

BODY, FOOD EATING BEHAVIOUR AND SOCIAL CONTEXT: AN AGING PERSPECTIVE

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Abstract: *This paper makes a journey into the sociology of the body, especially with regard to food consumption. Consumer behaviour is also the subject of study of several disciplines. In this paper we will analyze it from the point of view of the intersection between marketing and sociology. And finally, we will analyze the body and the modes of consumption as they have been socially constructed through lenses, such as “body project” a concept of sociologist Chris Shilling, mobility as described by John Urry or from the perspective of “life as a show” (Gofman, 2003). All these lenses can be viewed reflexively. Nick Crossley (2006) considers that bodily reflexivity is a general feature of current societies, societies in which the body has become an important factor in the field of social relations. Eating behaviours include a high amount of body reflexivity that is largely based on the fear of illness in this “risk society” (Beck, 1992)*

Keywords: body, behaviour, age, reflexivity, mobility

1. Introduction

Jean-Claude Kaufman says that what every sociology researcher should do is never forget an essential question: “What is a society, how does it work?” (Kaufman, 2009). This paper presents the innate nature of food consumption phenomena and the explanations of consumer behaviour in close connection with the current social context, on the one hand, and the transformations of subjectivity, on the other. A new culture of health has developed throughout the world – which is becoming more and more visible in the Romanian cultural space as well – whose indicators may be the following: the increase in consumption of food supplements according to statistics, the emergence of supermarket sections specializing in organic products, the emergence and development of dedicated fairs, the increasing presence in the public space of nutritionists who find their voice, the introduction of numerous websites, the development of the “Plafar” network, the increased social visibility of physical activities in the public spaces, but also on a discursive level, the emergence and the development of gym networks, etc. Under these circumstances, several questions should be asked: How do individuals acquire and develop such consumption guidelines? In social terms, how is the subjectivity associated with these behaviours (perceptions, representations) built? What is the link between these consumer practices and the social context in which the body plays an important role for social identity? What is the relationship between these behaviours and the body-related concerns coined by Bryan Turner (2008) as “somatic society”? How does the level of scientific literacy influence the orientation towards such consumer behaviours?

The present project aims to provide answers to these questions, answers that allow an explanation of both the social context (of what is outside the individual) and the subjective meanings that become causal structures for the analyzed behaviours. Therefore, the project proposes a qualitative-quantitative methodological approach based on some theoretical perspectives.

2. Body, food eating behaviour, social context and aging: theoretical perspectives

Jean-Claude Kaufman says that what every sociology researcher should do is never forget an essential question: “What is a society, how does it work?” (Kaufman, 2009) Having this question in mind, we are on our way to unlocking the elements that make up the title of

this subject, namely body-consumption-society, all from the point of view of aging, both as a whole and as separate elements “filled with meanings”.

We are born, we grow, age and die. This is the course of life from which nobody escapes. “The quest for explanations for why we age is nearly as old as the written record, going back to long before Ponce de Leon’s fabled search for the “fountain of youth” in the early 1500s.” (Cutler and Heendriks, 2002).

There have been references to the body of human beings since the existence of writings in caves, and the physical evidence is infinitely older. However, the body as a study element in general and as a study element in sociology in particular is a relatively recent field.

If, before the mid-19th century and the beginning of the 20th century, “the body was for (almost) everyone, only the temporary home of an immortal soul” (Corbin, Courtine and Vigarello;2008), and it “was subject to the rigors of fasting even in the case of children at risk of death” (Barbulescu, 2015), now “your body belongs to you and you alone, since it is the very evidence of the self” (Kaufmann, 2009: 89). This transition has taken place over the last 200 years once “vision became the dominant sense of modernity” (Le Breton 1990: 106 in Kaufman 2009: 144). In the age of modernity, “the social competence of the eye is vast” (Gofman, 1988: 153 in Kaufmann). Thus, we can say that we are witnessing the “social construction of bodies”, the body being “the product of social construction” (Bourdieu, 2017: 20,42).

We can see how many of the theories related to the body come from Berger and Luckmann's constructionism. Thus "in the process of interaction people do not just obey the rules, rituals, traditions, they create, construct meanings and symbols" (Vlasceanu, 2013: 64).

The same happens with the aging process. Cutler and Hendriks (2002) in „Gerontology” an article in the „Encyclopedia of Aging” say that "old age is socially constructed" and is "a multilevel passage".

Consumer behaviour is a subject of research for several disciplines, each of them focusing on particular aspects of it. For example, in marketing studies, the social dimension of consumer behaviour is often limited to socio-demographic analysis. The socio-cultural background underlying consumer behaviour is often ignored. These types of studies ignore the fact that through the consumption of some products, that is, through the body, sociability is created. Moreover, a number of consumer behaviour have generated cultures with a strong ideological component. This article complements this dominant perspective in marketing studies with a sociological perspective. An important factor that has produced major changes in society in terms of food-related consumer behaviour was the medical discourse. Scientific medicine as a social institution and as an important consequence of modernity has acquired a strong hegemonic character (Le Breton, 2002). Basically, with the reinforcement of scientific medicine, many non-medical fields of medicine have turned medical. An important area in this regard is food consumption. About this is talking Peter Conrad (2007). For the author, medicalization means the societal tendency to develop some types of drugs to solve any problem a person may have, suggesting that even food must have the approval from a social institution that it is or not suitable for human consumption. Of course, this medicalization process is closely correlated with the aging process of the population and the increase in life expectancy. In this direction of analysis one question may be asked: how does the societal process of medicalization influence the development and forms of food consumption? For example, an easy noticeable direction of manifestation of medicalization is the renewed organic approach to food consumption expressed in the appearance of organic, natural products and nutritional supplements.

A paradox emerging as a result of the medicalization phenomenon is that, although the food industry was based on the medicalization of food consumption – in the sense of creating control over it – it has generated numerous discussions in the society, in the public space, about certain compounds and about whether they are natural or not. Another paradox of the medicalization of society and of the dominant, hegemonic character of medicine is, as

David Le Breton (2002) argues, the maintenance of other practices of “parallel medicine” as an element of “crisis of the hegemonic model” that have begun to take on increasingly bigger importance nowadays. The author includes the following among these: acupuncture, homeopathy, massage, etc. An interesting case from this point of view is product Oscillococcinum. When consuming this product, one can see how the crisis of the hegemonic model of scientific medicine makes Oscillococcinum, which is neither a drug, nor a nutritional supplement and which “is not a homeopathic remedy per se”, a great success. New trends in food consumption (vegetarianism, veganism, etc.) have obviously developed in relation to the idea of disease. Disease and, implicitly, health, is the key to the symbolic construction of these types of consumer behaviour.

This involves the idea of “bodily reflexivity” that is well reflected in food consumption. The author of this concept, Nick Crossley (2006), considers that bodily reflexivity is a general feature of current societies, societies in which the body has become an important factor in the field of social relations. In my opinion, eating behaviours include a high amount of body reflexivity that is largely based on the fear of illness. Also, body reflexivity is closely related to the aging process, people nowadays being more attentive to their bodies than people 100 years ago.

Another important concept that reflects the innateness of eating is the concept of “body project” (Shilling, 2003). Some consumer behaviour are largely based on a certain image of consumers about their own body and involve a plan, a project in relation to their own body, which is often ignored by research marketing. In this regard, there are many examples of individuals who want to look younger than they are, so they turn to diets, maybe even aesthetic surgery (especially for women but not exclusively) or people who want to look older than they are in order to appear as being more reliable.

As I said, consumer behaviour is the object of both marketing and sociology studies, although it seems that there are not many collaborations and joint papers to deal with this topic. Moreover, I think that although marketing and sociology have many common bridges, there are few joint theories and studies. This has been pointed out by Christen T. Jonasen since the period when the two disciplines were on the rise, but it is still visible today by simply counting the quotes by sociologists in marketing papers and vice versa (Jonasen, professor of sociology is among the few who wrote in the *Journal of Marketing* about sociology's contribution to marketing).

In classical sociology there are many references to consumption and consumption behaviour. Thus, Marx considers that consumption is induced by capitalism as a need. Weber, on the other hand, in *Protestant Ethics* (1958), considers consumption as an element of hedonism.

From the point of view of Zukin and Maguire (2004), none of the classical sociologists offered an empirical demonstration on consumption. Zukin and Maguire consider consumption as “a social, cultural and economic process of choice of goods, this process reflecting the opportunities and constraints of modernity.” In the article published in the *Annual Review of Sociology* in 2004, Zukin and Maguire give examples of numerous studies and biographies that “demonstrate how the desire to consume goods is socially built by developing industry and marketing practices in one hand (“offer”) and on the other hand due to demographic changes and new social practices (“demand”).

But let's see what consumption means for marketers:

According to Blackwell et al. (2006), consumer behaviour is defined as “the activities that people undertake when obtaining, consuming and disposing of products and services that they expect will satisfy their personal needs.

From these two definitions it may be noticed that although they refer to the same topic, they handle it completely differently. Thus, if in the definition by Zukin and Maguire one notices how the emphasis is placed on the socially built desire for consumption of goods,

Blackwell – a marketing professor – provides a definition that is more focused on the economic aspect.

Thus, unlike previous definitions, the term “desire” is introduced, an element that is fundamentally social. And this desire is also closely linked to the aging process, generating specific consumption behaviours.

There are a few researchers who have studied age-related consumption. Sharon A. Devaney has been studying out-of-home food expenditure and health expenditure related to age groups.

But let us take a look at the social context. The social environment, the social context, the socio-cultural context or the environment refer to the immediate physical and social conditions in which people live or in which something happens or develops. It includes the culture in which the individual has been educated or is living, as well as the people and institutions with whom they interact.

If we look at the body and eating behaviours through the lens of the mobility paradigm, what does this tell us? “All the world is moving” (Urry and Sheller; 2004). What tell this to us? That certain food-related consumer behaviour that were established due to the traditions and customs of our country, for example, but also the climatic constraints that allow the production of grain change under the pressure of the mobility of products, people, services. An experiment conducted in Germany where on the shelves of the store were only products of national origin proved that the store shelves were 90% empty. This shows how much consumption has changed in the last 100 years. We have meat all year long due to the refrigeration capacities, we have oranges and bananas and other food produced at the other end of the world all year round. Moreover, traditions and habits change with other cultural influences. Now we eat shawarma instead of lard and onion or hamburger instead of polenta.

3. Forms of age

As Settersen and Mayer said “age structure may be formal” or “may also be informal.” (Settersen and Mayer, 1997: 235-236)

The formal part of an age is related to the institutional framework and the social structures that create certain limits and so little opportunities.

The informal part of age is related to behaviours considered “close” to each age. Also, Birren and Cunningham discusses four types of age: biological age, social age, psychological age and functional age (Birren and Cunningham in Settersen and Mayer, 1997, p. 236). All of these variants described by Birren and Cunningham are not related to chronological age. But let's see how this age can be related to food consumption. Thus, first of all, the biological condition of a person is closely related to food consumption. Thus, it is well known that people who look younger than they actually have a balanced lifestyle in terms of food consumption.

But let us see how formal and informal age manifest in the Romanian society and what is the influence of these consumer behaviour in general and food consumption in particular. As I have stated, formal age often matches the chronological age. For example, when we go to school, when we engage in certain activities and when we retire, they are all socially determined by age. All these landmarks are highly social and are – with small variations – the same around the world. In Romania the retirement age is 65 years for men, while for women it grows progressively, and it should be 63 by 2030. Obviously, there are exceptions that we will discuss below, in particular objective exceptions (e.g. early retirement, earlier retirement for army and police staff, retirement as a result of sickness and, last but not least, socialist agriculture pensioners are a special case).

But how can this chronological barrier affect eating behaviour?

First of all, retirement represent a psychological and social issue. In modern society, man spends about one-third of his time at work, one third sleeping and the rest of the time is divided between his other personal and family activities. Thus, with retirement, people wake up on average with one third of their time they must cover with other activities. Some people

decide that 65 years is just a psychological barrier and continue to work, but most of them face the unknown. Their activities may include physical activities, especially for people living in a rural household, raising grandchildren, or simply spending their time watching TV, reading or taking walks. Obviously, these changes have important implications at the psychological level and at the level of social interactions of individuals. In connection with the food consumption some changes may occur, especially related to the caloric requirements of the body. People are much less active than they were in the past, and as a result, their caloric requirements are lower. Also, EFSA data shows that meat consumption decreases in retired people compared to adults by approximately 10% on average and will fall further for seniors over 75 years. But all these changes in consumer behaviour are also related to the social interactions of individuals. This is also noted by Sylvia Sherwood who says “Another variable that has been considered to be positively related to dietary intake and nutrition in elderly is social interaction” (Sherwood, 1970).

Secondly, retirement is also the beginning of the period when people begin to suffer more and more from certain diseases, many of them, such as heart and circulatory diseases, and diabetes, being accompanied by many food restrictions. Thus, by analyzing the consumer data provided by EFSA, we notice that there is a radical change in the food consumption after the age of 65 (see appendix 2). The three main categories I would like to point out are meat consumption, alcohol consumption and fruit consumption. While the first two categories suffer a severe fall in consumption after the age of 65, we notice a significant increase in fruit consumption. Although it is impossible to correlate them because they are different research studies, we cannot help noticing the similarity to a research conducted by Ministry of Health from New Zealand showing that the degree of obesity of individuals increases up to the age of 65, and after this age it decreases slightly, dropping even more after the age of 75 (see appendix 3).

Thirdly, retirement comes with a reduction in cash availability. Compared to the period before retirement, cash resources of individuals are often reduced by half. Obviously, this affects the food consumption, especially in people who live alone and do not have a large family. This is a national constraint that brings changes to the consumer behaviour.

We have seen some objective factors that come with retirement, but let us see some informal age-related elements that make this age seem like any other age, without changing too much people’s consumer behaviour:

An important element is the desire of people to pursue an active life. Thus, some people decide to continue working, others engage in long-term personal projects, such as building a home. All these elements are closely related to the social context in which these individuals act, and here I mean the family, friends, social ties.

An extremely interesting example also refers to Romania. During the communist period in the rural area many of the active people worked in agriculture, but the income from that activity and their pensions were later on extremely low. So, those people had an extremely high percentage of consumption from self-production throughout their lifetime, relying heavily on what they produced in their own households. Thus, for those people, the age of 65 was just a number and they continued to do what they had done for, virtually, all of their lives, namely providing for themselves to a great extent through their own work. In rural areas, being 75 and older is by no means an impediment and does not prevent people from working alongside younger people. On the contrary, it is believed that these people have even greater stamina, as they are “accustomed” to hard work. Obviously, this cohort effect is also changing in Romania, too, subject to modernity. Slowly but surely, farming is becoming mechanized, raising livestock is more profitable when done in specialized farms. It is difficult to say when this transition will complete, but the effects of modernity are making themselves felt here, too.

4. Age and cohort effect in Romania

Cohort is used for an aggregate of individuals anchored together in historical time (normally defined on the basis of birth year)” (Settersen and Mayer, 1997: 235). There are 2 major categories of population in Romania where the cohort effect has different influences.

Thus, the first category consists of people who were born before the 1989 revolution. Thus, in these categories of people the food consumption was originally based on significant lack of food. Who does not remember the empty shelves before 1989? Immediately after the fall of communism and the liberalization of trade, food offer began to diversify. There are, however, many voices who argue that at that time the food market was very poorly regulated and that was why many of the foods that were on the store shelves at the time complied to little or no extent with the legal requirements on food safety. These effects are more or less found in all the Eastern European countries that were under communist repression.

But what exactly does this consumer behaviour of the pre-revolution cohort mean? Once people have gone from a huge food shortage, from rationing bread, sugar and oil to their availability everywhere, from soy salami to cold cuts and bologna easy to find anywhere they have started to consume more and more. The quality did not matter (as I mentioned earlier), it was all about the quantity. Communism that had restricted them for so many years had fallen. But what was the cost of this for consumer behaviour? This effect is only beginning to be noticed due to the increase in cardiovascular diseases (as a result of the increase in obesity) and the incidence of cancers (as a result of many foods that are poorly regulated from the point of view of food safety).

This food consumer behaviour is still highly visible in people over 50, meaning there is a large amount of food available immediately.

The second major cohort is the people born around the 1989 revolution or later. These people are now 35 years old at the most and the food consumer behaviour change is visible. Especially in the last few years. A change in the food consumer behaviour in particular and a societal change in general may be noticed in these people. We can say that a new culture of health is being formed in the Romanian space (worldwide it began long ago). But what are the visible effects of this behaviour? In every supermarket we have a specialized section for organic products, the space allocated to fruits and vegetables has grown greatly, the number of people running in parks is noticeable, the number of gyms has increased greatly, the number of sports events involving running has also increased greatly. If, for example, 15 years ago there were 2-3 marathons in Romania, now there are a few dozens. Also, the number of people participating in these races (including children) has increased. Thus, International Bucharest Marathon has gone from several hundred participants 12 years ago to about 20,000 today.

What conclusion can we draw on the consumer of older people in Romania today? Of course, there are many effects that shape the consumer behaviour of today’s elders, some of these effects we have covered or will cover in this paper, but a strong effect is the cohort effect. The fact that they have lived more than half of their lives in the communist period has shaped and further influenced the consumer behaviour of people over 65 years of age.

Life expectancy in Romania vs. EU

The food consumer behaviour mentioned earlier in close connection with the historical constraints and the development of the country (it should be stated here that Romania and Bulgaria are the far eastern communist countries, the last to join the European Union, the ones less well developed – this having a major influence on the health system which is underfunded) has made Romania and Bulgaria the countries with the lowest life expectancy at birth in Europe.

We can see that life expectancy at birth increased in Romania between 2005 and 2012 by 3.8 years compared to the European average, which has increased by 2.5 years. However, the difference between Romania and the EU average is still consistent, i.e. over 5 years, and

the difference is even greater if we take into account the developed countries. In the case of developed countries, we also have to make a note about food consumption, namely, although Spain, Italy and Cyprus are among the developed countries, without however taking the lead in front of Germany or France, their life expectancy is higher. We can assume that this is largely due to the food consumer behaviour, namely, the famous Mediterranean food that involves eating olive oil, cheese, lots of vegetables and seeds and less meat.

One of the reasons for Romanians' life expectancy compared with the rest of the European countries is disease-related mortality. This cause is closely linked to food consumer behaviour, especially for those born before 1989.

We can explain life expectancy and the incidence of diseases in Romania compared to other European countries if we associate them with meat consumption. According to data provided by EFSA, meat consumption in Romania is about 35% higher than the European average. Should this consumer behaviour be a social construction of the fears of Romanians during the communist era when it was difficult to buy meat? It is possible, but surely, this food consumer behaviour also changes in Romania with the opening of the economy and the placing of foreign products on the market.

5. Conclusions

We are born, we grow old and we die. This order of events cannot be changed by anybody, but during the course of human evolution aging has undergone numerous changes. These changes can be grouped in two main categories.

First, we refer to physical changes. The process of aging was different a few hundreds of years ago. While hundreds of years ago people's life expectancy was around 50 years, now in most countries of the world it exceeds 70 or even 80 years. It is said that 20 years from now old people over 75 will live a second old age period. These things could have been possible due to the evolution of modernity, increased living standards and food security.

Second, we refer to changing attitudes about the aging process. As we have shown, aging is a socially built phenomenon, there are many objective and subjective factors that influence the way people see the aging process. In this paper I have referred only to some of them. Even more than the aging process, the feeding process has an even greater social and cultural burden. The intersection of the two variables only leads to a great deal of possibilities in the investigation of the social process as a researcher.

Obviously, this paper is only a small part of the enormous possibilities of studying food consumption phenomena and behaviours in close connection with the aging process. This is becoming more exciting because these phenomena are being studied by other disciplines as well. Moreover, these consumer behaviours change and evolve under the influence of marketing so here I am, launching a new challenge: Are some of these consumer behaviours the result of modern marketing?

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