HAL
open science

The supply strategies of health food eaters

Camille Adamiec

To cite this version:

Camille Adamiec. The supply strategies of health food eaters. Review of Agricultural, Food and Environmental Studies, 2018, 99 (1), pp.77-96. 10.1007/s41130-018-0071-z . hal-03114748

HAL Id: hal-03114748

https://hal.science/hal-03114748v1

Submitted on 19 Jan 2021

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers.

L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.

Rev Agric Food Environ Stud (2018) 99:77–96
https://doi.org/10.1007/s41130-018-0071-z

RESEARCH ARTICLE

The supply strategies of health food eaters

Camille Adamiec[1]

Received: 8 February 2016 / Accepted: 23 April 2018 / Published online: 4 May 2018
© INRA and Springer-Verlag France SAS, part of Springer Nature 2018

Abstract What are the supply strategies implemented by people who are interested in health food? How do the supply methods of the respondents reveal the moral values linked to health food? Is it possible to find compromises between individual contexts, financial and social constraints, and market evolutions, and which shape do they take? My initial hypothesis was that the places where health food eaters stock up on supplies would be homogeneous. However, my observation of consumers' daily practices has revealed a much more diverse range of supply practices, showing a complex cartography of places of supply and purchase. Based on the ethnographic trajectories of families who consume health food, this article shows that people arrive at different trade-offs depending on the points of purchase where they buy food and on the kind of food they are looking for. Brands and labels, for instance, which have no impact when it comes to shopping at the market or through a food basket system, are regarded as a safe solution when it comes to shopping in a conventional shop. I will insist on the importance of setting research on food supplies back in the same framework as studies on food consumption, in order to avoid creating a divide between a financial choice and a moral choice of incorporation. This conclusion will lead to a reflection in the conclusion on the possibility for people who consume health food to turn to hybrid and reflexive compositions in their food supply methods.

Keywords Health food · Becoming healthy · Supply · Morals · Values · Quality · Confidence · Labels · Local · Proximity · Involvement

Introduction

For a long time, health food has been studied mainly through the lens of medicalised diets. This medicalisation refers to the way the medical world intrudes onto social

✉ Camille Adamiec
adamiec_camille@hotmail.fr

[1] Laboratoire Dynamiques Européennes_CNRS_UMR 7367, 5 Allée du Général Rouvillois _ CS 50008, 67083 Strasbourg Cedex, France

domains that were hitherto little affected by any scientific rationale or discourse, and its application in the field of nutrition can be seen in the work of Fischler (1990), Hubert (1990), Corbeau and Poulain (2002) and Poulain (2002, I, ii). Food sociologists and anthropologists have shown that nutrition is often besieged by such medicalisation, which results in an exacerbation of the health dimension at the expense of others like pleasure or culture. They highlight how this has created a context where nutrition is increasingly incriminated as the cause of a number of pathologies such as obesity, cancer or cardiovascular diseases, and they analyse current tendencies that link sanitary problems to the care people take of themselves and of their health. American and Anglo-Saxon research on "functional food", "organic food" and "health food" describe the complex relationship which North American individuals and societies have with food and health. From the 1990s onwards, the health food practices of certain marginal social groups have been apprehended from a sociopolitical angle, as a stance against industrialisation or globalisation, and a concern linked to ecology and health (Belasco 2007; Lupton 1996). American and Anglo-Saxon researchers have thus examined the links between food and health not only through medicalising approaches (Lupton 1994; Williams and Calnan 1996), but also as an important aspect of the emerging counter-cultures (Guthman 2003).

This study constitutes a continuation of these approaches by looking at the way certain individuals establish links between food and health. I will question the knowledge and practices they put in place in order to feed themselves and to look after their health. I will also describe and analyse individual as well as collective attempts to reconcile and hybridise these two fields.[1] In France, in a context of collective preoccupation and increased vigilance concerning food, I will posit that the relationship between food and health is central, and I will therefore use the expression "health food" to emphasise this connection. In French, the expression is "*alimentation-santé*", and the hyphen between the two terms underlines the way both of these complex issues are intertwined. The French term thus highlights the relation, the tension and the conflicts raised by this element, which sociology describes as structuring, prescriptive and normative.

In the first number of the OCHA[2] papers published in 1993 under the title *Le bon et le saint* (*The good and the holy*), Fischler already pointed out the extent of a growing phenomenon: how the modern individual was entering a "food cacophony", with which he referred to a confused profusion of prescriptions and precautions among which people can barely find their way. These sanitary and food morals, having become more and more restrictive, are based on precautions and commandments about what people "should" be doing. Carried across through rhetoric of confidence and quality, these judgements give a "moral" meaning to their objects—in this case food—in the sense that they are applied to judge people's customs and habits. This means that the rhetoric on what tastes good and what is good for the body continues to be governed by morality: "if what is good is not always considered to be healthy, what is healthy is almost inevitably saintly" (Fischler 1993, p. 6). The categories used by the people I

[1] Fieldwork carried out in France, more particularly in the Alsace region, between 2010 and 2014, as part of a doctoral study entitled "Becoming healthy. Eating habits, health care and self-care," submitted in November 2014 and financed through a doctoral contract with the University of Strasbourg

[2] *Observatoire des Comportements et Habitudes Alimentaires*—Observatory for food attitudes and habits.

interviewed overlap, and there is confusion between "health food",[3] "sustainable food" and "local food". The medicalised and egocentric morality related to food is trying out new names to turn into an altruistic and ecological food ethics (Adamiec 2015). In Germany, the research carried out by the Padilla Bravo team (Bravo et al. 2013) underscores how altruistic motivation is the primary motivating factor for consumers to buy organic food and to shop in certain ways, which implies that sociodemographic variables are less important than axiological arguments in understanding these consumers' behaviour.

Supplying food has long been overlooked in studies on eating, while it is a key stage in understanding the incorporation processes inherent to eating (Corbeau 2008). Finding supplies consists, firstly, in finding fresh food, by buying it in the places where it is stocked and sold. People's food supply is therefore intimately linked to questions both of economics and mobility (Vicart and Wathelet 2016). However, choosing, buying, transporting and stocking are all stages in a process of identification and classification that also implies the body of the eater. Finding supplies is the crystallisation both of the challenges eaters face and of the risks and dangers inherent in the imminent fusion of the food with the eater's body (Fischler 1996).

Our initial hypothesis was that, when looking for food supplies that correspond explicitly to the norms and values of health food, I would see some homogeneity in the places where that type of food is bought. However, the respondents' daily practices revealed a far more complex geographical distribution of places of supply and purchase. What I observed corresponds with a French quantitative study led by NutriNet Santé, which highlights this diversity in places of purchase both for "conventional" food hopping and for people are said to eat "organic" food (Kesse-Guyot et al. 2013). I therefore believe that the main determining factor in the way health food eaters select their places of purchase, whatever the place and the occasion, is the extent to which such places allow them to confirm their commitment to the values attached to health food, rather than any other particular features of the places and shops they visit. These shoppers' places of purchase range from points of sale that function with food baskets, over markets and conventional shops, to shops that specialise in organic food, and these consumers attempt to liberate themselves from the economic and moral logic that has been traditionally applied to such places, and to create a different one so that each of the locations they visit corresponds to their food principles.

We will first explain the methodology underlying this research project, including the challenges inherent in restricting its range to urban and border-country environments, as well as the characteristics of the population I studied, i.e. eaters from diverse socioeconomic backgrounds who take an interest in health food and share a critical stance when it comes to knowledge (1). Secondly, by studying the ethnographic trajectories of families who consume health food, I will point out the differences and the similarities in the supply trajectories followed by these consumers (2). I will then look at points of purchase that function with food baskets and markets. The interviewees favour both types of places of supply, because they are built on the ideal of removing all intermediaries in the relationship between the product and the eater. The system of supplying food in baskets stands out

[3] When sociologists use the term "healthy", this does not imply any positive or negative value judgement on the observed practice. Qualifying something as healthy underlines the fact that I approach my respondents' incorporations from the perspective of health, while also highlighting the moral and normative aspect of their behaviour.

among other types of supply since they require some involvement from both the eater and the producer. They are the materialisation of "the principles of an 'associative' economy characterized by the reflexive nature of both the producer's and the consumer's involvement" (Lagane 2001). Outdoor markets, on the other hand, are perceived by health food eaters as a less constraining method of supplying food. It is where they find the pleasure of a commercial trade relation that materialises through monetary exchanges (3). Next, I will examine both natural and organic food shops, and conventional shops. In spite of their a priori incompatibility, the respondents' practices reveal that these two places of purchase turn out to be complementary, as they both play on the argument of proximity (4). Finally, I will see that deciding on places of purchase and on the food supplies that are found there is determined through different processes. Labels that are felt to be of little use at the market or in the food basket system become a safe recourse in conventional shops. They are described by my interlocutors as "the least bad choice" (5). As a conclusion, a discussion of the hybrid and reflexive nature of supply strategies, as well as the paradoxes which the supply practices applied to health food bring to the fore, will be discussed.

Health food and health food eaters

For the purposes of this research project, which ran from 2010 to 2014, I opted for a qualitative study and for fieldwork carried out over a long period of time. During the first stage of the project I observed places of supply and purchase as well as places where people meet and communicate about food and health. The second stage of the project consisted in interviewing 62 people (21 men and 41 women, i.e. two thirds). These interviews were followed up by ethnographical observations over the course of a year of four families, combining food and health matters on a daily basis. These four families were distributed over urban and suburban zones of the Strasbourg area, and were diversely composed: one couple, one recomposed family, one family with young children and one family with children who were teenagers at the time. Two of these four families had previously participated in the first stage of the enquiry, which allowed us to collect long-term data stretching over a period of more than 2 years. Every family was visited at least four times, which represents about 90 h of observations and interviews. The transcriptions allowed us to carry out a fine analysis of the ways in which various family cooking practices are put in place in a variety of situations. My observations and interviews were structured according to a protocol that was established following Desjeux's method of trajectories, as applied to ethnomarketing. This approach implies varying situations and times of the year: meals made for special occasions, daily meals, winter food shopping and spring shopping, etc., and, for some families, focusing on one object or one type of food, as an angle from which to analyse the entire range of social interactions it sets in motion. These observations demonstrate how complex this decision making is, and how wide the gap between what was said during the interviews and the actual situations of daily life.

Where to enquire?

We chose to focus on France and to zoom in particularly on the Alsace region and the city of Strasbourg. My choice of this border region, and of a city that is close to the Rhineland region, was motivated by the specific position which the German and Swiss

regions hold in terms of health food. The position of Strasbourg with regard to these territories allows us to take into account the numerous mutual influences exercised in this field, and to involve "mobile" eaters in my research, i.e. people who work across the border, who get food supplies in German supermarkets, pharmacies and shops, and spend leisure time in Germany and Switzerland, and whose parents or grandparents have provided them with knowledge about health care in the Germanic culture. It seems opportune to carry out research in urban areas because it allows us to take a variety of shops and situations into account. Strasbourg is particularly well placed in terms of organic shops of various brands, and the network of food basket providers and community-supported food suppliers is quite considerable for a city of its size. This diversity allows the researcher to better apprehend the specifics of the choices consumers make in terms of food supplies.

How were they found?

Since food is the door through which one can best reflect on the links between food and health, I listed the various networks in Strasbourg that distribute specialised food, assuming that beyond the specialised aisles of conventional shops, people who eat health food have practical and symbolic reasons to shop at natural and organic food shops, as well as making use of AMAP-type food supply networks.[4] When visiting these places, I invited the people there to exchange with us in individual interviews about the links between food and health. This means that I interviewed a specific type of consumer, namely consumers who are concerned about their health. This part of the enquiry cannot therefore shed the effect of "social desirability",[5] but that can be taken into account by intensifying the relationship with the respondents and by varying the methods of approaching them.

Which criteria for the selection of respondents?

Having read a vast theoretical corpus, I formulated the following hypothesis: in a society that cares about food and health, there are various ways to live, practice and think of the relationship between health and food. One of these is to show and discuss the practices that are developed around an increased awareness of the health implications of our food choices. I then began to search for people who put this tenuous link into practice on a daily basis. The people I interviewed include individuals between 20 and 45, men and women, living in the Alsace region. I met with both women and men in order to question the gender-based aspects of people's relationship with health food and with a healthy body. I interviewed people of various ages, mainly between 20 and 60 years old, in order to show how differences in age affect different interests in health food, and to confront different "generations" of eaters and the development of their involvement over time. On a professional level, I also wanted to interview both people who were fully employed and people whose jobs and situations were more precarious.

[4] Translator's note: *AMAP* stands for Association pour le Maintien d'une Agriculture de Proximité – Organisation for the preservation of proximity-based agriculture. This is comparable to community-supported agriculture.

[5] The term here is used to mean "matching a person's observed or anticipated behavior with the motivations or emotions attributed to the typical members of a social group" (Pansu and Beauvois 2004, p.71).

This gave us access to a population with very diverse incomes, and disposing of various amounts of time to occupy themselves with daily tasks.

While this was not a preliminary selection criterion, one of the discoveries I made during my research is linked to the level of education of the people I interviewed, as well as to the various jobs and incomes they had. Though it is often claimed that health food is restricted to wealthy people, this study shows that the commitment with which eaters link food to health is not so much in correlation with their income as with their competences and with a critical attitude towards knowledge in general. The 62 interviewees belong to socioprofessional groups that include executives, intermediary professions and employees, and have diverse levels of income which vary with their jobs. Depending on the time I interviewed them, some of them had been through considerable professional changes, going from lower-ranking employees in large public administrations to positions of teachers or engineers. Students are also a very mobile category. I chose to characterise them essentially based on their student status, which is also the status through which they presented themselves to us. However, a number of these students also had jobs, working as employees or undeclared workers in activities that changed with the seasons, with temporary constraints, or with personal situations.

What is the social status of these individuals?

The individuals I interviewed all shared the fact that they had obtained an education (from high school diploma to 8 years of graduate and postgraduate studies). This characteristic, while it says nothing about the level of their income or the jobs they have at the moment, does have an influence on the connection they have with knowledge.[6] These are people who search for information and feel a constant need to renew their knowledge, and the ways in which they actively satisfy this need is part of a process in which they construct a critical and reflexive attitude to knowledge. Following Bourdieu (1984) and Grignon and Grignon (1986), these elements allow us to underline the different roles played by cultural capital and economic capital in the construction of tastes and food habits. This gap has already been documented by Grignon and Grignon: "When the gap between a high level of education and a relatively low level of income is at its widest (…) there is a tendency to overconsume cultural goods and a general disposition towards asceticism, and this is translated, among other things, into a reticent attitude towards gastronomy." (1986 p. 47). Moreover, when Grignon and Grignon attempt to characterise middle class food practices when faced with food problems, they note these populations' pronounced taste for "natural" food, their refusal to consume industrial food and their interest in vegetarianism, which are all correlated with "ascetic" sports practices like yoga, walking, etc., as well as with anti-conformist cultural practices.

They write that "the reticence of the intellectual and rising fractions of the middle class is undoubtedly related, on the one hand, to a general ascetic and critical stance, which is a sublimated expression of the permanent gap between one's actual income and one's desired lifestyle, and on the other hand it relates to the impossibility of having

[6] These results partly correspond to the statistical results published by the NutriNet Santé study about organic food consumers. Organic food consumers often have a higher level of education and income compared to the "non-organic" ones (Baudry et al. 2016).

more than symbolic access to consumer modes and practices that are too expensive, which is translated in an ostentatious 'simplicity' and an ethical refusal of everything that appears 'superfluous' and 'artificial' (…) and also expresses a situation of cultural dependence, an anxious relationship, consisting both of goodwill and resentment, with the culture of knowledge and its legitimate representatives (doctors, 'scientists') which, when it comes to the body and on food, can lead to an obsessional respect for 'norms' and a fear of 'impurity' and 'pollution'" (Grignon and Grignon 1986, p. 49). This may lead one to question the extent to which the search for perfect health (Sfez 2001) and the "optimisation of the self" (Rose 2007) that characterises the practices and discourse of health food eaters might be contemporary forms of the "food malaise" which Grignon and Grignon described.

Searching for health food and finding places of purchase[7]

The interviews and the ethnographic follow-up showed that people who eat health food do not all find their supplies via the same trajectories. As the article by Devine et al. (1998) underlines, food choices—especially when it comes to health food—depend on the individual's course of life. Depending on their age, the place they live, their income, their situation and their personal and family trajectories, the way people supply their food is connected to specific modes of decision making. Since I cannot here present all the 61 supply trajectories which the interviewees described, and/or which I observed, I will here present three of them in particular.

Sandra

Sandra[8] is 38 and lives in Strasbourg. She has an 11-year-old daughter called Emilie. She lives with Jean-Patrick (40) who also has an 11-year-old daughter from a previous union, called Isabelle. Jean-Patrick is a high school teacher. Sandra works as a secretary in a public administration and is finishing her doctoral degree in the Human Sciences. Sandra goes to the market on Saturday mornings with one or both of the girls. She buys fresh produce there: fruit, vegetables, eggs, meat, fish and yoghurt. When Sandra and the girls go to the market, they combine that outing with a visit to the public library, which is situated right above the market halls. At the market, Sandra has been buying fruits and vegetables from the same producer of organic food for years. For Sandra, the price of the food she buys is a matter of importance because the family is on a tight budget. Most of their spending goes into food. They buy little or no clothes or furniture (their clothes and furniture are either gifts or secondhand), they hardly go out apart from the weekly activities in sociocultural centres and they do not have a car. Besides the market, Sandra and Jean-Patrick have a basket of vegetables produced by the *Jardins de la Montagne Verte*, a not-for-profit that organises social integration trough gardening and promotes urban agriculture. In addition to the shopping done at the market, Sandra often visits the *Magasin du Serpent Vert*, one of the natural and organic food shops in Strasbourg, to buy flour, cereal (quinoa), dried vegetables, rapeseed oil,

[7] Ethnographic data produced through ethnographic observations and interviews held between 2012 and 2014.
[8] All first names have been changed to preserve the respondents' anonymity.

peanut butter or desserts for the children. However, Sandra says that most often she has to buy these types of products in conventional shops for financial reasons. In that case, she will favour certified organic brands. The shopping she does in conventional shops like *Simply Market* is not considered to be an actual "activity". The girls never come with Sandra or Jean-Patrick, who generally go there between two other obligations. Household products for daily use are also bought in conventional shops (toilet paper, paper towels, etc.). Other household products like dishwashing liquid, washing detergent and products to clean floors and windows are manufactured with ingredients bought at the organic and natural food shop. Lastly, when Sarah visits her family in the Savoy region, the fact of having a car, exceptionally, turns these trips into opportunities to stop on her way there at cooperative farms and producers Sandra knows. She buys food or household items she cannot find in Strasbourg, as well as brands she is particularly fond of, for instance for cooking oils, cookies and soaps.

Joanna

Joanna (33) and Paul (34) have two children: Marc (2) and Elise (4). Joanna is a high school teacher and Paul works as a financial counsellor in a bank. It is Joanna who decides where the food shopping happens, depending on their respective schedules, on the meals to come and on the seasons. How and where they get their supplies is clearly determined by the kind of meal they are planning on having. For meals made for festive occasions or special meals, they shop in a larger variety of places, in search of better quality ingredients. The shopping for food on a daily basis is done by Paul, on Monday mornings, before taking Elise to school. He takes Marc with him. Paul makes a second shopping trip later in the week, on Saturdays, this time without the children. He takes the car to the supermarket that is closest to home: a *SuperU* 1 km from the house. He justifies using the car by the fact that he has to take Marc along with him and/or by the weight of the shopping bags. Paul shops very fast. He says he aims for "efficiency" in a task which he considers a chore. He always buys the same products and scrupulously sticks to the list that Joanna has drawn up. The products he buys are primarily local, sometimes organic, but rarely. Joanna and Paul buy all their dried foods (pasta, rice, flour) in the supermarket, as well as specific baby food products (yoghurts and apple sauce for babies, etc.). For all the other food supplies, Paul collects an organic food basket every week from a distribution point that is not far from where Joanna's parents live. These baskets are composed both of vegetables, fruit and also yoghurt and cheese. Joanna says she is not very satisfied with the food she buys in the supermarket but finds that for financial reasons and lack of time, and as long as the children are small, it would be difficult to find supplies any other way. In the long run, she would like to get by only on the food that comes in the baskets (maybe get two baskets) and on products from the organic shop. The other element she puts forward to justify the little time spent on shopping for food—compared to the time spent cooking or finding out about health food—is her location. Contrary to the families who live in Strasbourg, Joanna does not have any natural food shop or market in her neighbourhood. Since the couple wishes to buy an apartment in the near future, the diversity and offer of food supplies around their future home will be an important factor in their choice of a future home. In order to compensate for the supplies which, in Joanna's view, are not exactly compatible with health food, she finds home cooking and cooking together with the children very

important. Cooking often becomes a moment of togetherness, learning and transmission.

Anaïs

Anaïs is a high school teacher. When I began the ethnological follow-up, Anaïs was in a relationship with Milo (33). They had just moved into a house in the suburbs of Strasbourg. After their break up, a few months later, Anaïs moved back to Strasbourg. When Anaïs lives alone in Strasbourg, she goes to the neighbourhood outdoor market with several of her friends. There, she buys fresh produce for the week (fruit, vegetables, cheese or meat). She also shops at the conventional shop in her neighbourhood to buy cereal, dried vegetables and cleaning and household products. She buys her bread in the neighbourhood bakeries. Anaïs really likes her neighbourhood and thinks that it has a satisfying and diverse variety of food supply points. This is why she never uses her car to food shop outside of the city. Apart from the market she visits every Saturday, and for which she organises a special "moment" on Saturday mornings, the other food supplies are made irregularly, depending on her tastes. She enjoys being able to do a bit of small daily shopping and not to have to think too far ahead about what her meals will be composed of. When Anaïs went to live outside of Strasbourg with her partner Milo, she lost the habit of going to the market. There were no shops in the village they settled in. She continued to work in a school in Strasbourg and went there every day by car. The school is about 40 km from her home. Coming back home, she would stop to shop at a retail area which is composed of several shops, including a conventional supermarket-type shop and an organic and natural food shop. She would buy as many products as possible from the organic shop but, for financial reasons, she would buy meat and other fresh produce at the conventional shop. When I visited her in her house in the Strasbourg suburbs, she said she missed her previous way of life, which was more in line with her principles. However, she had decided to move to the countryside to be closer to what she called "nature". Anaïs lived for about a year in this house. When I found her again in 2014, she had moved out and had found an apartment on the ground floor. In the same way as she did when she was living in her old neighbourhood, she now only buys her food from the stalls and small shops in her neighbourhood. She tells us that she would like to find a nice outdoor market where she can buy fruits and vegetables and is thinking about becoming member of a food basket network. After her experience of living in the suburbs, which had made her much more dependent on her car, she now wants to completely avoid using it to get around, and especially for food shopping.

Baskets and the market: purchasing moral values

Choosing a basket and moral values

The food "basket" is defined as "a varied supply of fruits and vegetables – fresh produce or transformed food – provided in one batch put together by a farm producer, a collective of farm producers, or a commercial intermediary" (Lagane 2001, p. 5). Throughout the seasons, and generally once a week, farm producers supply fresh

produce (fruit and vegetables that have been picked that same morning) to their customers. Most often, these are baskets of vegetables. But, these can occasionally be complemented with fresh dairy products, meat, conserves and preserves, provided through partnerships with producers, thus allowing the basket distribution systems to diversify its offer and allow members to complete their basic baskets. Apart from that, certain systems are specialised and only sell meat, dairy or cereal.[9] About half of the 60 or so people I interviewed during my study include what they call baskets in their supply chain. This type of food supply is equally used by both the youngest and the oldest consumers in the enquiry.[10] The literature on this form of supply tends to present it as an innovative practice (Lamine 2008; Zimmer 2011). But, the way the young interviewees discuss this method of supplying food reveals that this choice also implies imitation. Léa and her sister are students at Strasbourg University, and they have always seen their parents buy food through the basket system. When they went to live by themselves in Strasbourg, they also chose this type of supply. Baskets are a system of trade that can be organised both by an AMAP[11] of independent producers, and by cooperatives of producers or organisations that have a social function, such as the *Jardins de Cocagne* (Fortier 2003). For this study, I looked at two organisations: the AMAP of the *Ruisseau Bleu* and the *Jardins de la Montagne Verte*. Each of these structures makes particular choices about the production and distribution of their baskets. The organisation of the *Montagne Verte* was created in 2001. It is part of the *Reseau Cocagne*.[12] As part of a social integration scheme, it promotes a network for the production and distribution of organic vegetables. Since 2006, it has also been registered as an organisation for social integration which works by providing farming and para-farming services, and in 2007 the local authorities attributed the status of fair-trade company[13] to the organisation. The *Jardins de la Montagne Verte* are next to the residential neighbourhood called the Montagne Verte, situated at a 10-min walk from the city centre of Strasbourg. The gardens have been planted on old vegetable growing areas. Today, the JMV[14] have expanded over six other neighbourhoods in the city and in the suburbs of Strasbourg, thus covering a total of 15 ha of land. The AMAP of the

[9] When it comes to other types of food that are not vegetables, the interviewees no longer use the term basket. They talk about the "Cereal AMAP", or the "Dairy AMAP" or the "Meat AMAP."

[10] I found the contacts for my fieldwork with the kind assistance of a student organisation on the campus of the University of Strasbourg. At the time, this organisation was a basket collection point for university students and staff. This is how I met a large number of students who had chosen this supply strategy. Their importance among my general population of respondents is not representative of the proportion of French students interested in health food and who use baskets for supplies, but is rather an effect of my recruitment methods.

[11] Lagane, Zimmer and Lamine retrace the birth of the basket supply system and reconsider the issues involved in this method of supplies on a cultural level.

[12] The *Jardins de Cocagne* (the Cocagne Gardens), now called the *Réseau Cocagne* (Cocagne Network), rely on the direct production and sale of garden and farm produce. Social integration gardens, among which the *Jardins de Cocagne* are one of the main models, appeared in France around the 1990s in response to the economic crisis and unemployment. Based on a Swiss model, the French founders of this system put the social dimensions of their project in central place, and the first *Jardin de Cocagne* was created in 1991 (Fortier 2003).

[13] [Translator's note: fair-trade economy stands for "économie solidaire"] The French expression "économie solidaire" was conceptualised by Laville. He defines a solidarity-based or social economy as all the economic activities that are governed by a desire to act democratically, and where social relations based on solidarity are considered more important than personal interests of material profits; it thus contributes to the democratisation of an economy based on citizens' involvement (Laville 2011).

[14] I will use the abbreviation *JMV* for the *Jardins de la Montagne Verte.*

Ruisseau Bleu, which was created in 2008 on the initiative of the inhabitants of the rue du Ruisseau Bleu in the Neudorf neighbourhood, also provides produce from a farm about 30 km out of Strasbourg, and, from time to time, from farms located in the nearby Vosges mountains.

This means that while these organisations claim to have different functions and actions (social, educational, professional and, in the case of the JMV, territorial, citizen and ecological), in the case of the *Ruisseau Bleu* the supply methods of the basket system converge around one common social vision: "It is indeed the acknowledgement of the positive social value of the work organized by companies of the social economy which, from the viewpoint of their participants, confers onto them a particular status compared to commercial companies" (Hély and Moulévrier 2013, p. 128). The basket system differs from other ways of supplying food because of the absence of money at the time of purchase.[15] During the ethnographic survey, I never heard Sandra say she was going to buy fruits or vegetables, but that she was going to "fetch the basket", thus avoiding any reference to commercial exchanges.

Meanwhile, it is the constraint that governs the relations developed through the basket system that prompts Anaïs to state that she prefers to shop at the outdoor market. As Ripoll's research shows, faced with the constraints and conditions imposed by certain AMAPs, consumers turn to new collective trade structures that are more flexible and less restrictive: "far from being a diversion or a recycled image of the *AMAP*, for conventional and purely commercial purposes, and far from being an initiative taken by the more passive or egotistical consumers, these decisions are usually taken by producers or members of social organisations which I would more readily classify as activist, and who are anticipating either defection or depletion" (Ripoll 2013, p. 179).

At the market, in search of freedom and proximity

Whether they use the basket system or not, about half of the interviewees complete their food shopping at the outdoor market where they buy fresh produce. This form of supply is a continuation of their cooking practices in which fresh produce, and particularly fresh fruits and vegetables, have a central place on their plates (Adamiec 2015). At the outset of my research project, I found around 20 outdoor markets that take place in Strasbourg throughout the week, from Mondays to Saturdays. The market Sandra goes to is the one most of the respondents also visit. It takes place on Tuesday and Saturday mornings from 7 AM to 1 PM, on the *Place du Marché* and in the adjoining market halls. These markets bring together local producers and sellers, and not only allow city dwellers to stock up on vegetables, fish and meat, but also feature bakeries, prepared food and catering services, clothes stands, kitchen utensil stalls, etc. The other market, which Anaïs visited at the beginning of the enquiry, is a "producers' market" where only local producers of the Alsace region are allowed to sell their produce. There are no sellers or commercial intermediaries on this market. It is held on Saturday mornings, in the *rue de l'Ancienne Douane* in the old city centre. Historically, the markets were the primary locations where fresh produce was sold, and they were for

[15] As Dubuisson-Quellier and Lamine underline, the exchange of money is simplified: subscribing to the system entails that making purchases no longer requires constant financial decision making. (Dubuisson-Quellier and Lamine 2004, p.155)

a long time the only economic model for the distribution in the city of fresh food produced by the local rural population.[16]

While food supplies are obtained through the basket network by eaters of all ages in equal proportion, I observed that the market is mainly a place visited by people with children, or people who are over 40 and have no children. Most students I encountered did not visit any of the outdoor markets in Strasbourg. They justify their lack of interest in this type of supply by a lack of time, a lack of knowledge about how these places function and the cost of the produce which they find too high. In the interviews, when they made projections about their future—generally with more money and with children—they expressed the hope to include visits to the market in their supply strategies. This shows that situations in life tend to affect people's choice in their supply trajectories, as was also demonstrated by the example of Anaïs.

Moreover, getting supplies at the market is different from the basket network because of the actual monetary transactions the market involves. Sandra and Anaïs make it an obligation never to pay with their credit cards when buying fruit and vegetables at the market, even with producers that have the necessary equipment for such payments. Sandra has a specific wallet that is exclusively reserved for market food shopping. She finishes her shopping when her wallet is empty. By highlighting the commercial and economic character of the transaction, shopping at the outdoor market allows people to retain an impression of unconstrained freedom towards the producers. As Orléan notes in his rereading of the contributions of Simmel and his *Philosophie de l'argent*: "Money is not a contract; it does not engage anyone in particular. The monetary transaction is the symbol of the freedom and the individualisation that money offers to modern society." (Orléan 1992, p. 2). At the market, eaters are thus free to contract, or not, engagements and obligations of a commercial nature. However, the possibility of negotiation makes the market a more attractive point of purchase than shopping in a conventional shop: "In the aisles of the supermarket (...), and faced with this impersonal machinery that excludes any form of transaction (…) one is at best a consumer who is master of his/her own tastes (…). In the dual relationship with each of the market sellers and producers, there is always the hope of conducting clever negotiations as to the terms of the contract, though the actual price is just as predetermined as in the other cases. At least during the time of the transaction, and however small the stakes, both parties can pretend that this situation is separate from global economic conditions" (de La Pradelle 2006, p. 265). Following this logic, Sandra and Anaïs explain that the scales in shops do not tip in their advantage, whereas at the market the relationship with producers allows for negotiation, and for each party to feel like they play an "active" role in the economic exchange (Clochard and Desjeux 2013).

Health and organic food shops and conventional shops: a surprising partnership

I spent time in Strasbourg's various natural and organic food shops, but the shop that drew my attention most of all was the *Serpent Vert*. This is the shop which my

[16] As Braudel indicates, markets have been around at least since the Middle Ages as part of the life of city dwellers, in other words as soon as there was a market there was a city growing around it. And in spite of new initiatives such as the basket system, they have not lost any of their appeal.

interviewees visited most often at the time of my enquiry. It is located on the *Boulevard de la Victoire*, and at the crossroads of several of the neighbourhoods in which the interviewees live.

Natural and organic food shops and the rhetoric of commerce

In contrast with conventional shops which have generic names such as *Monoprix* or *Simply Market*, the names given to the various organic food shops which I studied reveal their owners' desire to share in the cultural, geographic and historical reality of the region. By paying particular attention of the singular nature of the shops and their location, sellers and eaters attempt to create relationships which mingle, according to their accounts, "recognition", "familiarity", "humanisation" and "solidarity". For Frédérique, who works as a salesperson in a bakery specialised in bread made from organic flour, as for Odile, who often buys her bread from Frédérique, eaters who choose a shop with an evocative name insert themselves into the heart of a story and open themselves up to a much vaster genealogy than their own individuality.

The desire of health food fans to find their supplies in shops specialised in natural and organic food and the possibility to find their values confirmed there is, however, based on a precarious moral balance. I can here take the example of the story of the *Serpent Vert*. The distribution company *Monoprix* bought the Alsatian brand name in January 2012. In early 2013, three of its shops thus became *Naturalia* shops. The buildings have hardly changed, the employees are the same, as are the managers, but a great number of customers were extremely disappointed. Over the space of a few months, the shop that had become the benchmark for organic and natural food shops in Strasbourg had gained a reputation of scandal. In an interview, Paola complained about no longer finding the products she used to find and criticises the overtly commercial logic that now governs the shelving: "Before the takeover, they did not have this idea of becoming the leaders, they bought products they were convinced about" (Paola, 40 years old, design and fashion manager in a private company).

In the early 1990s, Ouédraogo (1998) noted that natural and organic food shops were places of supply and purchase favoured by the majority of health food consumers, and that outdoor markets were their privileged substitutes. However, today it is the other way round, and natural and organic food shops and conventional shops have become the substitutes when the outdoor markets and the basket system are not sufficient. Why is it that these shops, which match the principles of health food, do not have a more regular custom? Firstly, the cost of food is higher than what is offered in traditional shops, while they do not necessarily offer better quality. Secondly, in the space of 20 years, the market for organic and regional food, as well as that for diet food, has diversified and become more democratic. In 1990, buying food at the organic shop meant having "the certainty that one was buying and eating 'whole' food (i.e. food that has been produced with the precautions and under the regulations of organic farming) whose visible indicator is the *AB* label (*Agriculture Biologique* – Organic Farming), and which brings customers to the shop on a daily basis". (Ouédraogo 1998, p. 15).

Arouna P. Ouédraogo insists on the fact that it is difficult to find this type of product outside of specialised shops. The commercial offer has increased significantly. From what I observed in the specialised shops, at the time of my enquiry, organic cosmetics were the only products that were not yet sold in conventional shops. Indeed, food

supplements and cosmetics still have a protected status and are not often sold in conventional shops. The two types of shops thus both rival and complement one another. This evolution changes the stakes for the consumers too, since they now have to designate new criteria to define when a product is considered "good quality". Their supply strategies are adapted to the evolutions of the market.

Lastly, organic shops are victims of the paradox that is intrinsically linked to their existence as "shops". The remarkable characteristic of their websites is the absence of commercial and economic references, both regarding the terminology used as regarding the information that is supplied. It is very difficult to have access to precise figures, and the values discussed are exclusively moral: health food, organic, local and fair-trade, which is a reflection of the values linked to health food. The commercial involvement is obscured, hidden behind references to collective and solidary or family units governed by a "spirit of generosity" (Godbout and Caillé 2000). But the fact that these businesses try, by any means possible, to hide the commercial dimension of their methods seems to arouse the interviewees' suspicion. During my enquiry, they clearly showed that they are actually very aware and sensitive to the commercial value of the food they buy. Being an active participant in their consumption thus means, in the words of Odile, "looking to pay the most equitable price possible" (Odile, 35 years old, high school teacher). As Emmanuelle Lallement also writes, "This is where the entire paradox of the consumer society lies all these new consumers are affected by a certain type of distrust towards the world of commerce, but at the same time they desire to participate in commercial exchanges". Even more importantly, perhaps, is the fact that their rejection of commercial systems of trade reveals their desire to become active partners in those exchanges. In a way, it is as if they wanted to enter and become participants in this vast round of exchanges (Lallement 2010, p. 36). The underlying financial logic and the presence of intermediaries in the exchange of money seem to be problematic for the interviewees. They accuse the natural and organic food shops of taking advantage of their hybrid status and of having caved in to the appeal and the economic vagaries of capitalism.

Conventional supermarkets as neighbourhood grocers

Looking at the various suppliers where the respondents do their shopping, it appears that in spite of being vilified in their discourse, these places of supply are still frequently visited. Indeed, out of the 60 or so people I interviewed, there were only four who never go to conventional places of purchase. In their discourse, health food consumers attribute a geographic location to the conventional shops they shop at: they never say "I shop at *Simply Market*" but they say "I shop at the *Simply* on the *Esplanade*" or "the *Monop*' in *Neudorf*", joining in one accolade the name of the geographic location and the brand name of the shop, which aims to mark the familiarity of the place (Perrot 2009).[17]

[17] As Perrot shows (Perrot 2009) "the mini-market has a hybrid status. It sometimes fills the part of neighbourhood grocer's, a place where people of a neighbourhood meet" (p. 50). The interviewees make a difference between supermarkets and mini-markets, because in mini-markets they manage to have personal relations with the staff or to engage in conversations with other customers: "the spaces between the aisles of a mini-market allow for bodies and conversations to come closer together, and, in a way, it functions on the same principles as the small neighbourhood shops" (p. 51–52).

In the interviews, whatever the age, gender or income level of the interviewee, the choice to shop at a conventional shop is generally explained by economic, temporal or geographical constraints. Sandra, who has a very small salary, dreams of one day having enough income to buy her food exclusively at specialised shops: "If I had the choice, I'd buy more at the market, or at shops like *Satori* or the *Serpent Vert*" (Sandra, 38 years old, PhD in geography, works as a secretary in a public administration at the time of the interview in 2012). Jean-Claude justifies buying supplies at *Monoprix* as an "emergency option": "*Monoprix* is for a quick fix, if we forgot to buy butter at the market, butter, or cream, from time to time" (Jean-Claude, 43, environmental counsellor, President of an *AMAP*). As Joanna reminds me every time we meet, buying supplies in conventional shops is a fast and practical type of supply which generates much guilt. Lastly, buying supplies in conventional shops also confirms the idea that proximity is not necessarily a matter of physical space.

As Chevalier underlines in his discussion of the neighbourhood: "(it) is a space of interconnections and neighborliness: to be greeted as an inhabitant of the neighbourhood, to be recognized by the other residents and by the shopkeepers, all this is tangible proof that one belongs to a certain neighbourhood" (Chevalier 2007a, b, p. 109), and in this case it is proof that one belongs to a particular community of eaters. For my interviewees, the shop that falls under the label of "proximity" is both the shop that is close to home and the one that is elsewhere in the city and that allows people to meet others who are found to be socially and culturally similar, and whom one could imagine and define as being one's neighbours. From this perspective, natural and organic food shops and conventional food shops share a common anchor point in a very specific territory, namely a neighbourhood, and they thus play on the polysemy of the word proximity to praise the value of their products.

A variety of decisions about labels depending on the method of supply

While the presence of labels could be thought to facilitate and simplify choices of consumption and supply, health food consumers reveal, through their supply methods, a certain number of paradoxes.

Outdoor markets and baskets: trust beyond labels?

While shopping at the outdoor market, Paola distinguishes between "certified" organic food and "real" organic food. She associates "fake organic" with marketing strategies and even "fraud", generating increased costs. Real organic food is described in terms of "obvious and natural" and she associates it with "ancestral production methods" (Paola, 40 years old, design and fashion manager in a private company). Would a food product that is "genuinely" organic then be one that does not carry a label (Dubuisson-Quellier and Lamine 2004)? In an article on AMAPs, Lagane (2001) describes the suspicion of consumers towards the certification notices that are used in modes of direct distribution. He also recalls that the representations concerning organic certifications and norms differ greatly from one country to the next. If organic production is the foundation of the *teikei*, and is incessantly reinforced and improved by Japanese legislation, certification and government norms, I have observed an absence of organic

certification notices for the great majority of AMAP producers in France. In another article on AMAPs in the Rhone-Alpes region, Mundler shows that those who refuse this type of certification are wary of the interference of a third party in a relationship between consumers and producers that is based on trust. For the majority of the interviewees, the state's intrusion in the definition of quality is indeed perceived as illegitimate, because it emanates from a society that they find incapable of actually designating a proven sanitary risk with any real certainty. I observed the same kind of suspicion in the case of other types of incorporations, like vaccines, medication or cosmetics (Adamiec 2015). During the period of vaccination against the AH1N1 flu, Sandra immediately looked at how she could signal her refusal to allow the state—in this case, through school as an institution—to decide what would constitute a sanitary risk for her child and what would not. As underlined in Raude et al. (2016), the public agents working in the health and food sectors have for the past few years been confronted with a rise in public controversies that inexorably contribute to the erosion of the population's trust in "dominant" institutions (groups of scholars and researchers, health authorities and agencies) and in the knowledge which these institutions produce on the topic of sanitary risks and the proper ways to prevent them.

The distrust towards certification notices is also enhanced by the idea that the certification of products, whether they are food or non-food products, increases their final price. For Sandrine, organic labels play on consumers' credibility and their prestige is based on a series of misunderstandings: "… the extra cost is not nearly justified and it's really a scam … (…) and moreover, *Ecocert* which hand out certifications and take a percentage on the profits … that is not very … anyway for me this is not clear" (Sandrine, 65, retired medical doctor). With regard to her suspicions as to the better quality that these labels are supposed to certify for the organic products that carry them, Odile explains that she has gradually dropped the organic criterion in order to concentrate on the "local" aspect: "buying local, producing locally, I realized that that had more impact than buying organic or not" (Odile, 35, high school teacher). Sandrine and Odile's refusal to rely on certified labels to define the quality of products allows for a better understanding of the preeminence of the local criterion in the way that the respondents elaborate their criteria for health food. As Mundler shows (2007), the processes of sanitary normalisation and uniformisation of the main certification labels are generally linked to a global dimension, and leave out the geographical dimension of the product. In order to distance themselves from this, and to show their disapproval of a system that leaves out the geographical—and therefore environmental—dimensions of the product, the eaters whom I interviewed indeed prefer the "local" criterion over the organic certification. The enquiry led by Sirieix, Pernin and Schaer on the issues involved in the regional provenance of organic products shows similar indicators: "consumers are very sensitive when it comes to the regional provenance of products. Half of the consumers I interviewed even declare that they prefer a regional conventional product over a product that is labelled *AB* but that comes from a more distant geographical area" (Sirieix et al. 2009, p. 404).

Buying "organic" in conventional food shops: choosing the "lesser evil"

The issues involved in organic certification need to be reconsidered from a different angle in the context of supplies bought in conventional shops. In these places,

certifications seem, at first sight, indispensable to define the quality of a product. As Bénézech underlines "Long distribution circuits are lacking when it comes to fulfilling the expectations of customers who are interested in the local or social dimension of their actions, except when they go through labels" (Bénézech 2011, pp. 308–309). During my fieldwork, I observed that the conventional shops reinforce consumers' doubts as to where their food products come from. Choosing certified or labelled products thus seems to assuage their doubts and facilitate their choices. For many, like Armand, it is like choosing "the lesser of two evils", and it allows consumers to master the product and to understand the risks involved through their knowledge of its origins, its quality and its health impact. In order to mark the difference between what would be an ideal food consumption and the reality and constraints of their food purchasing practices, the respondents thus take up a distinction they enjoy, to differentiate between real organic and fake organic. The "organic from the supermarket" is, then, fake organic.

A paradoxical concern with labels

Considering how complicated it is for health food consumers to be led solely by labels and certifications in their purchasing choices, I observed that they implement a large variety of supply strategies. Moreover, I found that health food eaters turn away from organic products and invest in non-organic products while at the same time insisting on a type of "quality" that is defined in terms of geographical location and season, as well as trust and confidence. When the respondents talked about organic food, they were referring to a mode of production, sale and consumption that is constructed around an idea of exemplarity: "to eat organic food is a system, and the sales model … and the whole trade system, the relationship you have with the producer, the seller, etc., it's all of that…" (Sandra, 38 years old, PhD in geography, unemployed at the time of this interview in 2014). As Raude has shown, after the numerous food crises that have affected Western food systems, consumers have responded to the increased risk by maintaining or reinforcing beliefs and practices concerning food that existed before these risks were identified. Both at the market and in the basket system, the interpersonal relations that are established between producers and consumers structure the relationship of trust from which their definition of quality originates. For the respondents, eating organic does not refer to purchasing food that is labelled organic, but serves a linguistic shortcut for the "un-initiated" to define a diet that is geared towards both health and environmental issues, as well as being local or seasonal.

However, my observations also showed that these consumers are more and more demanding when it comes to production norms. Depending on the type of supply, they will not necessarily permanently turn away from labels, but move towards labels that have increasingly restrictive quality charters. At the market they will, for instance, fall back on biodynamic organic food. This choice is then justified as warranting "a quality surplus" in the relationship that is permanently and durably established between the consumer and the producer—a relationship that is made possible because of the specific nature of the trade relations established at those places of supply. It should also be noted that the demands become stronger as access to organic food improves. Would one of the reasons for consumers to turn towards more restricted brands be linked to a desire to distinguish themselves? By becoming gradually more accessible, might organic food have lost its prestige in the eyes of my respondents? Perrot (2009) underlines that eaters

who visit the market are attracted both by ancestral traditions and exoticism, an attitude that allows them to be "popular" and "elitist" at the same time. As Régnier also underlines, there are complex connections between gastronomy and diet, and "the contemporary affirmation of pleasure is accompanied with a review of nutritional rules. By defining such rules, nutritional studies thus restrict and define pleasure, and make it comply with moral requirements" (Régnier 2015). Educating the palate to subtle flavours and refined food consumption choices, which used to characterise the cultivated gourmet, seems to have changed into a mastered usage of the palate and a taste for natural and unprocessed food. By buying supplies both at the market, through the basket system or in conventional shops, health food consumers thus voluntarily play on a form of indetermination that allows them to show themselves either in their difference or in their conformity, depending on the moment.

Conclusion

I have shown that for people who eat health food the places where they food shop are important, and their supply trajectories are those that allow them to develop the values attached to health food. However, the diversity of their points of purchase, whether these be AMAPs, markets, the basket system, conventional shops or health food shops, requires constant moral readjustments. Their ambiguous relationship with labels and with the market economy and their involvement in it partly explain their supply strategies. However, these strategies contain a number of paradoxes. AMAPs and basket networks are perceived as safe and quality sources of supply, but they require a level of involvement that might be an obstacle. The market is seen as a more flexible point of purchase, and it allows eaters both to meet and exchange with producers, and to maintain a certain distance from the market economy. Conventional shops and organic food shops are treated through the same moral arrangements as those applied to basket networks and to the outdoor market. Natural and organic food shops are places where the values of eating health food can be freely developed. However, the commercial nature of the relations that are established there, and the position of consumer that eaters are attributed there, might go some way in explaining why consumers have become wary of them. Health food consumers produce reassuring artefacts and play on the spatial and social proximity of these shops in order to reduce the constraints linked to this type of supply. Lastly, common sense happily associates the consumption of so-called healthy products with the purchase of organic food. But eaters' trust in labels cannot be taken for granted: it changes depending on the supply method and the type of product. On the one hand, health food consumers refuse food labels and prefer buying on principles of proximity and seasonality. On the other hand, they do appreciate labels that are deemed more restrictive, such as those proposed in biodynamic organic agriculture.

Studying the supply strategies of health food consumers thus allows for more general questions to be raised about the ways in which individuals who are interested in this type of food make their choices. Might the paradoxes that are revealed in their supply strategies be a reflection of their social attitudes? Their strategies seem to be both a continuation of the strategies of other types of consumers—especially on a financial level—and at the same time, health food eaters seem to set themselves apart through the hybrid and reflexively moral composition of their supply methods.

References

Adamiec, C. (2015). *Devenir sain. Des morales alimentaires aux écologies de soi*. Rennes-Tours: PUR-PUFRT.

Amemyia, H. (2011). *Du Teikei aux AMAP, Le renouveau de la vente directe de produits fermiers locaux*. Rennes: PUR.

Aymard, M., Grignon, G., & Sabban, F. (1993). *Le temps de manger, alimentation, emploi du temps et rythmes sociaux*. Paris: Edition de la maison des sciences de l'homme-INRA.

Baudry, J., Touvier, M., Allès, B., Péneau, S., Méjean, C., Galan, P., Hercberg, S., Lairon, D., & Kesse-Guyot, E. (2016). Typology of eaters based on conventional and organic food consumption: results from the NutriNet-Santé cohort study. *The British Journal of Nutrition, 116*(4), 700–709.

Belasco, W. J. (2007). *Appetite for change: how the counterculture took on the food industry*. Ithaca: Cornell University Press.

Bénézech, D. (2011). La confiance entre les partenaires de l'échange, au-delà des labels. In H. Amemiya (Ed.), *Du Teikei aux AMAP. Le renouveau de la vente directe de produits fermiers locaux* (pp. 300–320). Rennes: PUR.

Bourdieu, P. (1984). *Distinction: a social critique of the judgement of taste*. Cambridge: Harvard University Press.

Braudel, F. (1985). *La Dynamique du capitalisme*. Paris: Arthaud.

Bravo, C. P., et al. (2013). Assessing determinants of organic food consumption using data from the German National Nutrition Survey II. *Food Quality and Preference, 28*, 60–70.

Chevalier, S. (2007a). Shopping à la française: approvisionnement alimentaire et sociabilité. *Horizontes Antropológicos, 13*, 64–72.

Chevalier, S. (2007b). Faire ses courses en voisin. *Métropoles*. http://metropoles.revues.org/107. Accessed 6 June 2015.

Clochard, J., & Desjeux, D. (2013). *Le consommateur malin face à la crise I*. Paris: L'Harmattan.

Connors, M., Bisogni, C. A., Sobal, J., & Devine, C. M. (2001). Managing values in personal food systems. *Appetite, 36*, 189–200.

Corbeau, J. P. (2008). Casser la croûte ! Pour une "incorporaction" jubilatoire. *Corps, 1*(4), 79–83.

Corbeau, J. P., & Poulain, J.-P. (2002). *Penser l'alimentation: entre imaginaire et rationalité*. Toulouse: Privat.

de La Pradelle, M. (2006). *Market day in Provence*. Chicago: The University of Chicago Press.

Devine, C. M., Connors, M., Bisogni, C. A., & Sobal, J. (1998). Life-course influences on fruit and vegetable trajectories: qualitative analysis of food choice. *Journal of Nutrition Education, 30*, 361–370.

Dubuisson-Quellier, S., & Lamine, C. (2004). Faire le marché autrement. L'abonnement à un panier de fruits et de légumes comme forme d'engagement politique des consommateurs. *Sciences de la Société, 62*, 144–167.

Eme, B., & Laville, J. L. (2004). L'économie Solidaire Ou L'économie Comme Écologie Sociale. *Ecologie & Politique, 28*, 13–25.

Fischler, C. (Ed.) (1993). Le Bon et le Saint, évolution de la sensibilité alimentaire des français. *Les Cahiers de l'OCHA*, *1*.

Fischler, C. (Ed.), (1996). Pensée magique et alimentation aujourd'hui. *Les Cahiers de l'OCHA, 5*.

Fischler, C. (1990). *L'homnivore*. Paris: Odile Jacob.

Fortier, A. (2003). Les vertus du Jardinage d'insertion. *Communications, 74*, 85–102.

Godbout, J. T., & Caillé, A. (2000). *The world of the gift*. Montreal: McGill-Queen's University Press.

Grignon, C., & Grignon, C. (1986). Alimentation et stratification sociale. *Culture Technique, 16*, 40–59.

Guthman, J. (2003). Fast food/organic food: reflexive tastes and the making of 'yuppie chow. *Social & Cultural Geography, 4*(1), 45–58.

Hély, M., & Moulévrier, P. (2013). *L'économie sociale et solidaire : de l'utopie aux pratiques*. Paris: La dispute.

Hubert, A. (1990). Diet, environment and society: cultural and social aspects of diet in nutritional anthropology. In G. Ziant (Ed.), *Lipids and health* (pp. 207–213). Oxford: EXCERPTA MEDICA.

Kesse-Guyot, E., Péneau, S., Méjean, C., Szabo de Edelenyi, F., Galan, P., Hercberg, S., & Lairon, D. (2013). Profiles of organic food consumers in a large sample of French adults: results from the Nutrinet-Santé cohort study. *PLoS One, 8*(10), e76998. https://doi.org/10.1371/journal.pone.0076998.

Lagane, J. (2001). Du teikei à l'AMAP, un modèle acculturé. *Développement Durable et Territoires*, *2*(2). http://developpementdurable.revues.org/9013. Accessed 5 May 2015.

Lallement, E. (2010). Ruptures, abandons, déplacements. Ethnologie des pratiques alternatives de consommation et d'échange. *Sociologies Pratiques, 10*(2), 23–36.

Lamine, C. (2008). *Les intermittents du bio. Pour une sociologie pragmatique des choix alimentaires émergents*. Paris: Maison des Sciences de l'Homme.

Laville, J. L. (2011). *L'économie solidaire*. Paris: CNRS.

Lupton, D. (1994). *Medicine as culture, illness, disease and the body in western societies*. London: SAGE Publications.

Lupton, D. (1996). *Food, the body and the self*. London: SAGE Publications.

Memmi, D., Raveneau, G., & Taïeb, E. (2011). Introduction: la fabrication du dégoût. *Ethnologie Française, 41*(1), 5–16.

Mundler, P. (2007). Les Associations Pour Le Maintien de L'agriculture Paysanne (AMAP) En Rhône-Alpes, Entre marché et solidarité. *Ruralia*, *20*. https://journals.openedition.org/ruralia/1702. Accessed 3 May 2015.

Orléan, A. (1992). La monnaie comme lien social. Étude de philosophie de l'argent de Georg Simmel. *Genèses, 8*, 86–107.

Ouédraogo, A. P. (1998). Manger 'naturel'. *Journal des Anthropologues, 74*, 13–27.

Pansu, P., & Beauvois, J. L. (2004). Juger de la valeur sociale des personnes: les pratiques sociales d'évaluation. In P. Pansu & C. Louche (Eds.), *La psychologie appliquée à l'analyse des problèmes sociaux* (pp. 159–183). Paris: PUF.

Perrot, M. (2009). *Faire ses courses*. Paris: Stock.

Poulain, J. P. (2002). *Sociologies de l'alimentation*. Paris: PUF.

Raude, J. (2008). *Sociologie d'une crise alimentaire. Les consommateurs à l'épreuve de la maladie de la vache folle*. Paris: Lavoisier.

Raude, J., Fressard, L., Gautier, A., Pulcini, C., Peretti-Watel, P., & Verger, P. (2016). Opening the 'Vaccine Hesitancy' black box: how trust in institutions affects French GPs' vaccination practices. *Expert Review of Vaccines, 15*, 937–948. https://doi.org/10.1080/14760584.2016.1184092.

Régnier, F. (2015). Comment la diététique est devenue gastronomique dans la presse féminine française et américaine (1934–2010). *Le Temps des Médias, 1*(24), 131–145.

Ripoll, F. (2013). Forces et faiblesses des AMAP et dispositifs apparentés. In B. Frère & M. Jacquemain (Eds.), *Résister au quotidien* (pp. 161–187). Paris: Presses de Sciences Po.

Rose, N. (2007). The politics of life itself. In *Biomedicine, power, and subjectivity in the twenty-first century*. Princeton: Princeton University Press.

Sfez, L. (2001). *L'utopie de la santé parfaite, Acte du Colloque de Cerisy*. Paris: PUF.

Sirieix, L., Pernin, J.-L., & Schaer, B. (2009). L'enjeu de la provenance régionale pour l'agriculture biologique. *Innovations Agronomiques, 4*, 401–407.

Vicart, M. & Wathelet, O. (2016). Des familles conso-motrices ? Ethnographie des mobilités alimentaires dans les pratiques d'approvisionnement en France. *Anthropology of food,* http://aof.revues.org/8079. Accessed 31 July 2017.

Williams, S. J., & Calnan, M. (1996). The limits of medicalization? Modern medicine and the lay populace in late modernity. *Social Science & Medicine, 42*, 1609–1620.

Zimmer, M. (2011). Les AMAP en France: entre consommation de produits fermiers locaux et invention d'un nouvel ordre de vie. In G. Pleyers (Ed.), *La Consommation critique. Mouvements pour une alimentation responsable et solidaire* (pp. 49–89). Paris: Desclée de Brouwer.