Why we eat what we eat: social and economic determinants of food choice

03 October 2004

The article highlighted the need to consider the senses when promoting dietary change. This article focuses on the socio-economic factors that influence food choice and draws attention to the difficulties facing low-income groups in achieving a healthy diet.

How social factors influence individual food choice

Social influences on food intake refer to the impact that one or more persons has on the eating behaviour of others, either direct or indirect, either conscious or subconscious. Even when eating alone, food choice is influenced by social factors because attitudes and habits develop through the interaction with others. Research has shown that we eat more with our friends and family than when we eat alone and the quantity of food increases as the number of fellow diners grows.

The economics of food choice

The relationship between low socio-economic status and poor health is complicated and is influenced by gender, age, culture, environment, social and community networks, individual lifestyle factors and health behaviours.

Population studies show there are clear differences in social classes with regard to food and nutrient intakes. Low-income groups in particular, have a greater tendency to consume unbalanced diets and have low intakes of fruit and vegetables.

This leads to both under-nutrition (micronutrients deficiency) and over-nutrition (energy overconsumption resulting in overweight and obesity) within the members of a community, depending on the age group, gender and level of deprivation. The disadvantaged also develop chronic diseases at an earlier age compared with higher socio-economic groups; usually identified by educational and occupational levels.

Low-income groups

Low-income groups who find it difficult to achieve a balanced healthy diet, are often referred to as experiencing food poverty or food insecurity. There are many aspects to food poverty but three of the main barriers to eating a balanced healthy diet include cost, accessibility and knowledge. These factors have lead to the development of areas known as food deserts. A reliance on energy-rich, nutrient-poor foods is a consequence of lack of money to buy wholesome foods. The price premium on healthy foods also appears to be greater in low-income areas. Moreover, a lack of proper cooking facilities in the home increases the need to eat convenience or take-away food, that have a potentially higher energy density.
Living on a low income can also present logistical obstacles to eating well such a lack of transportation. Public transport is not a viable solution for many, particularly those with young children or mobility difficulties. Finally, a lack of knowledge or too much conflicting information on diet and health, lack of motivation and the loss of cooking skills can inhibit buying and preparing meals from basic ingredients. Experimenting with cooking is a luxury that low-income groups can ill-afford.

Education level and income determine food choices and behaviours that can ultimately lead to diet-related diseases. The origins of many of the problems faced by people on low incomes emphasises the need for a multidisciplinary approach to targeting social needs and improving health inequalities.

Factors influencing food choice are not only based upon individual preferences, but are constrained by circumstances that are social, cultural and economical. Low-income groups face specific challenges when attempting dietary change and solutions need to be specifically targeted. The population at large also face numerous barriers to dietary change, which can be tackled with the help of tools borrowed from social psychology. Both of these topics will be explored in future articles of FoodToday.