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Research report

Understanding the motives for food choice in Western Balkan Countries ☆

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ABSTRACT

Substantial empirical evidence exists regarding the importance of different factors underlying food choice in Western Europe. However, research results on eating habits and food choice in the Western Balkan Countries (WBCs) remain scarce. A Food Choice Questionnaire (FCQ), an instrument that measures the reported importance of nine factors underlying food choice, was administered to a representative sample of 3085 adult respondents in six WBCs. The most important factors reported are sensory appeal, purchase convenience, and health and natural content; the least important are ethical concern and familiarity. The ranking of food choice motives across WBCs was strikingly similar. Factor analysis revealed eight factors compared to nine in the original FCQ model: health and natural content scales loaded onto one factor as did familiarity and ethical concern; the convenience scale items generated two factors, one related to purchase convenience and the other to preparation convenience. Groups of consumers with similar motivational profiles were identified using cluster analysis. Each cluster has distinct food purchasing behavior and socio-economic characteristics, for which appropriate public health communication messages can be drawn.

Introduction

Consumers' dietary patterns are not solely determined by the sensory characteristics of food itself (food-internal stimuli), but also by a broad set of individual and social factors (food-external stimuli or non-food effects) (Bell & Meiselman, 1995; Eertmans, Baeyens, & Van den Bergh, 2001; Eertmans, Victoir, Vansant, & Van den Bergh, 2005). Non-food effects can further be categorized as intra-individual determinants (knowledge, specific preferences, and health status) and interpersonal determinants (e.g. norms of in-groups and culture). It is hypothesized that the relation between external influences and actual food choice behavior is mediated by food related attitudes and beliefs (Pettinger, Holdsworth, & Gerber, 2004; Sun, 2008). When making dietary choices, people perceive food as a means of satisfying different needs, other than solely nutrition (e.g. appearance, life style, image, healthiness). Bearing in mind that actual food consumption is affected by a multitude of influences, it is important to measure the relative importance of potential food choice motives in different populations. Measuring the motives behind food choice can help in tailoring media messages and health promotional campaigns to the needs of specific market segments.

Steptoe et al. (1995) developed a protocol, the Food Choice Questionnaire (FCQ), which has been used widely to assess the impact of different motives on food choice. The authors initially identified nine factors that underpin food choice motivations: health, convenience (ease of preparation and availability), price, sensory appeal (appearance, taste, and smell), mood, natural content (e.g. no additives), weight control (low in calories and fat), familiarity and ethical concern (politically approved country of origin, environmentally friendly packaging). This protocol was successfully implemented as a whole or partially in urban, English speaking populations (Glanz, Basil, Maibach, Goldberg, & Snyder, 1998; Lockie, Lyons, Lawrence, & Mummery, 2002; Martins & Pliner, 1998; Pollard, Steptoe, & Wardle, 1998) and, more recently, in urban non-English speaking populations (Ares & Gambaro, 2007; Biloukha & Utermohlen, 2000; Fotopoulos, Krystallis, Vassallo, & Pagiaslis, 2009; Honkanen & Frewer, 2009; Januszewska, Pieniak, & Verbeke, 2011; Lindeman & Väänänen, 2000). The initial nine factorial structure, proposed by Steptoe et al. (1995), did not prove to be invariant across Western European

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populations (Eertmans, Victoir, Notelaers, Vansant, & Van den Bergh, 2006; Fotopoulos et al., 2009).

Research aims and justification

This study analyses the motives for food choice, using the FCQ, in six Western Balkan Countries (WBCs). The research contributes to the literature on three grounds: providing a systematic cross-national comparison of food choice motivations in the WBCs, assessing the generalizability of the FCQ factorial structure to a markedly different environment from the original UK sample and other Western Europe countries (which account for the majority of applications of the FCQ), and to assess the usefulness of the FCQ in identifying subpopulations with similar food choice behavior.

Research into food consumer behavior in emerging and/or transitional economies is still underrepresented in the international scientific literature, despite the growing economic significance of these markets' (Dmitrović, Vida, & Reardon, 2009; Steenkamp & Burgess, 2002). The WBCs have experienced during the last 20 years the disintegration of the former Yugoslavia, which was followed by a period of turbulent, and in some cases bloody, upheaval. During these years, consumers' purchasing power, retail structures and patterns of food demand changed substantially (Kathuria, 2008) and consumers' choice of food products has expanded from being very limited, and heavily controlled by the state, to incorporating a vast number of alternatives sourced from throughout the world (Dmitrović & Vida, 2007). Yet up-to-date research on food choice in the WBCs remains rather scarce with data which are collected, interpreted solely within a medical framework. For example, research showed that nutritional habits in the WBCs place the population at a high risk of coronary heart disease (Kromhout, 2001; Menotti et al., 1999). A few studies consider people's knowledge and awareness of healthy eating and food safety in the WBCs (e.g. Jevšnik, Hlebec, & Raspor, 2008; Radman, 2005), highlighting the importance of education in this domain. However, a systematic cross-national comparison of food choice motivations in WBCs has to date, been absent.

While the FCQ has been widely applied in Western Europe, there is a need to consider whether its factorial structure generalises to markedly different populations. We therefore assess, as suggested by Steenkamp and Baumgartener (1998) and Vandenberg and Lance (2000), the factorial invariance of the FCQ instrument. Initial work in this area has been undertaken by Eertmans, Victoir, Notelaers, Vansant, and Van den Bergh (2006, p.351), for Belgium, Italy and Canada, drawing on samples of university students in psychology. Eertmans et al. (2006) recognized the limitations of this sample, noting that 'future research may design generalizability studies that are fuller replications of Steptoe et al.'s (1995) original study (e.g. with larger, more heterogeneous samples), providing more robust tests of the scaler invariance of the Food Choice Questionnaire'. This study is in keeping with this call, drawing on nationally representative samples, and contributing to an assessment of the cross-cultural validity of the FCQ.

Fotopoulos et al. (2009, p. 200) note that 'little empirical work has examined the functioning of the FCQ in various subpopulations'. In other words the utility of the FCQ has been assessed at a national or cross-national level; yet the factors motivating food choices are likely to vary significantly across consumer segments in a particular country. Therefore, based on the results of the factor analysis, we apply a two stage clustering process to segment Western Balkan consumers and assess the validity of the resulting typology. In other words, we assess the usefulness of the FCQ as a basis for segmentation of food consumers and its ability to define target groups for appropriate health related messages.

Methods

The FCQ was administered to 3085 adult participants (18 years and older) in six WBCs: Bosnia-Herzegovina (BIH), Croatia, FYRoM,[1] Montenegro, Serbia and Slovenia. Approximately 500 respondents completed the FCQ in each country, and the sample was stratified to match key characteristics of the global population. The average length of the interview was 33 min. Data were gathered via IPSOS country offices in the region.

Instrument

The FCQ (Steptoe et al., 1995) measures the reported importance to a given individual of nine factors underlying food choice. Participants rated the importance of each of the 36 FCQ-items on a 5-point scale. Items were introduced with the statement: *'It is important to me that the food I eat on a typical day...'* with responses ranging from 1 – *'not at all important'* to 5 – *'very important'*. So, for example, respondents stated their level of agreement with the notion that *'It is important to me that the food I eat on a typical day is easy to prepare'*. FCQ statements were grouped into four sections, which were rotated while interviewing. We opted for a five point instead of the original four point scale used by Steptoe et al. (1995) for two main reasons: (a) in order to avoid a forced (artificial) agreement or disagreement of respondents, and (b) for the scale range to match others in the questionnaire (Cox, 1980; Saris & Gallhofer, 2007).

The FCQ, as administered in the WBCs, was a part of larger survey consisting of seven sections, the last gathering socio-demographic data for each respondent. The first part of the survey was the FCQ, followed by sections devoted to specific food products. For each targeted product category (fruit, traditional, organic and products with health claims), the survey elicited information regarding consumption, attitudes (measured by semantic differential scales), knowledge and social norms.

Consumption of products was measured by self-reported questions on consumption frequency with data collected for the product category overall, rather than specific items. Definitions were provided along with examples to improve the accuracy of results. Specifically, a portion of fruit was defined as approximately 80–100 g, for example an apple, two spoons of fruit salad or one glass freshly squeezed juice. Under traditional food we consider meals that are eaten throughout the year or at certain times of the year, are connected with various celebrations and special occasions, prepared and cooked according to old recipes, are transmitted from one generation to other, are prepared with care and in a way that belongs to national heritage, are prepared from natural ingredients and are typical for specific places, regions or a country. Specific examples of traditional dishes were given for each country, based on focus groups findings from an earlier stage of the project, along with photographs. The specific examples of traditional foods used were: sarma and cicvara/pita (BIH), sarma and grah (Croatia), tavce gravce, sarma, punjena paprika (FYROM), sarma and podvarak (Montenegro), sarma and cevapcici (Serbia), ricet and jota (Slovenia). We also provided participants with examples for health claims (e.g. probiotic yoghurts) with photographs. Knowledge of different food types was measured by a self reported statement on the scale anchored with 1 – *'I am not informed at all'* and 5 – *'I am fully informed'*.

The master questionnaire was developed in English. The original wording of 36 items, taken from Steptoe et al. (1995) was used (see Table 4). The questionnaire was translated first into Serbian and back translated to English by a second translator, not familiar

[1] Former Yugoslav Republic of Macedonia.