Consumer Experiences Eating a Raw Food Diet

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This paper documents the experiences of consumers eating a raw food diet and seeks to contribute to the body of consumer culture theory (CCT), specifically identity projects and marketplace cultures. An interpretive reflexive methodology was adopted, collecting story/narrative interviews and an auto-ethnography of the researcher's own experience.

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EXTENDED ABSTRACT

Consumer Culture Theory (CCT) research is fundamentally concerned with the cultural meanings, socioeconomic influences, and social dynamics that shape consumer experiences and identities in everyday life (Fournier, 1998; Holt, 1997, 1998; Thompson, Locander and Polio, 1990; Wallendorf and Arnould, 1991: Arnould and Thompson, 2005). Accordingly, CCT researchers study how consumers consume (Holt, 1995) across a myriad of social spaces (e.g., the home, office, the Web, leisure enclaves, tourist sites etc.), frequently making use of multiple data sources (Arnould and Price, 1993; Belk et al., 2003; Mick and Fournier, 1998; Moore and Lutz, 2000). Importantly, CCT conceptualizes culture as the very fabric of experience, meaning, and action (Geertz, 1983). In consumer culture people do not define themselves according to sociological constructs but in terms of the activities, objects, and relationships that give their lives meaning (Schouten and McCAlexander, 1995). The activities substantiate their place in the social world, facilitate meaningful social relationships amongst family, friends and social networks, and make judgments about shared values and interests (Schouten and McCAlexander, 1995; McCracken, 1989). Food and eating practices are central to creating good health and incorporate notions of the body, self-control, health, consumption, and the construction of identity (Lupton, 1996).

According to Fischler (1988:279), the act of eating is “both banal and fraught with potentially irreversible consequences”. The process of incorporation is inextricably linked to subjectivity; it is the source of great anxiety and risk (cited by Lupton, 1996:17). Therefore, Consumers may attempt to control the ‘process of incorporation’ by adopting a particular diet (Raw Food Diet). It has been argued by many, that food is central to our sense of identity (Caplan, 1997) - “Because we are omnivores, incorporation is an act laden with meaning” (Fischler, 1988:277). According to Fischler (1988) the principle of incorporation is the action of sending food between the world and the self, between outside and inside our body. “We become what we eat” (Caplan, 1997:9). Food habits and preferences are “central practices of the self, directed at self-care via the continuous nourishment of the body with foods that are culturally deemed appropriate, constituting a source of pleasure and acting symbolically as commodities to present a persona to oneself and others” (Lupton, 1996:15).

Food, Health & Risk Society

The Standardised American Diet (or Western Diet), is a diet dominant in highly processed/fast foods, refined grains and high fat foods. (SAD referenced made in Food Matters DVD and books by Michael Pollan, John Robbins, Marion Nestle) Western diets are now nutritionally unbalanced with too much fat, sugar and salt and not enough fibre (Cannon, 1993). The consumption of this diet is said to be linked with chronic diseases such as obesity, diabetes, cardiovascular disease and cancer (“diseases of civilisation”) which are increasingly prevalent in western cultures (Cordain et al, 2005; Lindeberg et al, 2003 & Lindeberg, 2010). For example, obesity has reached epidemic proportions (Gibney et al, 2004), putting consumers’ health and longevity at risk. Campbell (2006:23) states that “eating the right way not only prevents disease but also generates health and a sense of well-being, both physically and mentally”. Campbell, author of The China Study claims that many diseases afflicted by western societies can be largely prevented by eating a plant-based diet (good nutrition). Consumer experiences of eating a raw/live food diet

In an attempt to manage food risk, there are a growing number of consumers turning to a Live Food Diet. The Live Food Diet is a plant based raw food diet and is a new emerging eating pattern which in recent years has gained consumer and media interest. Live/Living Food discourses in the media (dedicated websites and published books on the subject), research scientists (such as Dr. Howell, Dr. Brekhman, Francis Pottenger and Dr. Budwig) and among consumers (growing online and physical communities) brings the ideology of the Live Food Diet to our attention as an effective way to address many of our society’s western diet/SAD-related diseases (cancer, obesity, diabetes and cardiovascular disease). Therefore the Raw/Live Food diet was chosen and six story/narrative interviews were collected to capture the experiences and journey of consumers eating this diet and following this lifestyle. I, the researcher participated in a 7 day raw food retreat and documented my own experience eating this diet and to learn more about living this lifestyle. Metaphorical Thematical analysis of the data was conducted and revealed the following dominant themes;

- Sick/Remission Society- the broken self
- Food as medicine- the dominant discourse
- The transitioning selves (the different stages of the self), mapping the journey of the self and changing identity
- Emoindment- the revealing body, de-layering body and the healing body
- The religious experience- confession, penance, prayer, for giveness

Many consumers living in remission society (recovering from any illness, disease or addiction and/or long term illnesses such as diabetes) feel like misfits within society which hinges on the emotion of the failure of the self. This prompts a need to manage and cope, thus seeking out solutions and alternative consumption practices (the raw food diet). Arthur Frank (1995) presents the role of the ‘wounded storyteller’ in a postmodern society (my participants & I) as needing to turn their/our illness into a story, an experience, to give a voice for the body. This brings us on a journey of healing, a changing mindset, letting go of the old, embracing the new and the transformation of identity. This new identity gives power and control and renewed purpose for consumers in a remission society and requires alternative consumption practices and lifestyle choices. This dichotomy within society is becoming more prevalent and warrants further research. The methodological approach taken was very appropriate given the context of my research. My role as a researcher and participant added a depth of understanding and a responsibility to the participants of my study.

REFERENCES


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