снартек 9

Developing a taste for health

David Fouillé

Introduction

In the current context of food crisis, emphasis on the sociology of food is increasing in search for a rationalization of modern food consumption patterns (Poulain, 2002). Whereas food availability has long been of widespread concern, especially in underdeveloped countries, the nature of food consumption within developed countries is now climbing up the political agenda.

The recent growth in levels of consumption of convenience foods, within both domestic and commercial settings, is well documented. However, recent high profile food scandals have raised questions regarding not only the amount of food consumed, but also the general condition of that food and the consequences of consumption for our health.

In this chapter food consumption will be analysed in the light of growing health awareness. Attention will be given to the changing status of food, not so much in terms of the expression of identity, but rather regarding the intrinsic value of food. Finally, the dimension of taste will be considered in relation to health and global environmental concerns.

Health awareness

Health and lifestyles

Although more evident, food-related health concerns are not new. In ancient Greece, Hippocrates' medicine was based on four categories of food and their relationship to four emotional conditions: wet, dry, hot and cold. *Diaita* (lifestyle in Greek) was associated with nutrition, and the Greek scholars ordered that certain types of food be avoided, possibly to prevent noisy and odoriferous intrusions in the philosophical debates (Skrabanek, 1994). Personal health concerns were associated with virtuous values, and Skrabanek further relates how healthy eating was endorsed by certain movements in the belief that illness and premature death could be avoided by means of a discriminating lifestyle: less meat, less fats, less sugar, less alcohol, and less sex.

Such concerns and restrictions have been maintained throughout the centuries, most obviously through religious dictates regarding food preparation and consumption. Meat in particular has always been and still remains a controversial food item, either due to its inherent ambivalent connotations of life and death (Poulain, 2002), or through the more straightforward belief that meat contains toxic blood and germs (Skrabanek, 1994).

It is interesting to note that in the majority of developed nations dining out has grown in popularity in recent years (refer to Chapter 5), yet despite this apparent acceptance of dining out as a key leisure activity, we have seen the emergence of a media obsession with health concerns about the nature of our diet (Fischler, 1993).

Food has shifted from being a potentially unconsciously accepted part of everyday life to a source of greater attention, particularly in relation to health. The attention surrounding what we eat is largely related to our dual concerns for health and pleasure, and Fischler (1993) examines this pattern in various human societies: is pleasure trustworthy and guided by the wisdom of our bodies, or is it on the contrary a misleading and hazardous attraction? The general consensus seems to be that superior health stems from restriction and discernment within our food consumption patterns (Gronow, 1997). Despite growing health concerns in populations in the last 30 years in particular, there seems to be a persisting confusion about the meaning of 'healthy'. The perception of 'healthy' according to working class standards, as identified by Bourdieu (in Wood, 1995) certainly differs from the bourgeois standards that emerged since the 1970s. Where meals of the working class are focused on compensating for the energy expenditure from long hours of heavy work, the bourgeois display greater concern for health and physical appearance through personal asceticism (Bisogni et al., 2002; Gronow, 1997).

Responsibility of the food industry

It has been suggested that the perceived spread of food-related diseases and the promotion of unhealthy eating are largely endorsed by a global food industry. It is believed by some that responsibility for a pattern of unhealthy food production, with livestock being fed hormones and antibiotics, waters being infected by animal slurry (Ford, 2000), and genetically modified organisms lying latent, rests with multinational food companies. The potentially contradictory motives of profit generation and concern for the health of consumers are often highlighted, as are some of the marketing techniques of certain companies. Such techniques may encourage the adoption of unbalanced diets, the consequences of which are particularly concerning in countries in which energy expense from physical activities is in decline (Hoffman, 2001). There is particular concern that aggressive marketing campaigns aimed at children might result in the adoption of diets which fall short of meeting basic nutritional requirements. American children, for instance, achieve 50 per cent of their energy intake through added fat and sugar in snacks and soft drinks (Nestle, 2000), a pattern which is likely to be spreading under the influence of market globalization. There is also an evident trend among food manufacturers to enhance food value by claims related to health. Certain dubious advertising practices emphasize the properties of certain foods that apparently lower cholesterol or reduce the risk of contracting cancer, all 'as part of a healthy diet' (Nestle, 2000). Such claims may encourage misconceptions among consumers.

Hoffman (2001) claims that dietary problems are related to changing lifestyles, and the phenomenon of urbanization in particular. Not only are urban populations less active, they are also much more reliant on convenience and prepared foods, whether within the home or in restaurants.

Within this context the obvious challenge is how to encourage widespread uptake of healthier food choices.

What we eat, and how we eat it

As noted in chapters throughout this text, food consumption has long been associated with the display of one's identity. It is emphasized by the specificity of humans to be omnivorous, which is synonymous with choice, autonomy and adaptability (Fischler, 1993). However, Fischler further outlines that this autonomy is also bound by the constraint of variety. Variety is the source of nutritious elements (proteins, vitamins, minerals, etc.) humans rely on in their complex nutritional system. This paradox touched upon by Fischler relates to the ambiguous neophobia and neophilia of humans towards food, characterized by a need to explore new foods to acquire vital nutriments, and a vital necessity to beware of potential dangers from food. This paradox in modern developed societies is further complicated by our realization that foods which have long been considered safe and even health promoting, can in fact be a source of danger. Many of our most familiar foods are now surrounded with distrust and hesitation. Poulain (2002) highlights how this has led, to an extent, to commercial food consumption moving from being associated purely with positive gastronomic and leisure interests to one underpinned by serious social and scientific considerations, often driven by those in the academic community.

Obesity is an increasingly common food-related disorder and it is possibly the most obvious indication of the radical changes in food consumption patterns that have occurred since the beginning of the twentieth century. The main observation is a revolution of food-related diseases. Whereas food deficiencies were the major cause of food-related death and illness worldwide at the turn of the nineteenth century, many chronic conditions of the twenty-first century, such as coronary

heart disease, diabetes, stroke or high blood pressure, are related to food excess (Nestle, 2000). It seems that this problem has been exacerbated by the relentless growth in the consumption of foods in US-style fast-food restaurants and of preprepared convenience foods at home (Ford, 2000; Miller, 1996). If one accepts the concept of McDonaldization (Ritzer, 2000) as the inevitable model for the evolution of many economic and social systems and the reported likely consequences of globalization, then this trend may well continue. Nestle (2000) observes how American children (but the pattern can be observed in most western societies, and is growing in developing countries) are literally bombarded with commercials promoting fast-food, snack foods and soft drinks, the consequences of which will be examined later. In such circumstances, food becomes a commodity like any other, the consumption of which receives little consideration.

Counter trends

Consequences of food insecurity

Despite such a pessimistic outlook, there is evidence to suggest that food-related health concerns are now more prevalent, albeit as a consequence of food scandals of the past two decades, which were largely uncovered by the media. In 1996 an announcement was made in Great Britain of a potential link between bovine spongiform encephalopathy (BSE) and the human Creutzfeld-Jakob disease. This not only resulted in a dramatic decline in beef consumption (and meat consumption in general) across Europe (Regmi and Gehlhar, 2001), but it also revealed somewhat perverted, yet widespread, food production practices: vegetarian cows fed meat-based food, and even worse, cows being fed beef. The consequent headlines such as 'Cannibal cows' and 'Frankenfood' raised serious health concerns among consumers, and distrust about the quality of many foods.

By encouraging people to choose a more healthy way of eating, there is also an invitation to a more personal eating, and hence a discovery (and even re-discovery) of certain foodstuffs. The current trend is indeed to move away from mass consumption, and hence to look for new foods. Although this is not an unusual inclination for the omnivorous human, the search for new foods in human history is rather related to seasonality, changing ecosystems or socio-economic evolution (Fischler, 1993). This pattern might indeed look like an anachronism in a global world where food is not scarce any more (at least among most developed countries), it is however a genuine one. The US Departments of Agriculture and Health and Human Services, for instance, advise that five to nine portions of fruit and vegetables should be eaten every day (Regmi and Gehlhar, 2001). If such patterns are to be followed, there is a need for a more attractive offer in order to avoid strong reluctance due to taste monotony. Hence the search for new foodstuffs.

Food remains an essential element of daily life, not just for matters of pleasure or consumption, but for the purpose of maintaining life. As such, food is thought to remain a major source of pleasure in an activity that, in human cultures, occupies very little time every day (Friedlander et al., 1999). That time, however, is expected to be highly qualitative in a busy daily schedule where lunch and dinner could often be the only relaxed moments. Thus, growing health awareness and an emerging self-consciousness seem to lead to a pursuit of better quality food, and indeed tastier food. The act of eating is highly affective (Friedlander et al., 1999), an intimate activity hardly shared with others, although eating remains a highly social activity. Fischler (1993) elevates the incorporation of food to a climax, the unique act of integrating the external world into the internal body. The quest in modern developed societies therefore is not just to eat for survival, but also to eat for one's pleasure and satisfaction beyond the mere physiological value of the food consumed. The strongly growing environmental awareness of the past three decades has contributed to that quest (Goldstein, 2001), and links two motives of self-satisfaction: the satisfaction to contribute to a healthier environment, and the belief to eat healthier.

Questing quality

Consumer anxiety has stimulated interest in alternative food products which have less associated risk. The dramatic increase in recent years in demand for organic produce (most evident to date in the retail rather that the restaurant sector) reflects this

desire to minimize risk. Miller (1996) notes an increased awareness among consumers about the nature of food production and distribution and about the consequences of consumption. It seems that the demand for organic foods reflects a range of emerging concerns including the environmental impact of food production, the need to stimulate local economies, the traceability of produce, and a belief that money spent on organic brings health maintenance and tastier foods (Goldstein, 2001). Ford (2000) is encouraged by his identification of a gradual change in the way in which consumers are being encouraged to adapt their food preferences. He sees a move away from delivering frightening messages on the need for personal constraint, to a more positive emphasis on the connection between food choice and personal well-being.

The move from constraint to choice appears as a prerequisite to a genuinely healthier lifestyle. This optimistic approach to the achievement of health through appropriate diets challenges the dominant belief that all that is tasty and attractive is necessarily unhealthy.

The health benefits of eating quality food are generally accepted, and the trend is therefore to switch from unhealthy foodstuffs (and hence unhealthy tastes) to a wider variety of foods, in particular fruit and vegetables. Consequently, there is a tendency to shift from processed food to more genuine and plain foods with distinct attributes. The changing status of meat underlines this tendency, given that the avoidance of meat in particular has become a question of choice rather than necessity, and is consumed for its taste rather than its symbolic status (Miele, 1999).

From taste to health

Negative health implications of McDonaldized food habits have been established, particularly for children, who are far from meeting dietary recommendations. Considering the issues of mass culture, Warde (1997) identifies the ubiquity of McDonald's and Coca-Cola as contributing to a loss of taste diversity. There is indeed a widespread promotion of fried foods, salt and sugar, which is particularly prejudicial to children, who already have an established neophobia towards food, and a general preference for the accessible tastes of sugar and salt. Taste is established at an early age, and deviant patterns of taste (or indeed standardized patterns of taste), such as those imposed by fast and junk food diets, will therefore be extremely difficult to alter at a later stage.

As far back as 1825, Brillat-Savarin (1982) highlighted the relationship between health and taste, suggesting that by means of taste (and smell, both being closely associated), comestible food can generally be distinguished from non-comestible or rot-ten food. However, by modern processing and flavouring of food, the health factor, or indeed unhealthy constitution, is concealed. Therefore, even though modern technology should protect us from food hazards, it also facilitates the production of foods which are inherently unhealthy.

A restrictive approach to food, nourished by well established beliefs and customs, remains a common approach in efforts to maintain health. However, there is also a growing awareness and acceptance of a relationship between food and pleasure (Ford, 2000). Whereas food abundance and abuse is commonly accepted as being unhealthy, restrictions in terms of quantity are being compensated by an improved quality of what we eat. Food taste and quality are re-emerging as the very source of palatable pleasure. The current growing health awareness seems therefore to largely involve, directly or somewhat indirectly, the dimension of taste. Healthy food is related to food variety (Nestle, 2000; Regmi and Gehlahr, 2001), and even more, to enjoyment (Ford, 2000). Rising food fears, and the subsequent growing consciousness of what arrives on our plates, might have had an unexpected and positive impact on the ethics of food production, on health and on taste.

Better taste for better health

Educating taste

Beyond health, taste is generally the main criteria for food choice, likes and dislikes driving preferences (Friedlander, 1999). The origin of taste (in terms of likes and dislikes) remains ambiguous, but certainly relies on both innate and socially acquired factors (Fischler, 1993; Rigal, 2002). Dominant patterns have been observed, both in children and adults: a preference for

sweet taste rather than bitter taste, and an equal attraction (neophilia) and distrust (neophobia) towards new foods (Friedlander et al., 1999; Rigal, 2002). Such patterns, however, are more acute with children, and the process of overcoming these tendencies relies on sensorial education (Rigal, 2002). Rigal identifies that it is a simpler process to influence children's food tastes during their formative years, rather than to challenge personal tastes that have developed over time. Early familiarity with a wide variety of foods encourages children to be more accepting of new foods later in life (Fischler, 1993). Practical examples of this form of taste education can be identified, such as in France where most young children take their lunch in school canteens, and where much emphasis is placed on the provision of varied, well-balanced meals.

The importance of developing a contact with foodstuffs is further supported by Rigal (2002), who claims that a more positive approach to food is the key to the acceptance of greater varieties of foods. Her main claim is to move away from a mere classification of foods into likes, dislikes, healthy or unhealthy, and to accurately introduce children to what they eat. Cognitive taste, Rigal further argues, grows with every individual, and thus influences the food choices of adults. Early education of taste could then break the barriers of food monotony developed in prosaic (in terms of taste) societies, and contribute to greater health awareness through a better understanding of food. The effect of health awareness among children should not be underestimated, and must be considered at an early stage, when education is still shaping their minds and taste. This of course is only possible if children are educated in health and taste by their parents, who need to be educated themselves. Unfortunately, as Ford (2000) observes, modern meals are rarely taken together, and the family occupation of preparing a meal is disappearing altogether, sacrificed to a time-stressed modern world. Fischler (1993) identifies how the loss of inter-generation food customs transmission is also lethal to taste.

The organic revelation

Food has undergone some radical changes within two centuries. Whereas in 1825 Brillat-Savarin advocated a lavish way of eating, the late nineteenth century was marked by strong ascetic beliefs (Skrabanek, 1994). The early to mid-twentieth century was of course marked by restrictions due to two world wars. The 1980s and 1990s in turn witnessed the emergence of a more abundant eating routine, to the extent that food became omnipresent in our lives. Daily food contacts increased greatly in the past two decades in the form of snacks and junk food in particular (Poulain, 2002). However, both moralization and liberalization of food appear excessive. Moreover, they seem to largely neglect the dimensions of quality and taste.

If food expenses are growing worldwide, the emphasis seems to rather be on food attributes relative to quality and taste. Organic food in particular is increasingly in demand, with growth rates of 15–30 per cent in Europe, the United States and Japan for 5 years (Regmi and Gehlhar, 2001). The organic food revolution not only stands for better health through less pesticides and artificial fertilizers, it essentially stands for a greater transparency and understanding of food production (Goldstein, 2001).

Miller (1996) identifies how organic food consumers are largely influenced by food safety issues in particular. As they seek a better balanced diet, they are also concerned about the amount of chemicals, hormones and pollution they consume. The fact that organic is perceived to taste better, however remote it might seem from primary concerns, is a crucial factor influencing more recent consumption patterns. There seems to be a (re)-discovery of certain foods and tastes in regard to fruit and vegetables in particular, as consumers spot varieties they had either forgotten about, or largely ignored. Furthermore, consumers seem to place greater emphasis on the intrinsic attributes of their food, which has to taste and look better (Miller, 1996). Hence, consumers see a connection between their health and the wider benefits of what they eat: taste and pleasure (Ford, 2000; Miller, 1996).

Organic food brings consumers closer to their food and to food production methods (Goldstein, 2001). There is a shift away from mass consumption, and an appeal for more transparent production and more educated eating, as opposed to the fat-free explosion identified by Miller (1996), stimulated by a misunderstood (and most probably voluntarily misleading) message engendered by the profit motive. Organic, Miller further underlines, needs a greater commitment from consumers, and is therefore likely to hold longer and stronger.

Globalizing taste

The main changes in diet identified by Ford (2000), mainly a shift from the obsession with loosing weight to the enjoyment of healthy food, is also sustained by globalization in various ways. First, a food crisis is frequently the cause of an identity crisis, and leads consumers to look at new food varieties and preparations (Poulain, 2002). Thus, the potential health benefits of particular and unusual foodstuffs and diets have contributed to the integration of new tastes in traditional national cooking. The integration in western, developed countries of a range of new tastes from Asia in particular, facilitated by a more accessible world, is very representative of this pattern, and nuoc mam, various sambals, nasi goreng, sushi or curry are now well established in western cuisine (Ford, 2000). Many modern restaurants, following the trend, offer some form of fusion food, where lemon grass and coriander, for instance, add to the taste of familiar dishes.

Further, Poulain (2002) identifies a three-fold dimension of globalization: the disappearing of certain food singularities, the emergence of new, mingled food forms, and the cross-cultural diffusion of certain culinary products and practices. Whereas the first contributes to a loss of certain food identities and hence tastes, the latter two undoubtedly add new tastes to existing ones, and increase the taste range available to particular cultures. However, Poulain further identifies how culture also constrains the integration of particular food identities. The success of a guest cuisine is largely dependent on adapting to the host culture, which is largely the case with most of the ethnic restaurants evident in Western societies (Ford, 2000; Poulain, 2002). New tastes, however authentic, are nevertheless available.

Finally, although many socio-cultural identities seem to merge within the process of globalization, globalization has in fact generated a large number of social and political movements, some of which are passionately concerned with food production and consumption (Miele, 1999). The aspiration of these movements is that food be carefully considered as a vital element, and that food production methods be in harmony with consumption needs and respectful of the environment. Beyond the strong ethical engagement of such movements, there is a strong contribution to the wider emergence of better food, largely supporting the organic growth (Bisogni et al., 2002). Further, food identities are claimed back, and 'traditional' and 'authentic' food stuffs regain high ethical and moral value (Miele, 1999). Poulain (2002) also identifies this pattern in the way France has largely (re)-developed regional cuisine and patrimonial gastronomy since the 1980s, as a response to the homogenization of alimentary taste. In times of social instability and political insecurity, seeking the comfort of tasty food appears like a healthy reaction.

Conclusion

Growing health concerns are rational reactions to various food issues that have emerged in the past few decades. The fact that many modern conditions such as obesity, cardio-vascular disorders and even certain forms of cancer are linked to food consumption is a growing concern in both developed and developing countries (Hoffman, 2001).

However, particular attention is growing around two dimensions of better food: one relative to health, with an emphasis on improved food production systems, one relative to taste, and recollecting that food, beyond its vital value, has a physiological and emotional dimension.

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