Food choice and consumer practice

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3. Food choice and behaviour, nutrition interventions, and implications for waste

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Reframing ‘consumer choice’

• Want to challenge the current orthodoxy about ‘consumer choice’ (sometimes framed in terms of ‘food choice’ or ‘informed choice’), where markets or governments are charged with providing sufficient information to enable consumers to make wise decisions.

• Implication that they can be held responsible if they make unwise decisions.
‘Consumer choice’

• Both parts of the term can be critiqued
• ‘Consumer’ is a partial, reductive and historically-specific framing of individual human beings
  • Raymond Williams (Keywords 1976): consumption’s negative connotation (to devour, spend up or waste); a ‘consumer’ has a more abstract relationship to the market than a ‘customer’; negative connotations of ‘consumer society’
  • Frank Trentmann (The Making of the Consumer 2006): words like ‘consumer’, ‘citizen’ or ‘public’ frame the subject in distinctive ways; consumers were ‘made’ through specific social, political and economic processes; a reflection of modern market economies, not a neutral analytical term
• ‘Choice’ suggests a model of rational agents with full knowledge of their options, choosing freely between alternatives, unfettered by socio-economic constraints.
Consumer responsibility

• Draper & Green (2002) propose a three-stage periodization of UK food safety policy, from protecting a largely ignorant public from fraud, through controlling the risks associated with negligence in food-handling, to informing rational consumers to enable them to choose the ‘right’ foods.

• Also note the recent move to consulting the public as citizens who have an active role in shaping the food policy agenda – but the incorporation of a consumer ‘voice’ in policy formation comes at a cost, imposing an obligation on consumers to take responsibility for their actions.
Model of ‘informed choice’


• White Paper on *Choosing Health* (2004): ‘opportunities … for everyone to make … individual informed healthy choices’

• White Paper on *Healthy Lives, Healthy People* (2010) talked about ‘empowering individuals to make healthy choices’: Public Health England will support individuals to make ‘informed lifestyle choices’, treating ‘capable, responsible and informed adults as adults’

• Exception: Foresight report on *Tackling Obesities* (2007) concluded that ‘policies aimed solely at individuals will be inadequate’.
An alternative model: consumer practice

• From individual behaviour and informed choice to the dynamics of social practice.

• Focuses on people’s ‘doings and sayings’ (ethnographic observation) not just reported behaviour (survey evidence).

• Practice theory emphasizes routines and rhythms; the habituation of practices; ideas of skill and competency.

• Practices involve the interplay of meanings, skills and materials (e.g. cooking a meal).

• Practices often bundled together (e.g. cooking with shopping, eating, washing up etc).
Theories of practice

- Range of approaches with diverse inspiration (Bourdieu, Giddens, Schatzki…)
- Practices (cooking, eating etc.) as the unit of analysis; individuals as the ‘carriers’ of practice
- Practices reproduced through routinized performance (subject to improvisation)
- Culturally approved and socially sanctioned ideas of competence.
Practices are routinized - and dynamic

Meals are less bound to particular times - people are eating when and where it is convenient

% eating or drinking, in or out of home, by time of day, all days

![Graph showing meal times and percentages for different years.]
Practices are culturally embedded

- Reproduced via individual performances but socially patterned, habitual and recursive (e.g. time-diary evidence on European eating practices):
  - French more likely to eat lunch in company at a canteen, British on their own at their desk, Spanish take lunch at home
  - French spend average of 3hrs/day eating; British and Finns around 2hrs
  - Danes and Norwegians have cold lunch, Swedes and Finns have hot mid-day meal (naming and timing of meals also socially and culturally specific)
  - Spanish have more regular meal-times and eat later than British etc. (Southerton et al. 2012).
Consumer attitudes to food

- European survey data show national variations in consumer attitudes to food (November 2010, n= 26,000, all 27 EU states):
  - half (48%) were concerned that food may damage their health (up from 42% in 2005) - 29% in UK
  - two-thirds (68%) were (very or fairly) worried about the quality and freshness of food - 66% in UK
  - four-fifths (79%) were concerned about the safety of food and over half (51%) disagreed that ‘food today is safer than ten years ago - 32% in UK.
Concerned about the safety of food

- 0.0% - 67.0%
- 67.1% - 80.0%
- 80.1% - 100.0%
Ethnographic evidence

• Consumers face complex and multiple ‘food choices’ on a daily basis (organic/imported vs conventional/local, cost vs taste, quality vs convenience etc.)

• These concerns are ‘negotiated into practice’ (via rules of thumb and similar largely unconscious routines); ‘choice’ is embedded and habitual

• Periodic food ‘scares’ heighten consumer concerns - but routine practices rapidly re-established (e.g. 2013 horsemeat incident).
Example: FSA Kitchen Life

• Challenges the model of the lone consumer in her kitchen, weighing up official advice about what to serve and how to cook

• Kitchens as ‘crowded’ places where multiple practices carried on simultaneously, other family members (and pets) frequently present

• Consumers engage in domestic practices which contradict FSA guidance (e.g. washing raw poultry, incorrect fridge temperatures, excess salt consumption).
‘Good’ reasons for ‘bad’ behaviour?

- Not just about better-worded messages or improved targeting and market segmentation
- Need a different model of consumer engagement
- Rather than taking a deficit model (blaming consumers for poor dietary choices, assuming they lack culinary knowledge, taste or skill), examine the context/circumstances that shape their practices
- Adopt an assets-based approach (‘stocks of knowledge’).
Example: David Evans’ food waste research

- Domestic food waste not the result of a profligate attitude on behalf of consumers who just don’t care
- Result of disrupted routines, the time-pressures of modern life, the need to accommodate the dietary preferences of different family members, and the general ‘fall out of everyday life’
- Unexpected good weather encourages a family to eat outdoors or go to a local pub rather than having the meal they had planned to eat at home, or simply working late or being delayed in traffic on the way home.
So when I go away, right, I simply have no memory of what’s in my fridge. Or what I have that I can eat in the flat. Shit, I don’t even know if I have anything in at all and if I think about it, well, I [laughs] just don’t really think about it [...] so when I get back into Manchester, the train gets in and all I really know is that I’m tired and hungry and in desperate need of food.

DE: So what do you do?

Well, generally one of two things. Either I go for something quick and easy from the local supermarket – perhaps a ready-meal and a bagged up salad or if it’s the weekend, I can justify a cheeky takeaway (Tamsin).
Understanding ‘convenience’ food

• What lessons can we learn from the rapidly increasing popularity of convenience food since 1970s that might be applied to more sustainable/healthier food?

• Very diverse category, but convenience food often seen as the antithesis of healthy/sustainable food

• Alan Warde: convenience vs care (culinary antinomy); convenience food ‘tinged with moral disapprobation’ (Warde 1999) – consumers justify, rationalize and make excuses for use of convenience food.
ERA-Net FOCAS project
(Food, Convenience and Sustainability)

• Project asks:
  • How is ‘convenience’ food defined by consumers and how does its use relate to consumer understandings of ‘healthy eating’ and environmental sustainability?
  • With what specific practices (shopping, cooking, eating, disposing…) are ‘convenience’ foods associated?
  • How are such foods incorporated within different household contexts and domestic routines?
  • To what extent are current practices subject to change (towards more sustainable and healthier practices)?
Example: ready-meals

- Chilled ready-meals ‘invented’ in late 1970s (an alternative to frozen TV dinners)
- Associated with increased female participation in the labour force (‘meal solutions’ for time-pressed consumers)
- Socio-technical change (refrigeration, microwave ovens, supermarkets)
- UK: 42% of European sales of ready-meals (six times Spain, twice France)
- BMJ (2012) study showed that none of ready-meals tested met minimum WHO nutritional guidelines – but equally true of the recipes advocated by celebrity chefs.
Implications for safety/waste/health?

• Current food safety advice, waste reduction policies and nutritional guidance about ‘healthy eating’ should take more account of the socially embedded, routine character of food consumption

• Not just a question of informing consumers: e.g. 78% of UK consumers aware of 5-a-day campaign but only 58% claim to follow guidance (and fewer do so in practice)

• Practice theory as an alternative framing to the conventional behaviour change agenda, not a blueprint for change.
Practices are irreducibly social

• Consumer practices can’t be reduced to personal decisions or individual choices
• From the attitudes and values of sovereign individuals to the configuration of social practices; their coordination and trajectories; socio-technical systems and infrastructure that underpin routine practice
• Pressure points and moments of transition (cf. work on water and energy demands of bathing vs showering).
Conclusion

• Argued that theories of consumer practice provide a valuable alternative to conventional thinking about individualised consumer choice/behaviour change theories

• Rather than conventional (deficit) approach to food safety, ‘healthy eating’ and sustainable consumption, need a better understanding of the nature and dynamics of contemporary consumer practice; the place of food in people’s everyday lives; their ‘stocks of knowledge’; and how their ‘choices’ become habitual and routinized.