

Health Food Usage in the Federal Republic of Germany
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If one is concerned with health food usage then first some problems of definitions should be solved, but I will not tackle this in full length. Rather I do indicate it and will start with the way in which I do order the informations on health foods we did collect, that is information on:

- health food shops,
- health food product(ion)s,
- health food consumers.

In all three sections there is no distinct differentiation to other forms of

- food shops, food products and food consumers,
- but rather a continuous range.

If we look to the range of forms of food retail business in our country, there are two special types of food shops which sell the so called "health foods". One is a rather traditional form: the "Reformhaus" and the other a rather recent form "Health food stores". In the following I want to present some informations on both types of health food outlets.

- I will name them 3.1.1.1.1.1.1.

The more recent form the "health food shops" have not an uniform concept, but there are some general features:

- they are founded only some years ago (approx. not more than 5 years; at the endé of the seventies)
- they are small, simple shops;
- they offer service and give nutritional and health advice to their customers; the shop can be a communication point;
- often the shops are run by a group of people, they choose alternative forms of administration; despite out of legal reasons there might be one person the formal owner;
- they offer a limited range of foods (see table 1) with main emphasis on plant foods, especially cereals, legumes, etc
- they orientate there sortiment to certain food ideologies
 - being mostly less processed, less chemically treated foods ("Vollwertkost" - complete foods; biological-dynamic foods), which includes ecological thoughts (The Green's)

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- a third of these health food shops are orientated to vegetarianism
- and perhaps 10 % to religious food norms, like macrobiotics.
- They are named in a quite characteristic and from the ordinary food stores different manner (see list in tabel 2).
- There is only some cooperation between the different shops in the different towns, and between health food shop, health food traders and health food producers. There is one older cooperation - the "Demeterbund" (especially in the area of biological-dynamic food products) - and a more recent one: the alternative "Network".

D. P. A

According to our investigations there are about 250 health food shops in our country (Figure 1), but there is a high fluctuation (opening and closing). There are several others estimations which come to similar figures, but also one which shows a very high number of 3000 in F.R.G., Switzerland and Austria (Lit.8597). The health food shops are distributed all over our country, but not very evenly. Most of them are in towns, and only a few in rural areas.

D. P. 3

In our own investigation we collected on a random base 37 shops, which received a letter included an explanation of the study and questionnaires for the shop owner and 50 questionnaires for customers (which should be filled in the shop, collected and returned by the shop owner). From altogether 20 shops we received 638 filled questionnaires from the customers and 17 from the owners (response rate: 40%).

D. P. 0

According to our data in the average a shop has about 60 customers/day; they buy in the average for about 10-20.-DM per shopping. So our estimates for the "umsatz" per health food shop is about 150.000.-DM/year or about 40 Millions DM for all such shops, which is less than 0.04% of the total food retail in our country. There are about 100.000 regular health food consumers.

Even the highest estimations, which is 180 millions DM/year for all health food shops in Austria, Switzerland and Federal Republic of Germany (Lit. 8597), indicate that the health food stores are a tiny outlet in the ~~health~~ food business.

019 A The other, the rather traditional form for retailing health foods in Germany is the "Reformhaus". It has its background in a so-called "live reform movement" at the end of the last century, which is characterized by the beginning industrialization. At least four different movements coincident:

- Naturheilbewegung engl.:
- vegetarische Bewegung
- antialkoholische Bewegung
- Jugendbewegung

and were leading to a desire for more healthy foods.

In 1887 in Berlin a shop called "Gesundheitszentrale" ("Health Center") (sold such foods. In 1900 the first of such shops was named "Reformhaus" (this was in Wuppertal).

Around 1930 about 2000 Reformhäuser were established.

After the second world war about 600 remained in the part which forms now our Federal Republic. The reformhäuser are associated in a Verband called "Neuform", which is issuing food quality guidelines, developing marketing strategies, organises cooperation with food manufactures, and food distributors, etc.

Today there are in our country 1700 Reformhouses and about 1000 sales points in pharmacies and dispensaries.

The sales of the Reformhäuser was in 1982 more than 800 millions DM (Lit. 9411), which is considerably more than those of the health food shops.

01A 4 The Reformhäuser are as well comparatively small shops, in the average there is the sales area about 40 sqm, but the more recently opened or reorganized ones, are mostly over 100 sqm. The customer receives service and advice from a specially trained personnel. There are about 100 and more customers a day in a Reformhaus, which sales for 300-350 Thousand DM per year in the average. The sales in the Reformhouses increasing in a higher rate as those of other food stores (s. Fig. 4).

The reformhäuser can offer (via their Neuform-Verband) a sortiment of 2500 articles. Dietetic foods contribute to the total sales to 65%, drugs to 20% and cosmetics to 10%. The food sortiment is ~~xxxxxxxx~~ in principle similar to that of the health food shops, that means mostly on plant food base, like cereals, legumes, nuts, musli, special breads, etc. but the marketing is more professional.

2.1.0 In a similar study as those already mentioned for customers of the health food shops, questionnaires were sent to 100 randomly selected Reformhäuser (each received: 30 questionnaires for customers and 1 for the shop owner). In May/June 1981 41 Reformhouses responded and altogether 687 questionnaires were returned. The response rate of 24% was lower as in the case study of health food shops.

But before reporting about the results and giving information on the characteristics of the health food customers, I will give some information on the health food production in our country in general. This should give indication that the demand to health foods in our population is greater than those satisfied via health food shops and Reformhäuser.

The general food marketing has well recognized that there is a widespread demand in our population for health foods, whatever health food may mean. A range of foods, which are reported to be:

- caloric reduced,
- free of food additives (free of chemicals)
- naturally grown, biologically grown, organically grown (may be just indicated by prefixes like "Bio-", "Natur'") less industrially treated (none-white, but "brown"(rice, sugar) or "green")
- high nutrient density
- high nutritional, dietary fiber content;

are regarded by ~~German~~ many Germans as more nutritious and more healthy. The reasons for such images of these foods will be discussed in my last sections on health food consumers.

Most of the health foods are produced by ordinary food manufactures, which design new food products according to the above mentioned food images, at least change simple the marketing strategy (advertising, package design, etc.). The alternative food production is rather tiny. Only about 20.000 hectares or 0.2% of the agriculturally used area in our country bear biological, ecologically grown products (Lit.9146), this might be just enough for all health food shops. One can have some doubts whether all naturally grown products, are really produced in the declared way.

2.1.5 The increasing demand for health foods should be indicated by a selection of sales figures.

The whole branch for therapeutic foods is expanding (see Fig.5). Very good sales have cereals, also recently fiber-enriched bread varieties. Also a range of caloric-reduced foods sales well, like margarines, bread spreads and cheeses. Another area represent milk product specialities, like yoghurt, buttermilk and kefir. Not only health foods, but also health drinks are expanding, as examples figures for vegetable juices and low-caloric-drinks are presented (s.Fig.5).

Fig 5

Who buys the health food, what characterises health food users? There is certainly not a definite answer possible, because there is the whole range of consumers from totally ignorant to health food usage to completely living on alternative foods. One way to look on health food users is to characterise the customers of health food shops. As I mentioned we investigated those of the old form - the Reformhäuser - and the new form. ~~Reformhäuser~~

Fig 6

The age distribution of these customers (s.Fig.6) shows that the customers of the new health food shops are rather young people, but as well some older people buy there. The customers of the reformhäuser are in the average older than the German population. When compared with figures of another study in 1970 (Wisken,;IFAK), than the customers of the Reformhäuser were even older some years ago, or in other words, more young people find there way to the Reformhäuser.

Fig 7

The sex distribution of the customers (s.Fig.7) indicates also in health food shoppers there is the traditional picture, that women have to take care for foods, but relatively more men buy in new health food shops compared with the Reformhaus customers

Regarding the education of the customers of both types of health food shops it shows that higher educated people are highly overrepresented.

Fig 8

Much more customers of ^{new} health food shops than customers of the Reformhäuser live in alternative forms to those of a ordinary family. ^(Fig. 8) This is not simply these customers are members of a younger generation, but also it correlates with their cognitive decision to live alternatively, which includes the whole life style and not simple alternative food.

The customers were asked to report their weight and height. Since these customers are relatively health conscious people, which means also controlling weight, they should know it. Even in the average German population 65% are controlling their weight several times per month and more (EB 80); and

several studies show that people in industrialized countries report well in questionnaires their actual weight and height. (Lit.: Schlichting, P.; P.F. Høilund-Carlson, F. Quadda: Comparison of self-reported height and weight with controlled height and weights in women and men, Internat. J. Obesity 5:67-76 (1981); A.J. Stunkard, J.M. Albaum: The accuracy of self-reported weights. Amer. J. Clin. Nutr. 34:1593-1599 (1981) P. Pirie, D. Jacobs, R. Jeffery, P. Hannan: Distortion in self-reported height and weight data. J. Amer. Diet. Assoc.: 78(6):601-606 (1981) M. Palta et al.: Comparison of self-reported and measured height and weight. Amer. J. ~~skin~~ Epidemiol. 115(2):223-230 (1982) CC 25(14):201 A.L. Stewart....: The reliability and validity of self-reported weight and height. J. chronic. Disease. 35(4):295... (1982) CC25(19):176)

Dip 9

As well in another study we found such a good correlation (s. Fig. 9; EMSIG-Literatur - Abschlußbericht)

Dip 10

So we trust the reported weight and height data of the customers of the health shops. The data (s. Fig. 10) show that especially the customers of the new health food shops are rather slim, ~~they~~ about half of them have relative weights which is below 15% of the BROCA normal weight. The customers of the traditional ~~of~~ "Reformhaus" are not as slim, but we find much less ~~weight~~ overweight compared with our average population. The more older the customers than relative more overweight can be observed, ~~an~~ relation which is quite common. A conclusion of these particular weight-height data: The customers of ~~health~~ health food shops are not looking for overweight-treatment, may be they want to prevent it.

Dip 11

If one looks to data ~~on the~~ of the consumer behavior of the customers, it is obvious that more customers of the Reformhauses buy already for quite a long time there; the new health food shops are rather new as mentioned before (s. Fig. 11)

Dip 12

In both forms of health food shops the customers are buying mainly cereals and cereals products, as shown in Fig. 12. From the products offered in both forms, there are remarkable differences, that especially oil and margarine, but also juices are bought in Reformhauses, whereas more musli components ~~and~~ dried fruits and nuts are bought in the new form of health food shops. The demand is not very much depended on factors like sex and age. Only in the new health food shops the younger customer (the first time customer) tends to buy more books (information) and musli. It seems that musli is the ~~entry~~ "Einstieg" in the new health food consumption.

910 13

The purchased amount shows a wide distribution (s. Fig. 13), but not much differences between both types of health food shops. About a quarter to a third is buying only a small part of their monthly food there, but another quarter buys the majority of all foods in these shops. The older, the longer one is a customer, the more is bought.

Only a small part of the customers - (21%) - buys sometimes in a ~~new health food shop~~ ^{Bioladen} ~~shop~~. The customers of the ~~new health food shops~~ obviously have had to look for alternatives to buy health foods. 73% of them state they tried to get them from somewhere else (including Reformhauses) before the Bioladen was opened. The Reformhauses are well known food shops, the new forms naturally are less well known, but only a small part of their customers got information about them by advertisements in newspapers and similar information outlets - less than 10%. 54% received the information from friends or colleagues; another 36% did know in principle about such shops, and were particular asking for it, and 25% just noticed it by passing it.

When considering how much time a customer needs to reach health food shops, then there is no much difference to ordinary food purchases. Most of these shops are situated in the city or in direct vicinity to it. Only some older customers, who tend to buy most of their daily food there, tend to spend some more time to reach such a shop.)

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As one could expect the food habits of the customers of the health food shops have quite different food habits than the average German population. The customers of the Reformhauses were asked for the preferences for vegetables, milk, eggs, fish and meat. And as you can see from fig. 14, the majority prefers vegetables and milk, whereas the other three animal foodstuffs are rather low rated. The German consumption figures indicate that meat and eggs are very highly appreciated by the general population, and there is a reduction in cereals and milk consumption. Most of the customers of both ~~types~~ types of health food shops state to follow a certain diet, which is self-selected and mainly a form of a vegetarian diet, being mostly "Vollwertkost" and lacto-vegetarian (s. Fig 15). As comparison 15% of the German population state that their doctor prescribed them a therapeutic diet, 24% state they tried to

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loose weight (EB 80). There are no figures how much keep such or another diet, but certainly its a small percentage. In the ~~new health food shops~~ ^{bio} one can find as well customers who follow anthroposophic based diets and macrobiotic diets. ~~the~~ ^{Some} customers of Reformhauses ~~do~~ follow prescribed diets, including overweight reduction, which is rare to find in the customers of the bioshops.

There is no difference in food habits of these customers regarding male and female. The older the customers are the more they follow a certain diet. Customers who state to follow strict a certain diet buy ~~relative~~ more foods in these shops than other customers, who do not follow dietary regulation.

When the customers where asked to name reasons for their stated dietary habit, they ~~do not~~ mention many cognitive reasons, and comparatively few affective ones. There are concerns about their health and about the dangerous environment. Better taste is also stated quite often, but too a far less degree as when asked the average population (s.Fig.16).

DID 16
S. M

Next ranking are ethical and religious reasons. The customers of Reformhauses state rather often also tradition as reason, this obviously has to application for the customers of the new form of health food shops. They name personal reasons, friends are doing the same; but also concerns about the world food situation. Very similar answers are given to the question for the reasons for buying in such shops (s.Fig.17) They confirm the above made statements.

DID 17

(*)
S. M

Since the health food customers represent customers, which are ^{more} cognitive and ^{more} rational acting; and since they are above average educated, it is not surprising that they are much more looking for health and nutrition information than the ordinary, average German citizen. They ~~use~~ sources for their information are much more books ~~or~~ and talks in these shops, and less mass communications and personal talks with friends and physicians. ^(Fig. 18) This indicates not only that they do not regard much the nutritional competence of German physicians (which might not be a mistake), it indicates also their ^{aim-} directed information processes.

DID 18

These informed, cognitive based acting customers of the health food shops are not just buying and consuming special foods. There are deeper rooted motives.

~~Food habits~~ Eating food, the food, the food habits are involved with many thoughts and habitual ~~habits~~ actions. The French anthropologist once formed the expression of "nutrition is a total phenomenon".

People have ~~images~~ and beliefs related to foods, rather than knowledge about their objective properties (like nutrient content and ~~safety~~ content and action of food additives). Foods can be indication of a life style, indicate an affiliation to a certain group. Foods have a social meaning and give a social message.

As well using the concept of Levi-Strauss one can see a relation between nature and raw, unprocessed foods on one side, and on the other side cultural, technological aspects and processed, converted foods.

There are several indications that relevant parts our society are concerned what mankind is doing, sees and foresees problems with our recent progress in technology. Comparative studies of the Internationales Institut für Umwelt und Gesellschaft, Wissenschaftszentrum Berlin show that we Germans have most ecological concerns, also doing most in some individual actions (collecting empty bottles, newspapers for recycling, etc.), but have less political engagement. Nevertheless first time ecologists (the Grünen) are members of our Parliament.

These concerns ~~with~~ and re-thinking of the life-styles is related to ~~general changes~~ changes with consumer behaviors in general. It can be observed that goods are less evaluated according their status symbol and prestige (as some years ago), but aspects like quality, usefulness and ecological-appropriateness are appreciated (Prognos, Basel). ~~In~~ This general concerns can be seen in many aspects, concerns about nuclear energy - looking for alternative forms; concern about the many arms and missiles, concerns about the way we travel, we live in houses we express our social relations. For many people a reaction is back to nature, or fearing about man-made actions and substances. More Germans trust as first aid more traditional, natural medicine (33%), as ~~drugs~~ pharmaceuticals (27%) (Allensbach, 1982)

Recent public opinion surveys in our country show that 93% ^{polls} ~~are~~ ^{of the housewives} favouring natural grown, health foods. There is much prejudice in it, ~~since~~ only 60% have tried at least once biological grown fruits and vegetables. 84% give those foods a higher value in health and 51% in taste. The younger population comes to even higher figures (EMNID, 1982) (SAMPLE, Hamburg).

The typical health food user is certainly ~~y~~ still a extreme in the whole range of concerned people. Many of our population is somehow sensitiv for these discussions and thoughts, but consequent changing of habits is a different thing. Only about 1/3 of the asked people in the above mentioned surveys would spend more money for the healthier biological foods. Certainly even less are willing to go to special shops to buy such foods. Many factors in addition to the ~~gh~~ higher prices hinder the majority to act in this way, e.g. the unaccustomed shop environment and the fear to confess to have an alternative lifestyle. The market as a whole for health foods certainly will expand. If people can buy in a ordinary food shop, in a supermarket of such foods, they will do! One can observe that "nature" and "bio" is commercialized. But this can be done only to a certain point, since natural products cannot be mass products. There would come a gap of confidence. Nevertheless since health foods are not isolated but rather inbeded in general re-thinking about our lifestyle it seems that they are not a temporary fashion. The same seems true also for the new health food customer. Certainly such consciousness-acting people will not become the majority of a population, but rather a minority, may be an elite. They might in absolute terms increasing, but for total food sales it will be a small share in next years. The mass of the population can only be fed when masses of food are produced, that will have ~~EVER~~ sings of technology, which opposes ~~the~~ concerns of the alternatives.

An really alternative food production which could contribute a good share for the food demand of our population, could to my opinion only be possible when the general lifestyle would change dramitically, and this is not foreseeable for the next years.

(*) Einschub für S.8

The customers of the Reformhauses and of the new health food shops might have different mental concepts about their way of life. Both movements ~~might~~ have different origins, but common is that there are ethical, religious and life-style (including political and ecological) concerns.