

Food Choice: The Determinants of Food Choice



CHS 345

Aim of this Lecture

To understand the whole concept of food choice.

Learning outcomes:

By the ends of this lecture, students will be able to:

- Understand the meaning of food choice.
- Understand the major determinants of food choice.

Definition of Food Choice

What is meant by the term 'food choice'?

As discussed by Murcott, there are various interpretations and meanings of this phrase (Murcott 1998)

Indeed, even 'choice' has several different meanings as Murcott highlighted, including the following:

- The action of choosing; preferential determinism between things proposed; selection, election
- Abundance and variety to choose from; scope or field for choice
- Person or thing chosen or selected
- An alternative

Definition of Food Choice

Food choice is defined as;

'the selection of foods for consumption, which results from the competing, reinforcing and interacting influences of a variety of factors. These range from the sensory, physiological and psychological responses of individual consumers to the interactions between social, environmental and economic influences, and include the variety of foods available and the activities of the food industry to promote them'...

Major Determinants of Food Choice

1. Attitudes, Beliefs and Knowledge and Optimistic bias

Generally, better understanding of how the public perceive their diets would help in the design and implementation of healthy eating initiatives.

Large European Survey found that the top five influences on food choice in 15 European member states are:

- 'quality/freshness' (74%),
- 'price' (43%),
- 'taste' (38%),
- 'trying to eat healthy' (32%),
- 'what my family wants to eat' (29%).

In the USA the following order of factors affecting food choice has been reported: taste, cost, nutrition, convenience and weight concerns....

In this European study;

- Females, older subjects, and more educated subjects considered 'health aspects' to be particularly important.
- Males more frequently selected 'taste' and 'habit' as main determinants of their food choice.
- 'Price' seemed to be most important in unemployed and retired subjects.
- Women tend to report conforming to healthy eating guidelines more than men.
- Women are likely to be vegetarian, men are meat eaters.
- Despite women being food providers, men and children's preferences dictate.
- Older people eat more traditional meal patterns, talk more about home cooking and more resistant to new foods.
- Younger people snack more and more takeaways foods.
- Married couples have a better quality diet than singles.

So, interventions targeted at these groups should consider their perceived determinants of food choice.

Optimistic bias;

- There is a low level of perceived need among European populations to alter their eating habits for health reasons, 71% surveyed believing that their diets are already adequately healthy.
- This high level of satisfaction with current diets has been reported in Australian, American and English populations.
- The lack of need to make dietary changes, suggest a high level of optimistic bias, which is a phenomenon where people believe that they are at less risk from a hazard compared to others.
- This false optimism is also reflected in studies showing how people underestimate their likelihood of having a high fat diet relative to others and how some consumers with low fruit and vegetable intakes regard themselves as 'high consumers'.

2. Influence of Skills and Abilities on Food Choice

- Cooking and food preparation skills;
- Self-efficacy;

Ability to provide your-self and others with a balanced diet

3. Individual Energy and Nutrient Need

The amounts of energy ,carbohydrate, fat , protein, vitamins and minerals needed differs between different age groups and between males and females.

For example: women of child-bearing age should consume extra amounts of folate during early pregnancy to decrease the risk of fetal neural tube defects (spina bifida)

4. Health Concerns

Diet which exclude many foods due to a person's health concern or for medical reasons need to be planned carefully.

For example: people who are lactose intolerant cannot eat some dairy products so must make sure that they eats other foods which are good sources of calcium, e.g. Salmon

5. Biological Determinants of Food Choice

- Hunger and satiety; Our physiological needs provide the basic determinants of food choice. Humans need energy and nutrients in order to survive and will respond to the feelings of hunger and satiety.
- The energy density of diets has been shown to exert potent effects on satiety; low energy density diets generate greater satiety than high energy density diets. The high energy density of high-fat and/or high-sugar foods can also lead to 'passive overconsumption'.
- An important satiety signal may be the portion size consumed. Many people are unaware of what constitutes appropriate portion sizes and thus inadvertently consume excess energy.



- 5. Biological Determinants of Food Choice
- Sensory aspects; "Food preferences" taste, smell, appearance and texture of food.

Taste is consistently reported as a major influence on food behavior.

 Palatability; Palatability is proportional to the pleasure someone experiences when eating a particular food. It is dependent on the sensory properties of the food such as taste, smell, texture and appearance.

Sweet and high-fat foods have an undeniable sensory appeal. It is not surprising then that food is not only regarded as a source of nourishment but is often consumed for the pleasure value it imparts.

Cost;

- The *cost* of food is an important determinant of food choice.
- Low-income groups have a greater tendency to consume unbalanced diets and in particular have low intakes of fruit and vegetables.
- In low-income settings, people spend half their income on food; in the USA the average is only about 10%, but up to about 30% for the poor.
- Stores in poor urban areas do not carry many quality fruits and vegetables "ECONOMIC INEQUALITY"

Cost;

However, access to more money does not automatically associate to a better quality diet but the range of foods from which one can choose should increase.

As long as people can afford enough calories, the poorer they are, the worse their diet and the fatter they tend to be.

Time constraints;

- Lack of time is frequently mentioned for not following nutritional advice, particularly by the young and well educated .
- Many people say they do not have enough time to buy, prepare and eat healthy food.
- People living alone or cooking for one seek out convenience foods rather than cooking from basic ingredients.
- This need has been met with a shift in the fruit and vegetables market from loose to pre-packed, prepared and ready-to-cook products.
- These products are more expensive than loose products but people are willing to pay the extra cost because of the convenience they bring.
- Developing a greater range of tasty, convenient foods with good nutritional profiles offers a route to improving the diet quality of these groups.

Accessibility;

Accessibility to shops is an important physical factor influencing food choice, which is dependent on resources such as transport and geographical location.

Healthy food tends to be more expensive when available within towns and cities compared to supermarkets on the outskirts. However, improving access alone does not increase purchase of additional fruit and vegetables.

At home: fruit and vegetables that are washed, cut and ready to eat are more accessible.

Availability of shops near to home;

Availability of fruit such as: strawberries or frozen vegetables all year round, allow to consume it at any season. However, availability alone may not increase of consumption of fruit and vegetables.

Snack and junk food should simply not be available or limited (children accept economic arguments better than health ones).

Facilitating actions

Are there ways of increasing availability or accessibility of healthy foods?

- ✓ Promote farmer's markets, food cooperatives, house gardening and school gardening.
- ✓ Offer nutritious foods often in a positive social setting.

Education and Knowledge;

Level of education can influence dietary behavior during adulthood. In contrast, nutrition knowledge and good dietary habits are not strongly correlated. This is because knowledge about health does not lead to direct action when individuals are unsure how to apply their knowledge.

Furthermore, nutrition's information comes from unclear, a variety of sources and is viewed as conflicting, which discourages motivation to change. Thus, it is important to convey accurate and consistent messages through various media, on food packages and via health professionals.



7. Social Determinants of Food Choice

 Cultural and religious influences; Cultural influences lead to the difference in the habitual consumption of certain foods and in certain cases can lead to restrictions such as exclusion of meat from the diet. Unlike religious influence, cultural influences are however amenable to change: when moving to a new country individuals often adopt particular food habits of the local culture.



7. Social Determinants of Food Choice

 Social context; The influences that People have on the eating behavior of others is direct (buying food) or indirect (learn from peer's behavior). Even when eating alone, food choice is influenced by social factors because attitudes and habits develop through the interaction with others.

The *family* is widely recognized as being significant in food decisions. Research shows the shaping of food choice taking place in the home. Because family and friends can be a source of encouragement in making and sustaining dietary change and adopting dietary strategies.

7. Social Determinants of Food Choice

- Social setting; Although the majority of food is eaten in the home, an increasing proportion is eaten outside the home, e.g. in schools, at work and in restaurants.
- The venue in which food is eaten can affect food choice, particularly in terms of what foods are on offer. The availability of healthy food at home and 'away from home' increases the consumption of such foods.
- However, access to healthy food options is limited in many work/school environments. This is particularly true for those with irregular hours or with particular requirements, e.g. vegetarian

"Eating with family is usually healthier"

The 4 "A"

- Availability; relates to local retail provision within the home.
- Accessibility; area of residence, car ownership, and shopping facilities.
- Affordability; income levels, cooking skills, food marketing.
- Acceptability; cultural and social environment.





8. Psychological Factors

Stress;

The influence of stress on food choice is complex not least because of the various types of stress one can experience.

The effect of stress on food intake depends on the individual, the stressor and the circumstances. In general, some people eat more and some eat less than normal when experiencing stress.

Mood;

Today it is recognized that **mood** has a strong influence over our choice of food and that food influences our mood.



9. Environmental Factors

Media; Food advertising;

Magazines and newspapers carry information on food.

Advertisements encourage people to choose certain foods often appear in TV, radio, posters, magazines, and newspapers.

Environmental concerns;

Scientific intervention in the food chain also may cause concerns for some people.

"Genetically modified (GM)- organic "



10.Other Factors that may Affect Food Choice

Human welfare and fair trading, where growers or producers in developing countries are paid a good minimum price to cover their costs, can be high concern for some people. This can affect the choice between caged or freerange hens, or dolphin friendly tuna.

Both external and internal factors are important:

- How we feel (e.g., sick, self-indulgent)
- How we think it will make us look
- Our beliefs and attitudes
- Who we eat with and what they eat
- Our knowledge of health benefits and risks
- Whether we can find, afford and prepare what we want
- Our degree of independence

Physical Activity

Cultural Factors Influencing Physical Activity Among Ethnic Minority Women in UK

- Acceptance of large body size
- Social norm to eat large portions
- Physical activity not valued by the community
- Language difficulties
- No physically active role models
- Exercise viewed as something only white

Physical Activity

Additional Common Barriers to Physical Activity Among Ethnically Diverse U.S. Women

- Feel guilty prioritizing their health above the needs of family and community
- Concerned with safety issues rural and urban limitations
- Lack of access to affordable and safe physical activity facilities/programs
- Difficulty balancing childcare, work, and family responsibilities

At the end, The complexity of food choice is obvious.

Food choice factors also vary according to life stage and the power of one factor will vary from one individual or group of people to the next.

Thus, one type of intervention to modify food choice behavior will not suit all population groups.

Rather, interventions need to be geared towards different groups of the population with consideration to the many factors influencing their decisions on food choice.

References

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