

Well being and intercultural sensitivity as predictors of food neophobia; Exploring different psychological factors contributing to the reluctance in trying novel foods

Amelina Sneha Maliekal *

Department of Psychology, Kristu Jayanti College, Bangalore, India.

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Abstract

The study investigates the relationship between psychological factors like Well-being and Intercultural Sensitivity with Food Neophobia. The sample studied was a population of 310 Indian young adults, with ages ranging between 18 to 30. The results showed that Intercultural Sensitivity has a significant, moderate and negative relationship with Food neophobia, whereas, Well-being shows a weak, non-significant, negative relationship. Findings imply that being open and accepting towards other cultures, not of their own, helps in reducing Food neophobia. Compared to general well-being, being more exposed to other cultures, through in person exposure or virtual exposure can foster better culinary exploration, which allows for lesser neophobia towards new foods. The study also presents possibilities of future research, by using specific psychological variables (which could also be the pillars of well-being according to PERMA), instead of a general component like Well-being, as used in this study.

Keywords: Food Neophobia; Intercultural Sensitivity; PERMA Model; Nutritional Psychology

1. Introduction

Quite a number of studies related to food choices and mental well-being claim that better food choices and diets definitely benefits one's mental health as well (1,2). There would be many reasons to why an individual might not choose a better diet or a healthier food preference for themselves. This only disregards their health both physically and psychologically. One among those reasons is, Food neophobia. "Food neophobia is defined as the reluctance to eat new and unfamiliar food (3,4). It is characterised by avoiding or refusing to have foods, that one has not had before and could be due to various factors (5). Some of the factors mentioned in literature that reduce food neophobia in individuals are exposure to other societies and cultures, living in metropolitan cities, having a supportive environment, gaining more knowledge and personal experiences related to food, frequent travelling, increased education and income and familiarity to one's community or society (5,6) Majority of the factors mentioned in the literature that influence food neophobia are socio-economic. Studies that have been done on children report that onset of neophobia early in life is determined by the number of foods disliked or never been tried before 8 years of age (7). Inferring from these studies, existing literature has very few evidences for psychological factors that may affect food neophobia. Hence in this study wants to understand the possibility of psychological factors contributing to the reduction of neophobic behaviour towards food. The study focuses on exploring a relationship between Well-being, Intercultural sensitivity and Food neophobia.

1.1. Theoretical Framework

Plenty of evidences show that food neophobia reduces healthy eating and is inversely linked to healthy preferences or healthy food choices. On an evolutionary basis, referred to as 'Omnivore's Dilemma', which states that "we balance the need to explore novel foods with the risk of consuming something toxic" (8) Food neophobia is varied in an individual

* Corresponding author: Amelina Sneha Maliekal

according to the experiences that they are exposed to through the years of toddlerhood, preschool years and then throughout childhood, seen at peak during toddlerhood and preschool years and gradually decreasing through childhood (7). Studies report that, post their first year of life is when children start to reject certain kinds of food and are more alert concerning food (9–11). Neophobia towards food is caused predominantly due to genetic predispositions but the way it is shaped in adulthood is through environmental exposures and social learning (7). It is considered different from 'pickiness' in children, for the fact that it is more inclined to genetic predispositions and that the reluctance is only limited to novel and unfamiliar foods, which is not the case when it comes to picky eaters (7).

1.1.1. Food neophobia and dietary quality

Individuals who are neophobic towards foods tend to prefer unhealthy foods over healthy ones, they have a reduced liking towards the act of eating itself and it is a barrier towards healthy food choices (12). Why is it important to have at least good enough healthy preferences of food, and high-quality diets? Evidences from previous studies show that people who incorporate healthy foods in diets were physically and psychologically fit. Recent study shows that individuals practicing vegetarianism has lower levels of neophobia and healthy eating patterns (13). Study also shows how daily intake of 5 servings of fruits or vegetables was related to lower psychological distress (2). On the other hand, there are studies that report on how high consumption of refined sugars, saturated fats, and low dietary content of fruits and vegetables are associated with development of depression and how individuals with diabetes score low on overall positive well-being compared to non-diabetic individuals (14,15). These evidences show what a disadvantage it could do on a person's mental health and well-being if not had the best or the better choice of foods in their daily life. Study shows that promoting a healthy diet with healthy fats, whole grains and a variety of fruits and vegetables not only would benefit mental health but also helps in improvement of chronic conditions (1).

1.1.2. Fostering Familiarity towards Novel foods, incorporating PERMA.

The study uses PERMA model in its theoretical framework to measure well-being on the basis of all major areas in an individual's life. PERMA incorporates areas like; "Positive emotions, Engagement, Relationships, Meaning and Accomplishment" (16). Literature has studies that support how few of its dimensions support in familiarising with food and developing healthier food choices and eating habits, which can be an indication of reduced food neophobia. The first dimension and pillar of well-being, positive emotions, are highly significant when it comes to well-being. Emotions also have significant link with food according to studies in the recent years (17). Specifically, it was found that positive emotions positively affect healthy food consumptions and engagement in food behaviours, whereas negative emotions strongly promoted the choice of unhealthy food (18,19). From evidence of these studies it is found that positive emotions do have an effect on healthy food consumption.

Study by Finistrella et al., in 2024 shows how positive memories build around food helps to reduce food neophobia from an early age. The study also gave focus on social learning, that, if children were to frequently experience their parents or peers enjoy eating unfamiliar food it would impact their way of approach towards food, in a positive manner (7). Study by Addressi et al., shows that children tend to show more food acceptance when they were present in a context where their parent was there and was eating the same food with them (9). We could infer this to associative learning, where there are evidences on how food was positively seen after associating with positive environment through improving the food hedonics and also eating together with peers and parents (7). Recent research does explore on how the same is influential in the case of young adults and ages above. A study done on university students in Germany found that those students living with their families has a more balanced diet compared to those living independently and it also reported that family eating practices influenced these students food choices and more generally their food-related well-being (20).

Meaning of life or the sense of purpose might not seem like an obvious indication to healthy food choices or eating behaviours. Research suggests that having a stronger sense of purpose or meaning in life acts as a protective factor for health (21). It was seen that people with higher sense of purpose consumed adequate servings of vegetables or fruits daily (21,22). The probable explanation for this link is that people with higher sense of purpose are motivated to take care of themselves in both physical and psychological aspects through methods like healthy eating and balanced diet (23).

1.1.3. Intercultural Sensitivity and Trying Novel Foods

Intercultural sensitivity is still an important aspect to explore on because as said by Leon Rappoport: "Consciously or not, when we eat we swallow not only a certain alimentary product, but also the concept, the culture, and the land to which it is associated with" (24). Acceptance of novel foods comes with acceptance of that culture and the ability to admire and acknowledge that particular culture. Study shows how exposure to the culture and admiration towards it

also promotes consumer acceptance and purchase intentions for that particular cultures food (25). Intercultural sensitivity as defined by the Chen and Starosta model of 'Intercultural communication competence', is, "the affective dimension of intercultural communication competence that refers to the emotional desire of a person to acknowledge, appreciate, and accept cultural differences" (26). In a country like India, where language, art, people and cuisine in itself is diverse, only miles apart, different yet holding a common essence, it is more sensible to study Intercultural sensitivity of young adults here. As defined by Chen and Starosta, 'Intercultural sensitivity' is an affective dimension and includes components like; 'self-esteem, self-monitoring, empathy, open mindedness, non-judgemental and social relaxation'. (26,27). Intercultural sensitivity has very less literature on its relationship with food preferences. Studies that are available are on cultural acceptance of different kinds of foods and culture, and its role in food neophobia. Unfamiliarity towards food is more relevant in the context of cultures other than their own, which makes this variable suitable for studying food neophobia.

1.2. Aim

To determine the association of Well-Being and Intercultural sensitivity on Food Neophobia in Indian Young Adults.

1.3. Hypothesis

- H1: There is a significant relationship between Well-Being and Food Neophobia in Indian young adults.
- H2: There is a significant relationship between Intercultural sensitivity and Food Neophobia in Indian young adults.
- H3: There is a significant difference in the mean food neophobia scores of males and females.

1.4. Gaps in Literature and Significance of this Study.

Through existing literature we can understand that food neophobia becomes a barrier to healthy eating and physical well-being. Barriers like these can be overcome using factors that foster familiarity towards novel foods. Previous literature focused on social and environmental factors, and only few studies have focus on psychological factors like well-being and intercultural sensitivity. Well-being is achieved by enriching different areas of one's life, and these areas bring about changes in how food is viewed and familiarity towards it is made. Intercultural sensitivity contributes to lesser reluctance by improving individual's acceptance towards different cultures, thereby improving their view about novel foods of these cultures and increasing familiarity. Finding associations between these variables helps in informing possible interventions in the future. Interventions aiming at promoting culinary sharing experiences and food exploration in a safe and familiar social context helps in reducing food neophobia and also improves the quality of food-related life for individuals (20). The possible findings can be seen as pointers that helps in making therapeutic interventions of better quality for the future (1). For this very reason, interventions that rectify or reduce neophobic behaviour must be encouraged. Therefore, this study becomes relevant in the context of improving health, by enriching the quality of food choices and diet.

2. Method

2.1. Research Design

The study follows a quantitative approach and uses a correlational research design, with the objective of finding relation between the variables Food neophobia, Well-being and Intercultural sensitivity.

2.2. Participant Characteristics

The sample population considered for the study includes participants from India who are young adults from the ages of 18 to 30. This age range is given importance in this study because statistics show that individuals below 30 years of age or between 20's and 30's are more open to try different kinds of food, from different cultures. Individuals with any Physical or Psychiatric disorders that causes them to restrict any kinds of food were excluded from the study (food neophobia could be present due to dietary confinements in these individuals)

2.3. Sample Size and Technique

The sampling technique used to collect data from the sample population will be convenience sampling. The sample size is 310.

2.4. Measures/ Instrumentation

2.4.1. Socio-Demographic Details

Questions about the Participant's Initial, Gender, Age, Educational Qualification, Current status was enquired.

2.4.2. PERMA Profiler (2016)

The PERMA Profiler was developed by Julie Butler and Margaret L. Kern b in 2016. The profiler is based on the PERMA model developed by Martin Seligman. PERMA constitutes of 5 pillars of Well Being; Positive Emotions, Engagement, Relationships, Meaning and Accomplishment. The tool has 23 items overall, scored using 11-point-likert scale. PERMA Profiler has a reliability of 0.914. The measure demonstrates acceptable reliability, cross-time stability, and evidence for convergent and divergent validity. (16)

2.4.3. Intercultural Sensitivity Scale (2000)

The Intercultural Sensitivity Scale was developed by Guo-Ming Chen and William J. Starosta in the year 2000. It is a 24-item scale, which includes five subscales such as; Interaction engagement, Respect for cultural differences, Interaction confidence, Interaction enjoyment, Interaction attentiveness. Intercultural sensitivity is one of the components of Intercultural Communication Competence model proposed by Chen and Starosta in 1996. Intercultural sensitivity is the emotional dimension of the model, which refers to the emotional desire of a person to acknowledge, appreciate, and accept cultural differences (26). Reverse scoring is present. The reliability of the scale is 0.86. (28)

2.4.4. Alternative Food Neophobia Scale (FNS-A) (2022)

The FNS-A scale was developed by Henriette L. De Kock and colleagues in 2022. This scale measures the range of food neophobia; high or low reluctance to have unfamiliar foods. The scale is a modification of the original Food Neophobia Scale developed by Pilner and Hobden in 1992. FNS-A consists of 8 items, 4 of them positive statements and rest 4 negative. The responses are evaluated using a 7-point-likert scale with responses ranging from disagree strongly (1) to agree strongly (7).

2.5. Procedure

The data collection was done using the convenience sampling technique. The data was collected through Google Forms and an Informed consent was provided before proceeding to the survey. The total number of participants who entered the survey was 343, from which participants who were not interested to take part in the study, those who were Non-Indians, and participants who had dietary restrictions were excluded. The finalised set of participants is 310 in number, with an average age of 22.9 years. The survey included questions that gathered the socio-demographic data (gender, age, educational qualification, employment status, nationality and enquiry about illness that restricts certain diet) as well as other standardised tools for measuring the variables.

2.6. Data Analysis

The statistical analysis of the data was conducted using JAMOVI (version 2.7.12.0.). The analysis sought to find the descriptive statistics of the dataset, normality of the data, hypothesis testing and t-tests. The study follows correlational research approach which aims to find the relationship between the variables of the study. The hypothesis testing, therefore done is to find correlation as well as understanding variations in data. The Spearman correlation coefficient was used to determine the relationship between the variables, since the data is not normally distributed. Independent Samples T- Test was conducted to understand the difference between mean food neophobia scores between males and females.

2.7. Research Ethics

Informed consent form approved by the department and institution was provided in the Google Form before proceeding to the main survey. Participants who had marked on the option 'No' to the question "Do you consent to participate in this study?" were able to exit the survey without any disturbance. The participation is hence considered entirely voluntary.

3. Results

Table 1 Sociodemographic Characteristics of Participants

	n	%
Gender		
Female	232	74.83%
Male	76	24.51%
Other	2	0.64%
Educational Qualification		
10 th	6	1.93%
12 th	30	9.67%
Undergraduate	123	39.67%
Postgraduate	142	45.80%
PhD	2	0.64%
Other	7	2.25%
Employment		
Student	210	67.7%
Unemployed	19	6.12%
Employed	81	26.12%

n- number of participants for each category.

The study includes 310 participants with 76 males, 232 females, 2 other genders, with an average age of 22.9 years. Majority of the participants are students (67.7%) with 45.8% of them being postgraduate students, 39.67% of undergraduate students and less than 10% of participants pursuing PhD, 10th, 12th and other types of education. 26.12% of the participants are employed and 6.12% of participants are unemployed.

Table 2 Spearman's Correlation Between Well-being and Food Neophobia

		Well Being
Food Neophobia	Spearman's Rho	-0.109
	df	308
	P -value	0.055
	N	310

Note: df- Degrees of freedom , N - number of participants

Table 3 Spearman's Correlation Between Intercultural Sensitivity and Food Neophobia

		IS Scale	Food Neophobia
IS Scale	Spearman's Rho	-	
	df	-	
	P-value	-	
	N	-	
Food Neophobia	Spearman's Rho	-0.432***	-

	df	308	-
	P -value	<0.001	-
	N	310	-

Note: ***p <.001. IS – Intercultural sensitivity.

Table 4 T-test for comparison between males and females.

		Statistic	df	p	Mean difference	SE difference
FNS Scores	Student's t	-0.620	306	0.536	-0.764	1.23

Note: N= 308 (Gender other than males and females were excluded due to insufficient sample size.) Independent Samples T-Test was performed.

The Spearman's Rho between the variables Well-being (Independent variable) and Food Neophobia (Dependent variable) were found to be -0.109 and p-value 0.055. The correlation is negative but weak and it is not significant at .05 level. The Spearman's Rho between the variables Intercultural Sensitivity (Independent variable) and Food Neophobia (Dependent variable) were found to be -0.432 and p-value <.001. The correlation is negative and moderate. The results are statistically significant in the .05 level.

The statistic of Student's t test (Table 4) is -0.620 and the p-value is 0.536. The results show that there is no significant difference between scores of males and females as the p-value is not statistically significant at the .05 level. The mean difference (-0.764) is minimal to claim that food neophobia differ across gender.

4. Discussion

The study tried to explore some of the factors that may facilitate familiarity towards food and sought to understand factors like well-being and intercultural sensitivity. Previous studies focused more on socio-economic factors effecting food neophobia, very few studies mention on the psychological factors that affect food neophobia. This was considered as a literature gap and was investigated in this study. The study hypothesized that well-being and intercultural sensitivity will have a significant relationship with food neophobia. The study also investigated whether food neophobia is similar across gender.

The results of the study found that well-being does not have a significant relationship with food neophobia, although the direction of the relationship, which is negative, shows that an increase in well-being associates to slight reduction in food neophobia. The p-value of the relationship between well-being and food neophobia is .055 which is not significant in the .05 level. Hence the claim that well-being associates with low food neophobia cannot be strongly affirmed. As found in previous literature, it is possible that well-being as a whole might not directly impact food neophobia, instead, few of its components might, either relationships or positive emotions (12). It is not necessary that low food neophobia improves overall dietary quality (30). Hence, it is possible that well-being helps in healthier diets, but not necessarily reduce the reluctance to try new foods (30,31).

The findings on relationship between intercultural sensitivity and food neophobia reveal that, intercultural sensitivity has a moderate negative significant relationship with food neophobia. The p-value for the relationship between these variables was <.001 which indicates a significant relationship at the .05 level. The results therefore is strong enough to say that, high intercultural sensitivity associates to reduced food neophobia. The results of this study can be supported by findings of previous literature which states that cultural familiarity increases the acceptance of foods of particular cultures as well as reduce neophobic behaviour towards their food.

The study also investigated if food neophobia was different across genders. For this Independent Samples t-Test was conducted on male and female participants. Genders other than these were excluded from t-test due to very less sample size (n= 2). The results found no significant difference between the mean scores of food neophobia between males and females, which indicates that food neophobia occurs similar across both genders. The mean difference was 0.7 which is a very minimal difference and hence, it does not imply generalizability.

5. Conclusion

The overall implication of this study is that intercultural sensitivity fosters the non-reluctance towards trying unfamiliar foods, while compared to general well-being. Well-being does not capture specific liking and openness towards trying

unfamiliar foods in this population. But it can be considered as a limitation were future research can explore on the associations between specific components of well-being and food neophobia. This study has helped us to understand that good cultural exposure has the potential to reduce food neophobia.

Compliance with ethical standards

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Statement of informed consent

Participants consented to give information for the study by agreeing to the informed consent form provided to them through the online survey. Participants were allowed to exit the survey on disagreement to give their information, hence no data is collected from those participants. The informed consent is approved by the department and institution with which the author is affiliated.

Author's Contribution

The author has solely contributed to the writing, review of literature, data collection and statistical analysis of this study.

Availability of Data and Materials

Data Availability Statement

The data that supports the findings of this study are available from the author upon reasonable request.

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