## Food choices

The development of food choice behaviours is a complex process. It evolves over time and is impacted by biological and genetic origins as well as social, economic and personal experiences and choices. The ability to experience flavour likely begins in the womb and continues to change and adapt as the child grows and develops. Research has suggested that children are hard-wired to prefer certain tastes, associating sweet tastes as good and bitter tastes as bad. Children’s preference for sweet tastes is thought to be associated with an attraction to breast milk to accelerate early growth and development. Children then naturally reject bitter tastes as an instinctive measure to protect against ingesting poisons. Further adoption of taste and food preferences are shaped by socio-cultural, age, economic, geographical and biological factors.

### Socio-cultural factors

Socio-cultural food choices play a significant role in the development of food preferences across the lifespan. For some cultures, the preparation, serving, and consumption of food is a complex social and personal experience. From growing and harvesting food to preparing and celebrating meals together, food preferences and behaviours are learned early on and persist throughout life. For others, food choices and dietary behaviours have little social context; instead, it is just a means of eating for survival. Both positive and negative social influences can be linked to emotional eating and may lead to eating disorders and obesity.

Cultural influences can have both a significant impact on health, nutrition and long-term health risks. Income inequality, limited access to healthy foods, exercise habits and rapidly changing cultural shifts due to increased globalization can all have an impact of diet choices and both short- and long-term health outcomes. Diets that stress lower-saturated fat foods and more fresh fruits and vegetables have proven advantages, but may, in fact, be limited in some cultures due to cultural preferences, social class and income inequality.

Religion also influences food selection. Some other examples of the diversity of religions’ food preferences include the following:

* Muslims who typically eat Halal (religiously lawful) foods, consisting of fruit, vegetables, eggs and meat farmed, slaughtered and prepared under strict criteria.
* Hindus who are primarily lacto-vegetarian (avoiding most meat and eggs).
* Sikhs who are also primarily vegetarian.
* Jews who often follow Kosher dietary practices that are similar to Halal traditions.

Some of the most common examples of social food preferences and behaviours occur during the holidays. Meals during holidays like American Thanksgiving, for example, are focused more on the social experience rather than the health effects of the meal itself. The average American consumes around 3000 calories on Thanksgiving for just for dinner alone. After accounting for breakfast, snacks, drinks, dessert, and appetizers, the total calorie count for the day can easily exceed 5000 calories or more! For most people, it is not at all common to regularly consume 5000 calories of high-fat, high-sugar foods; however, in specific cultural situations, it can be normal and needs to be considered as part of a more holistic nutritional strategy.

How and where you were raised plays a significant role in food preferences, whether you recognise it or not. Athletes may also have unique dietary practices within the culture of their sport. For example, team meals the night before a competition help to build team unity and cohesion. And some families enjoy nearly all of their meals together, which helps to build the strength and unity of the family unit as well.

As we age, our dietary habits may change. As metabolisms slow and less energy is expended over the course of the day, we tend to need fewer calories to survive. The secret to maintaining a healthy weight as we age is to eat a health-supporting diet throughout the lifespan and respond and adapt to change. Unfortunately, too few people have acquired this skill.

A poor diet is common among older people, mostly due to changing economic and social conditions, such as the loss of a spouse. In general, people tend to eat less as they get older. However, even with slower metabolisms in later stages of life, it is still important for everyone to eat a balanced diet that includes all necessary vitamins and minerals for the appropriate life stage. For example, studies have shown that older adults tend to have lower dietary intake of certain vitamins and minerals, like calcium, iron, zinc, B vitamins and vitamin E, which could accelerate diet-related illnesses or health problems.

Various physiological changes, including the emptying of the stomach, altered hormonal responses, slowing metabolism, changes to taste and smell and lower physical activity all impact our food preferences later in life. Older adults should be encouraged to consume less energy-dense sweets and fast foods and choose a diet high in whole grains, lean protein, healthy fats, vegetables and fruits. Other factors, such as marital status, income, education and socio-economic status, likely play a role in changes to food preferences and food selection as people get older.