Company solicited illustrations of a baby face for the advertising campaign to introduce its newly developed baby food. Dorothy Hope Smith, an artist who specialized in drawing children, submitted a simple, unfinished, charcoal sketch, indicating she could finish the sketch if it were accepted. Again, according to the company narrative, Gerber executives were so taken with the simple line drawing of an infant's head that they acquired it as it was. The illustration proved so popular that Gerber adopted it as its official trademark in 1931, and offered consumers copies for 10 cents.⁵⁹

THE NATURALIZATION OF GERBER: DECLINE OF BREAST-FEEDING, EARLIER INTRODUCTION OF SOLIDS

In the 1920s, food corporations and pharmaceutical companies developed such second-generation commercial infant formulas as Nestle's Lactogen and S.M.A. These formulas (many of which were packaged without directions, making it necessary for a woman to consult a pediatrician in order to use them), as well as the several brands of canned evaporated milk that were popular breast milk substitutes, helped augment the dramatic decline in the number of women breast-feeding their infants, as well as the duration of breast-feeding. By the 1950s, the vast majority of mothers were bypassing nursing altogether and starting out their infants on mass-produced formula.⁶⁰ As evidence of the completeness of this transformation, it was during the 1950s that "artificial food" and "proprietary food," terms commonly used in all child-care and pediatricians' manuals to refer to infant formula, were dropped, indicating that the use of such breast milk substitutes was now entrenched, if not the norm.⁶¹

During approximately the same time period, the average age at which infants were first fed fruits and vegetables decreased dramatically. In the late 1920s, just as Gerber began its national advertising and distribution of canned baby foods, prevailing wisdom advocated introducing strained fruits and vegetables at around seven months. By the next decade, however, pediatricians advocated the introduction of fruits and vegetables at between four to six months of age. Adhering to the "if a little is good, a lot must be better" school of thought, by the 1950s the average age at which doctors recommended these foods be first fed to infants was four to six weeks, with some doctors advocating—and women feeding—infants strained cereals and vegetables within days of birth.⁶² While there is not necessarily a causal connection between the decline of breast-feeding and the earlier introduction of solid baby food, it makes sense that the widespread acceptance of artificial formulas acclimated mothers and doctors alike to infants' inges-

tion of non-breast-milk substances. Thus it may have felt more comfortable and seemed more customary to introduce solid baby food into infants' diets at earlier and earlier ages. As this early introduction of solids became standard advice and practice, Gerber baby food (as well as other brands) functioned not only as a supplement to but as a substitute for breast milk.⁶³

One way of documenting the emergence of the idea of introducing solids at such early ages is by turning to early advertising campaigns of the 1930s. Shortly after the Fremont Canning Company began to manufacture its baby food, it began to advertise. Mass-producing any industrial product, especially in the Great Depression of the 1930s, as consumer purchasing slowed to a minimum, meant establishing and expanding a steady market of buyers by acquainting the public with products through advertising campaigns. Gerber, like other manufacturers of new products, found it necessary not only to educate and persuade the public to feel comfortable enough to buy and use baby food, but to acclimate and familiarize people with the manner in which baby food was packaged and presented—the metal cans as well as the labeling. Since fully automated canning factories had been in operation for only a relatively short time, allowing foodstuffs to be canned and sold to consumers for reasonable prices, Americans still held lingering suspicions about the quality of canned goods. Though it had been two decades since Congress had passed the Pure Food and Drug Law, some well remembered the days of adulterated and spoiled foods concealed by opaque packaging.⁶⁴ Further, Americans in the first part of the twentieth century were still becoming acquainted with mass advertising designed to create new needs where none had existed before, or to promote products, such as Gerber baby food, which responded to and allowed for a more fast-paced life brought on by technological innovation.⁶⁵ With the mass production and advertising of goods, memorable packaging and the branding became an essential part of the product, "an integral part of the commodity itself."⁶⁶ The Gerber baby from early on became just that: an indivisible part of the commodity, allowing the Gerber Products Company to bypass such traditional middlemen as grocers and through advertising to appeal directly to women as dieticians or as mothers.

By playing on parents', especially mothers', guilt, presenting medical doctors as the ultimate baby experts, and positing the uncontested assumption that commercially prepared foods are superior to those cooked at home, Gerber advertising in the 1930s successfully imbued its products with qualities of exceptional purity and wholesomeness, convenience and modernity, and scientific efficiency. While by no means an exhaustive study of Gerber promotion pitches, a survey of 1930s' issues of the *Journal of the American Dietetic Association* and the *Ladies Home Journal* helps reveal how Gerber quickly undertook an ambitious national campaign to convert health professionals and consumers to its baby foods. In its earliest years of advertising, Gerber focused on helping consumers and dieti-

icians become comfortable with the idea of using canned goods in general and Gerber products in particular, and persuading women that it was in their best interest, and in their babies' interest, to use Gerber baby foods.

CONVINCING THE DIETICIANS

In the late 1920s and well into the 1930s Gerber placed full-page advertisements in each monthly issue of the *Journal of the American Dietetics Association*, the official publication of the American Dietetics Association (ADA). The ADA, founded in 1917, was the professional organization for the fast-growing, overwhelmingly female field of dietetics and nutrition. Whereas there were 660 ADA members in 1925, for example, by 1938 the number had grown to 3,800. The ADA in the 1920s and 1930s became influential in coordinating and promoting dietary policy and guidelines for optimal health and nutrition.⁶⁷ Promoting Gerber baby food as scientifically prepared and thus free of contaminants, vitamin-filled, healthy and wholesome food for infants was clearly the primary goal of the company's ADA journal advertising. "Care in every detail makes the Gerber products better for Baby," began one 1932 advertisement.⁶⁸ Two 1934 advertisements, each complete with photos of workers dressed in white operating sparkling clean machinery, began respectively, "Oxygen is excluded in the Gerber straining process [to conserve vitamins],"⁶⁹ and "Careful sorting—rigid inspection, another reason why Gerber's are better for Baby."⁷⁰ In the same issues the American Canning Company ran regular advertisements designed to resemble scholarly articles on the safety and healthfulness of canned foods. "The Canning Procedure,"⁷¹ "Vitamins in Canned Foods: Vitamin A,"⁷² and "Canned Foods for Infant and Early Child Feeding"⁷³ were three such ads, each providing scientific information on the benefits of canned foods. Such ads, along with the Gerber ads, were attempting to combat suspicion toward canned foods.

While many middle-class women in the United States were using commercially canned goods with some regularity by this time, food professionals in particular still held some justifiable suspicion as to whether canned produce was nutritious and safe as well as fresh. In what would become standard practice, some 1930s ADA journal issues also included bona fide research, funded by Gerber, touting the safety, healthiness, and full vitamin content of canned baby foods. Flora Manning, in the Division of Home Economics at Michigan State College, published two such articles in the 1930s, "Canned Strained Vegetables as Sources of Vitamin A,"⁷⁴ and "Further Studies of the Content of Vitamins A and B in Canned Strained Vegetables."⁷⁵ In both Manning found a minimal difference between the vitamin content of (Gerber) canned, strained vegetables and (noncanned) fresh (a slightly lower vitamin content in the former), but whether intentionally or not, minimized this difference through opaque, indirect language.

Another set of Gerber ADA journal advertisements situated dieticians as the intermediary between women and their children's doctors. Revealing its faith in the power of persuasion through advertising, ads began with such openings as "Gerber advertises . . . so that mothers will cooperate with you,"⁷⁶ "Yes, Doctor, we do talk to your patients . . . and we tell them facts which help you and help us,"⁷⁷ and "Thanks, Doctor, this helps me carry out your instructions."⁷⁸ The copy situated the reader, as female dietitian, conversing with the (male) medical doctor about how to persuade women to feed their children Gerber baby food. The ads and articles functioned to advance the idea that Gerber's canned fruits and vegetables for baby are just as nutritious as fresh as home prepared foods and even more appropriate since they are so scientifically prepared.

CONVINCING THE MOTHERS

Like many new mass-produced and advertised products in the early twentieth century, Gerber's first advertising campaign in 1929 focused on selling its products directly to women, since many grocers did not carry Gerber baby foods.⁷⁹ The ads were placed in such leading women's magazines as *Ladies Home Journal*, subscribed to by over a million women.⁸⁰ In what was common practice at the time, the advertisement urged women to send in one dollar for a set of Gerber foods, and asked them to provide the name of their grocer, whom Gerber would then persuade to carry their products. Doctors, however, could request the products free of charge. Emphasizing its products as scientifically prepared and thus trustworthy, Gerber informed women that its foods "Provided] in a scientific, wholesome manner . . . the important vegetable supplement to baby's milk diet." It also focused on the products' ability to impart to women freedom and mobility, a notably modern concept: "[T]he new Gerber Products make Mother and Baby alike independent of the kitchen's restrictions. Baby can really travel now."⁸¹

Later advertising focused on this theme of freedom for mother and baby. Not only did Gerber provide freedom from kitchen drudgery, but ads asserted that preparing baby foods by hand was essentially a disservice to the woman herself, her baby, and her husband. "For Baby's Sake, Stay Out of the Kitchen!" read the headline of one 1933 advertisement. "It isn't fair to baby—really—to spend long hours in the kitchen. . . . For baby's sake and for your own—learn what doctors tell young mothers just like you."⁸² Moreover, the ads argued that women could not provide the same quality no matter how hard they tried: "You can't, with ordinary home equipment, prepare vegetables as safe, as rich in natural food values, as reliably uniform as ready-to-serve Gerber products!"⁸³ The opening of another Gerber ad read, "Square Meals for Baby . . . and better for him than vegetables you could prepare yourself with ten times the work!" "Don't serve Gerber's for your sake," the ad went on, "serve them for Baby's sake!" "They're the finest vegetables Baby can eat—and Baby deserves the best!"⁸⁴

Most strikingly, the advertisements focused on a woman's relationship with her husband. An early Gerber ad in *Ladies Home Journal* opened with a photo of a concerned-looking man's face. Surrounding the male face was the text: "To puzzled fathers of rather young children. If you've had to exchange a charming wife for a tired mother who spends endless hours in the kitchen dutifully scraping, stewing and straining vegetables for your child—you'll be glad to read this story." It continued with a version of the Gerber creation story different from the late-twentieth-century one mentioned earlier, one that focused on a male persona entirely. "Five years ago, Mr. Dan Gerber faced the same situation, and knowing a great deal about vegetables he set out to solve this problem."⁸⁵ Although an accompanying photo depicted a woman feeding a baby identified once more as "Mrs. Dan Gerber," there was no mention whatsoever of her involvement in the creation. The narrative implied that Dan Gerber's frustration and dissatisfaction (at "having to exchange" his once-charming wife for a now-tired and haggard-looking spouse) led to Gerber baby food being invented. Although the advertisement carried a masculine persona, it was clearly designed for women's consumption, appearing as almost an ominous warning to mothers of small children. Gerber advertising as a whole appeared aimed not only at increasing women's confidence in the wholesomeness of the product but also at reducing their confidence in their ability to care for their infants—and also that hardworking provider—without the help of these experts and these products.

In addition, both sets of advertising indirectly or directly advocated the earlier and earlier introduction of these foods. Many ads referred to the use of solids at three months or earlier. Under the above mentioned photo of "Mrs. Dan Gerber" and her daughter Paula, for example, the caption notes that "Paula began to eat Gerber Strained Cereal at 3 months, and had her first Gerber's Strained Vegetables at 3 1/2 months" (again, this is in contrast to the 1990s creation story that mentions that the mother is feeding peas to her "seven-month-old," an age no doubt assigned in light of our contemporary standards of introducing fruits and vegetables only after four to six months of age).⁸⁶ Gerber's competitors contributed to this trend as well. A 1937 ad for Clapp's baby food included photos of three-month-old baby John Curlett being fed his Clapp's Baby Cereal. "At 4 months," the copy informed women, "he'll be introduced to all of Clapp's Strained Vegetables." The final photo showed John at eleven months of age, "flourishing" because of his Clapp's diet.⁸⁷ The most blatant ad, however, was a 1938 Libby's baby food ad picturing a baby barely able to hold up its head. The caption reads: "Hurry, Mother, it's Libby time! Tiny babies love the vegetables that Libby prepares so carefully."⁸⁸

Not only did specific ad copy and photographs encourage the notion that infants under four months need solid food, but the icon of the Gerber Baby itself contributed. The drawing that graces every Gerber product and

advertisement since 1931 looks, according to those nongovernmental agencies monitoring the World Health Organization International Code of Marketing of Breastmilk Substitutes, younger than the six months WHO guidelines deem the appropriate age at which infants should begin receiving solids.⁸⁹ The Gerber baby itself, then, gave (and gives) the implicit impression that babies this young should be eating solid foods.⁹⁰

In conclusion, it makes sense that Gerber and other baby food manufacturers would advocate the early introduction of their foods. They sought to create and expand the market share of this new product that fitted right into a society increasingly shaped by technology and modernity. Once the idea of "baby food" in general, and Gerber baby food in particular, became a common part of American infant feeding practices, it is not hard to see how mothers and health and nutrition experts could assume that when it came to fruits and vegetables, the more the better and (devoid of substantial scientific research indicating otherwise) the earlier the better. By 1960, one doctor felt compelled to argue that the medical community's allowance/approval of early solids was neither due to infant food companies seeking to expand market share nor to pushy mothers seeking permission to feed their newborns solids:

The concept that the [infant food] manufacturers . . . should have been influential in formulating the opinions or feeding customs of modern physicians is highly improbable. . . . Equally specious is the argument that many physicians are influenced by the pressures, hopes, or ambitions of the mothers in competing with their neighbor's babies.⁹¹

Clearly, this doctor assumed that the "fault" lay with mothers. Mothers or not, it would take a later generation of mothers and health professionals to question significantly this prevailing wisdom—which had gained credence during the mid-twentieth century—that while the early introduction of solids might not necessarily help infants, neither would it harm them.

NOTES

1. Some of the scholarship on breast- to bottle-feeding include Rina Apple, *Mothers and Medicine: A Social History of Infant Feeding, 1890-1950* (Madison: University of Wisconsin Press, 1987); Penny van Esterik, *Beyond the Breast-Bottle Controversy* (Rutgers University Press, 1989); Valerie Fildes, *Breasts, Bottles, and Babies: A History of Infant Feeding* (Edinburgh: Edinburgh University Press, 1986); Janet Golden, *A Social History of Wet Nursing in America: From Breast to Bottle* (Cambridge: Cambridge University Press, 1996); Patricia Stuart-Macadam and Katherine A. Detwiler, eds., *Breastfeeding: Biocultural Perspectives* (New York: Aldine de Gruyter, 1985); Marilyn Valton, *A History of the Breast* (New York: Alfred A. Knopf, 1997); Meredith F. Small, *Our Babies, Ourselves: How Biology and Culture Shape the Way We Parent* (New York: Anchor Books, 1998); Linda M. Blum, *At the Breast: Ideologies of Breastfeeding and Motherhood in the Contemporary United States* (Boston: Beacon Press, 1999).
2. Jane E. Brody, "Breast Is Best for Babies, But Sometimes Mom Needs Help," *New York Times* (March 30, 1989); Elizabeth Cohen, "New Two-Year Breast-Feeding Guideline It's Busy NYC Moms," *New York Post* (October 1, 1998), 29; Frances J. Rohr and Judith A. Lothian, "Feeding Throughout the First Year of Life," in Howard and Winter, eds., *Nutrition and Feeding of Infant and Toddlers* (Boston: Little, Brown and Co., 1984), pp.

- 65-130; Lewis A. Parness, ed., *Pediatric Nutrition Handbook*, 3rd ed. (Elk Grove Village, IL: American Academy of Pediatrics, 1993). See also Michael C. Latham, "Breast Feeding Reduces Morbidity," *British Medical Journal* (May 15, 1999): 1303-1304; Michael C. Latham, "Breastfeeding—A Human Rights Issue?" *International Journal of Children's Rights* 18-56, v. 6 (1998): 1-21.
3. Jay E. Meachling, "Advice to Historians on Advice to Mothers," *Journal of Social History*, 9, 1 (Fall 1975): 55.
 4. Meachling, "Advice to Historians," 55.
 5. Meachling, "Advice to Historians," 56.
 6. And further: I might disagree a little with Meachling and argue that, at least in the post-World War II era, most new middle-class parents are far enough removed from extended family, and thus inexperienced enough with infants (especially when it comes to the post-1970s return to breast-feeding) that the manuals do reflect practice more than they might otherwise. Many first-time middle-class parents would report that they purchase such texts as the popular *What to Expect* books and regard them as holy writ.
 7. Fred T. Sai, "The Infant Food Industry as a Partner in Health," in Frank Falkner, ed., *Infant and Child Nutrition Worldwide: Issues and Perspectives* (Boca Raton: CRC Press, 1991), p. 247.
 8. Valerie Fildes, "The Culture and Biology of Breastfeeding," in Patricia Stuart-Macadam and Katherine A. Dettwyler, eds., *Breastfeeding: Biocultural Perspectives* (New York: Aldine De Gruyter, 1995), pp. 101-126; Thomas E. Cone, Jr., "Infant Feeding: A Historical Perspective," in Howard and Wintner, eds., *Nutrition and Feeding of Infant and Toddlers* (Boston: Little, Brown, and Company, 1984), 1-7. In fact, until the late eighteenth century, dry-nursed infants were more likely to be fed thin gruel mixtures, as using animal milk was regarded with some suspicion.
 9. Van Esterick, *Beyond the Breast-Bole*, chap. 5, esp. pp. 172-173; see also Jun Jung, "Introduction: Food, Children, and Social Change in Contemporary China," in *Feeding China's Little Emperors* (Stanford: Stanford University Press, 2000), p. 9.
 10. Catherine E. Beecher and Harriet Beecher Stowe, *The American Woman's Home Companion* (New York: J. B. Ford and Company, 1869), p. 268. "Artificial" is the term in the literature used for foods other than breast milk given to infants. This includes prepared liquid formulas and "beikost," a term meaning any nonmilk food. See Sara A. Quandt, "The Effect of Beikost on the Diet of Breast-Fed Infants," *Journal of the American Dietetic Association* 84 (1984): 47-51; see also S. J. Fomon, *Infant Nutrition*, 2nd ed. (Philadelphia: W. B. Saunders Co., 1974); Felisa J. Bracken, "Infant Feeding in the American Colonies," *Journal of the American Dietetic Association* (1953): 1-10.
 11. Interestingly, not until the nineteenth century did cow's milk, usually diluted with water and sweetened with sugar, become the breast milk substitute of choice. See Alice L. Wood, "The History of Artificial Feeding of Infants," *Journal of the American Dietetic Association* (1955): 21-29.
 12. Herman Frederic Meyer, *Infant Foods and Feeding Practice* (Springfield, IL: C. C. Thomas, 1952), 143.
 13. Wood, "History of Artificial Feeding," 24.
 14. Mrs. Sarah Josepha Hale, *Mrs. Hale's Receipts for the Million* (Philadelphia: T. B. Peterson and Brothers, 1857), p. 219.
 15. Hale, *Mrs. Hale's Receipts*, p. 220.
 16. Patricia M. Tice, *Gardening in America, 1830-1910* (Rochester, NY: The Strong Museum, 1984), pp. 53-54; Sidney Mintz, *Sweetness and Power: The Place of Sugar in Modern History* (New York: Viking, 1985), pp. 75-76; J. C. Drummond and Anne Wilbraham, *The Englishman's Food: A History of Five Centuries of the English Diet* (London: Pimlico, 1939, 1991), p. 68; Wood, "History of Artificial Feeding," 22.
 17. Tice, *Gardening in America*, pp. 53-54.
 18. See, for example, Edwin G. Burrows and Mike Wallace, *Gotham: A History of New York to 1898* (Oxford University Press, 1999), ch. 67; Cone, "Infant Feeding," 12.
 19. Cone, "Infant Feeding," 14; Suzanne F. Adams, "Use of Vegetables in Infant Feeding through the Ages," *Journal of the American Dietetic Association*, 35 (July 1959): 692-703.
 20. Joseph B. Lyman and Laura E. Lyman, *The Philosophy of House-Keeping: A Scientific and Practical Manual* (Hartford: Goodwin and Betts, 1867), p. 303. Italics in original.
 21. Lyman and Lyman, 304.
 22. Susan Strasser, *Never Done: A History of American Housework* (New York: Pantheon, 1982); Ruth Schwartz Cowan, *More Work for Mother* (New York: Basic Books, 1983).
 23. See, for example, Roland Marchand, *Advertising the American Dream* (Berkeley: University of California Press, 1985); Stuart Ewen, *Captains of Consciousness: Advertising and the Social Roots of Consumer Culture* (New York: McGraw-Hill, 1976); Jackson Lears, *Fables of Abundance: A Cultural History of Advertising in America* (New York: Basic Books, 1994).
 24. Charles Rosenberg, *No Other Gods: On Science and American Social Thought* (Baltimore: Johns Hopkins University Press, 1997); Susan Reyher and David Rosner, eds., *Health Care in America: Essays in Social History* (Philadelphia: Temple University Press, 1979).
 25. Yalom, *History of the Breast*, pp. 123-124; Blum, *At the Breast*, pp. 20-22; Golden, *Social History of Wet Nursing*.
 26. Wood, "History of Artificial Feeding," 25.
 27. Katharine K. Merritt, "Feeding the Normal Infant and Child," *Journal of the American Dietetic Association*, 14 (April 1938): 264-268; Apple, *Mothers and Medicine*; van Esterick, *Beyond the Breast-Bole*.
 28. Marion Mills Miller, *Practical Suggestions for Mother and Housewife*, ed. Theodore Waters (New York: The Christian Herald Bible House, 1910), p. 89.
 29. Martha Van Rensselaer, Flora Rose, and Helen Cannon, *A Manual of Home-Making* (New York: Macmillan Company, 1920), p. 435.
 30. Flora Rose, "The Care and Feeding of Children: Part 1" (October 1, 1911), 15 (Kroch Library Archives and Manuscripts, Cornell University, Ithaca, NY).
 31. Apple, *Mothers and Medicine*, pp. 152-154.
 32. Sarah A. Quandt, "Sociocultural Aspects of the Lactation Process," in Stuart-Macadam and Dettwyler, *Breastfeeding: Biocultural Perspectives*, p. 134; Valerie Fildes, "The Culture and Biology of Breastfeeding," in Stuart-Macadam and Dettwyler, *Breastfeeding: Biocultural Perspectives*, pp. 108-109.
 33. Apple, *Mothers and Medicine*, chap. 1.
 34. Trade card collection, Winterthur Museum and Library, Winterthur, DE, article on trade cards, Ellen Guber Garvey, *The Adman in the Parlor: Magazines and the Gendering of Consumer Culture, 1880s to 1910s* (New York: Oxford University Press, 1996), chap. 1. See also Susan Strasser, *Satisfaction Guaranteed: The Making of the American Mass Market* (New York: Pantheon Books), pp. 164-166; Harvey Levenstein, *Revolution at the Table: The Transformation of the American Diet* (New York: Oxford University Press, 1988), chap. 10; Apple, *Mothers and Medicine*, chap. 1.
 35. Rose, "Care and Feeding," 24-25. "When a patent food is made with milk," conceded Rose, "its bad effects are minimized and it may serve a useful purpose."
 36. "Report of Richard, April 15 to June 15, 1920," Records of the Home Economics Department, Cornell University, Collection #237/749, Box 19, Folder 44. Rachel Sanders Bazel, "A Study of Infant Feeding Practices as Found by a Survey of 702 New York State Babies," Ph.D. dissertation, Cornell University, March 1933, pp. 66-68.
 37. Stephen S. Nisbet, *Contribution to Human Nutrition: Gerber Products Since 1928* (New York: The Newcomen Society in North America, 1954), p. 10.
 38. Apple, *Mothers and Medicine*, chap. 3.
 39. Harvey Levenstein, *Revolution at the Table*, ch. 7.
 40. Levenstein, chap. 9.
 41. Elizabeth Condit and Jessie A. Long, *How to Cook and Why* (New York and London: Harper and Brothers Publishers, 1914), p. 102.
 42. Rose, in Van Rensselaer, Rose, and Cannon, *Manual of Home-Making*, p. 412.
 43. Carlotta C. Greer, *Foods and Home Making* (Boston: Allyn and Bacon, 1928), p. 34.
 44. Greer, *Food and Home Making*, p. 265.
 45. Greer, *Food and Home Making*, p. 501.
 46. Greer, *Food and Home Making*, p. 501.
 47. Nancy Lee Seger, "A Study of Infant Feeding Practices as Used with Cornell's 45 'Practice House' Babies from 1920-1944," Master's thesis, February 1945, Cornell University, pp. 115-117.
 48. Collection of letters to Martha Van Rensselaer (MVR) in the 1910s, found in the Home Economics Records 23/2/749, Box 24, Kroch Library, Cornell University.
 49. 4/3/1911 letter to MVR from Mrs. Marie Christ.
 50. *Ibid.*
 51. Bazel, "Study of Infant Feeding Practices," pp. 137, 160.
 52. Gerber Company History, Gerber Web site. A similar version, one that gives Mrs. Gerber's name as Dorothy, is recounted in Ellen Shapiro, "The Consultant Trap," *Inc.*, 17 (December 1995): 31-32.
 53. "Food Industries Buy 'Business Week' (December 15, 1934)," 14, 16.
 54. *History of the Fremont Canning Company and Gerber Products Company, 1901-1994* (Fremont, Michigan: Gerber Product Company, 1986). Publication found in the Gerber corporate archives, which are closed to the public. (This specific information was supplied by Ms. Sherri Harris, Gerber archivist.)
 55. Nisbet, *Contribution to Human Nutrition*, p. 15.
 56. Cowan, *More Works for Mother*.

57. Judson Knight, "Gerber Products Company," in *Encyclopedia of Major Marketing Campaigns*, Thomas Riggs, ed. (Farmington, MI: The Gale Group, 2000), p. 667.
58. Mercedes M. Cardona, "WPP Brand Study Ranks Gerber 1st in U.S. Market," *Advertising Age* (October 5, 1998): 3.
59. At the start of the twenty-first century, the Gerber baby continues to appear on all company packaging and advertising, including in its recently redesigned labels and new line of organic foods. Judann Pollack, "Gerber Starts New Ads as Agency Review Narrows," *Advertising Age* (December 16, 1996): 6.
60. Apple, *Mothers and Medicine*, chaps. 3 and 5, esp. pp. 81-90, Blum, *At the Breast*, pp. 38.
61. For example, the terms were used in the 1952 edition of Herman Frederic Meyer's *Infant Foods and Feeding Practice: A Rapid Reference Text of Practical Infant Feeding for Physicians and Nutritionists* (Springfield, IL: C. C. Thomas), but by the next edition, in 1960, the terms had been dropped.
62. Meyer (1952), p. 143; Walter W. Sackett Jr., *Bringing Up Babies: A Family Doctor's Practical Approach to Child Care* (New York: Harper and Row, 1962), chap. 6. See also Cone, "Infant Feeding," p. 17; Adams, "Use of Vegetables," Nisbet, *Contribution*, pp. 11, 19.
63. Cone, "Infant Feeding," p. 18.
64. Strasser, *Satisfaction*, pp. 33-35.
65. *Ibid.*, pp. 89, 95.
66. Gerald B. Wadsworth, "Principles and Practice of Advertising," *A&S* (January 1913): 55; quoted in Strasser, *Satisfaction*, p. 32.
67. Lynn K. Nyhart, "Home Economists in the Hospital, 1900-1930," in *Rethinking Home Economics*, Sarah Siegel and Virginia B. Vincenti, eds. (Ithaca: Cornell University Press, 1997), pp. 125-144. Reference on p. 128.
68. *Journal of the American Dietetic Association*, 8 (July 1932): 199.
69. *Ibid.*, 10 (July 1934): 183.
70. *Ibid.*, 10 (May 1934): 79.
71. *Ibid.*, 11 (January 1936): 493.
72. *Ibid.*, 12 (September 1936): 271.
73. *Ibid.*, 15 (April 1939): 305.
74. Flora Manning, "Canned Strained Vegetables as Sources of Vitamin A," *Journal of the American Dietetic Association*, 9, 4 (November 1933): 295-305; Flora Manning, "Further Studies of the Content of Vitamins A and B in Canned Strained Vegetables," *Journal of the American Dietetic Association*, 12 (September 1936): 231-236.
75. *Journal of the American Dietetic Association*, 11 (September 1935): 293.
76. Ellipses in original. *Journal of the American Dietetic Association*, 15 (June-July 1939): 513.
77. *Ibid.*, 16 (January 1940): 85.
78. Strasser, *Satisfaction*, pp. 11, 126.
79. *Ibid.*, p. 91.
80. *Ladies Home Journal*, 46 (July 1929).
81. Ellipses in original.
82. *Ladies Home Journal*, 50 (August 1933): 77.
83. Italics and ellipses in original. *Ladies Home Journal*, 50 (October 1933): 127.
84. *Ladies Home Journal*, 50 (July 1933): 51.
85. Elsewhere I have seen the baby's name given as "Sally." See Shapiro, "The Consultant Trap."
86. *Ladies Home Journal*, 54 (September 1937): 60.
87. *Ladies Home Journal*, 55 (December 1938): 98.
88. World Health Organization, *International Code of Marketing of Breastmilk Substances* (Geneva: WHO, 1981).
89. In 1992 Gerber, seeking to enter the infant food market in Guatemala, was told by the government it could not use the Gerber baby on its products or in its advertising, as the baby looked too young to pass the International Code of Marketing of Breastmilk Substitutes set up in 1977 by the World Health Organization in conjunction with UNICEF. One very clear rule of the code prohibits advertising of foods with pictures of very young babies, who give the appearance (especially to illiterate women) that such products are acceptable substitutes for breast milk. *Cracking the Code: Monitoring the International Code of Marketing of Breast-Milk Substitutes* (London: World Health Organization, 1977). See also June 13, 1997, correspondence from David Clark, Legal Officer, UNICEF, in author's possession.
90. Meyer (1960), p. 172.

Chapter 7

HOW THE FRENCH LEARNED TO EAT CANNED FOOD, 1809-1930S

MARTIN BRUEGEL

The editor of the *Journal d'agriculture pratique* was frustrated in 1905. Of course, we know that French peasants hardly ever lack things to complain about, and their representatives had already perfected the ways in which to voice discontent over the nineteenth century. Yet neither tariffs nor consumption taxes agitated the spokesman. Overproduction was on his mind, or rather, the waste it brought about. His distress resulted from the knowledge that a solution to spoiling agricultural produce and butchery meat was at hand. Food sterilization was the answer to the problem, a technique that was about to celebrate its centenary. Yet the revolutionary invention of boiling cans in completely sealed containers to prevent their decay had experienced great difficulty in catching on in France. That it was the Parisian confectioner Nicolas Appert (1749-1841) who had discovered the preservation procedure made matters even more irksome to the *Journal*. Glancing beyond the hexagonal frontiers, the journalist noted the growth of canning industries in the United States, Germany, and England. Then he concluded, "We cannot rely on France to develop such industries. . . . We would have to overcome the irrational as well as instinctive repugnance [for canned food] among a large part of the population. It would be an arduous task. Just look to the army, where it is difficult to enjoin the men to eat canned meat." The majority of the French had not yet learned how to consume sterilized foods, and it seemed clear to the writer that the lack of a taste for these conditioned victuals impeded their introduction in the everyday food repertory and the full commercialization of the agricultural surplus.

The almost secular resistance to canned foodstuffs is puzzling in the face of the hope that Appert's breakthrough raised at the beginning of the nineteenth century. The instant government-sponsored publication of