

A Qualitative Study of Health-Related Beliefs and Practices among Vegetarians

Lorena Antonovici, Maria Nicoleta Turliuc

Abstract—The process of becoming a vegetarian involves changes in several life aspects, including health. Despite its relevance, however, little research has been carried out to analyze vegetarians' self-perceived health, and even less empirical attention has received in the Romanian population. This study aimed to assess health-related beliefs and practices among vegetarian adults in a Romanian sample. We have undertaken 20 semi-structured interviews (10 males, 10 females) based on a snowball sample with a mean age of 31 years. The interview guide was divided into three sections: causes of adopting the diet, general aspects (beliefs, practices, tensions, and conflicts) and consequences of adopting the diet (significant changes, positive aspects, and difficulties, physical and mental health). Additional anamnestic data were reported by means of a questionnaire. Data analyses were performed using Tropes text analysis software (v. 8.2) and SPSS software (v. 24.0.) Findings showed that most of the participants considered a vegetarian diet as a natural and healthy choice as opposed to meat-eating, which is not healthy, and its consumption should be moderated among omnivores. A higher proportion of participants (65%) had an average body mass index (BMI), and several women even assumed having certain affections that no longer occur after following a vegetarian diet. Moreover, participants admitted having better moods and mental health status, given their self-contentment with the dietary choice. Relatives were perceived as more skeptical about their practices than others, and especially women had this view. This study provides a valuable insight into health-related beliefs and practices and how a vegetarian diet might interact.

Keywords—Health-related beliefs, health, practices, vegetarians.

I. INTRODUCTION

VEGETARIANISM has become a common concern in many societies. It is not only a cognitive or an emotional response to food consumption but also an embodied practice that can act as an indicator of identity [1]-[3]. The transition to vegetarianism involves several changes in an individual's behaviors and social interactions, aspects that might also affect his health and well-being [4].

II. LITERATURE REVIEW

The nature of the relationship between vegetarianism and health is controversial. The vegetarian diet has been associated with a lower incidence of health issues related to cholesterol, chronic degenerative diseases, hypertension, coronary artery disease, gallstones, type II diabetes, strokes, and certain types of cancer [5], [6]. Other studies [7] report a lower frequency of harmful behaviors (e.g., cigarette consumption) among vegetarians indeed, but on the contrary, poorer health

(allergies, mental disorders, a higher incidence of cancer), a greater need for health care and a lower quality of life.

An indicator of health among vegetarians is the BMI. Several studies have indicated high levels of physical health and a lower BMI among vegetarians and a very low one among vegans [5], [7]-[16]. It is suggested that vegetarians, having a lower BMI than non-vegetarians, report a slight decrease in mortality from ischemic heart disease, probably due to low blood cholesterol levels, as opposed to non-vegetarians [17]. Surprisingly, although there have been general differences in BMI between vegetarians and non-vegetarians, obesity is common among Indians, who are known to follow a vegetarian diet on a large scale [18], [19].

Representations of vegetarianism are diverse: from positive and assumed attitudes to radical ones. It seems that individuals have the most positive attitudes and beliefs regarding the type of diet they follow, and those more negative attitudes and view towards the type of diet most different from the one followed [20]. Some people experience a paradox regarding, on the one hand, meat consumption and, on the other hand, the care expressed towards animals [21]. In this respect, a relevant distinction is made between 'healthy' vegetarians and 'ethical' vegetarians [22], [23]. Thus, healthy vegetarians focus on changing their diet to eliminate the possibility of disease, while ethical vegetarians choose to change their diet for moral reasons, being concerned about animal welfare and being more likely to switch to veganism.

Comparing to non-vegetarians, vegetarians have more positive attitudes regarding information about a particular product, vegetarian stores, health, organic products, but also towards events and social relationships [24]. Moreover, vegetarians have more positive attitudes and beliefs, along with stronger intentions in following a vegetarian diet, as opposed to non-vegetarians [25].

Several studies show that there is a predisposition among women to become vegetarians as opposed to men [26]-[29]. Compared to men who mainly believe that by our human nature we are made to eat meat, women are especially tempted to become vegetarians, and they also take more into account the hostility of family or partner as significant barriers to adopting a vegetarian diet [30]. Generally, friends and family have a neutral or even favorable attitude towards men's vegetarian diet, while family members of vegetarian women, especially men, are significantly more hostile to such a diet [31].

Many motivations lead a person to become a vegetarian. However, there is very little evidence of the consequences of adopting a vegetarian diet in terms of practices or changes in

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beliefs and behaviors [32]. This study aimed to assess health-related beliefs and practices among vegetarian adults in a Romanian sample.

III. METHODS

A. Participants

20 vegetarians (M = 10; F = 10) were recruited based on a snowball sample. The respondents were young people with a mean age of 31 years and being vegetarians for at least 2 years. The overall mean duration of being vegetarians was 6 years. The majority of participants lived in the urban area (95%), had a high level of education (75%), was Christian Orthodox (60%), and was in a partnership or married (70%). Only 8 vegetarians out of 20 admitted not eating meat since they became vegetarians.

B. Instruments

A semi-structured, face-to-face interview was used to study health-related beliefs and practices among vegetarians. The interview guide included 11 questions organized in 3 sections: (a) causes of adopting the diet; (b) general aspects, such as beliefs, practices, tensions, and conflicts; (c) consequences of adopting the diet – significant changes, positive aspects, and difficulties, physical and mental health.

1. Interview Questions

Each interview followed a semi-structured protocol, was 10-30 minutes long, and was conducted in Romanian. The respondents were asked the following questions:

- 1) How exactly did you choose to become a vegetarian?
- 2) What do you think about the vegetarian diet?
- 3) What about the omnivore one?
- 4) How easy/difficult was it for you to choose a vegetarian diet?
- 5) How did those around you reacted to changing your diet?
- 6) How have you changed since you started a vegetarian diet?
- 7) What are the advantages/disadvantages of the vegetarian diet?
- 8) How have you improved your life as a result of your vegetarian diet?
- 9) What are the difficulties you encountered?
- 10) Have you noticed any changes in your physical health?
- 11) Have you noticed any changes in your physical health?

2. Anamnestic and Demographic Data

Additional anamnestic data and demographics were reported using a questionnaire. The anamnestic questionnaire referred to health conditions in different areas of the body, BMI, or general health status. Demographic data referred to age, gender, duration of being a vegetarian, residence area (rural/urban), educational level (less/middle/high), relationship status (single/in a relationship/married) and religion (orthodox/catholic/protestant/other).

C. Data Gathering Procedure

1. Data Collection

A snowball sampling technique was used in selecting the respondents. After having selected the respondents through a snowball sampling technique, we discussed the confidentiality and purpose of the research and gave informed consent. Demographic data were assessed orally at the end of the interview. The anamnestic data sheet that the respondents filled up was also presented.

Participants were asked to comment on their beliefs and practices freely. We initiated a more in-depth discussion of specific topics if the participant did not specify an answer. Also, we informed the respondents that the interview would be recorded. The semi-structured interviews were all performed for over 3 months.

2. Data Analysis

Data analysis was performed using Tropes text analysis software (v. 8.2) and SPSS software (v.24.0.). In the Tropes' semantic analysis, after terms have been coded, we checked the similarity of codes with the actual text and cleared for any inadvertences. After that, the significant universes of references, along with specific relevant relations, were extracted. SPSS software was used in assessing the sample and different percentages and descriptive data that could not be obtained with Tropes software.

IV. RESULTS

We first analyzed the causes of adopting a vegetarian diet, which refers to means of becoming vegetarian. This universe of discussion included friends, decisions, health, and animal care (Fig. 1). In order to become vegetarians, several participants followed or were moved by the example of a friend (n = 7). The decision to become vegetarian was also a natural choice or a specific one (e.g., little tolerance to meat, the death of a relative). Among all vegetarians in this study, 12 were ethical vegetarians (60%), and 8 were healthy vegetarians (40%).

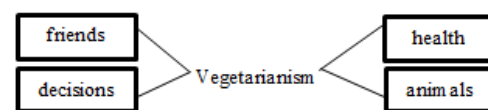


Fig. 1 General causes of adopting the vegetarian diet

Findings showed that most of the participants considered the vegetarian diet a natural and healthy choice instead of meat-eating, which is unhealthy, and meat consumption should be moderated among omnivores (Fig. 2). Being a meat-eater was seen as a more accessible and flexible choice for omnivores. Moreover, the environmental impact of meat consumption was questioned. In this study, vegetarians considered themselves very tolerant with omnivores, whereas they stated they experienced negative opinions coming from omnivores.

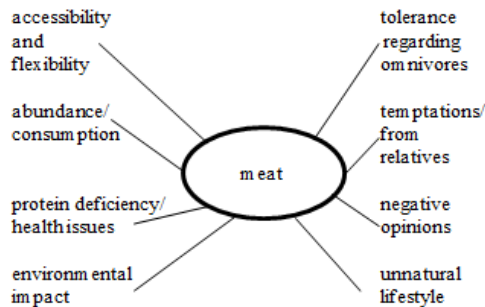


Fig. 2 Vegetarians' attitudes towards meat

Participants thought that omnivores usually questioned them about protein deficiency and health issues. Relatives were perceived even more skeptical about their practices than others, and especially women had this view. However, most of the participants (85%) considered that it was easy to adjust to the vegetarian diet, and it might have been a bit more challenging after becoming a vegetarian.

Respondents generally had good health prospects, and most of their common affections were related to gastric issues (35%). Moreover, respondents admitted having better moods and mental health status, given their self-contentment with the dietary choice (Fig. 3). The fact that they were consonant with their ethical and ecological values was considered to improve their mental states. Vegetarians are assumed to have fewer food options (especially when they go out to eat) and are now more attentive to the specific products they buy.

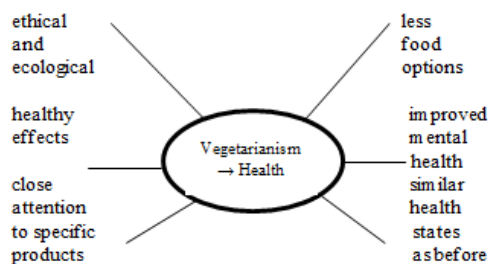


Fig. 3 The relation between vegetarianism and health

A higher proportion of participants (65%) had an average BMI, and several women ($n = 4$) even assumed having certain affections that no longer occurred after following a vegetarian diet (e.g., digestive or skin issues, dizziness, gynecological issues). Even when vegetarians in the study stated their health is similar to the previous one (before becoming a vegetarian), it usually happened because they did not have previous health issues, or they could not identify changes that have to do with their new diet.

V. DISCUSSION

This study aimed to assess health-related beliefs and practices among vegetarian adults in a Romanian sample. Findings showed that most of the participants considered a vegetarian diet as a natural and healthy choice as opposed to

meat-eating, which is not healthy, and its consumption should be moderated among omnivores. This was also previously reported by findings of most positive attitudes and beliefs regarding the type of diet one follows and more negative attitudes, and views towards the type of diet most different from the one followed [20].

Participants generally had good health prospects and most of their common affections were related to gastric issues (35%). Moreover, participants admitted having better moods and mental health status, given their self-contentment with the dietary choice. The fact that participants were consonant with their ethical and ecological values was considered to improve their mental states. Some people experience a paradox regarding, on the one hand, meat consumption and, on the other hand, the care expressed towards animals [21].

Vegetarians assumed to have fewer food options (especially when they go out to eat) and that they are now more attentive to the specific products they buy. This is in line with the results in which, compared to non-vegetarians, vegetarians have more positive attitudes regarding information about a particular product, vegetarian stores, health, organic products, but also towards events and social relationships [24].

A higher proportion of participants (65%) had an average BMI. These findings are surprising, given the fact that several studies have indicated a lower BMI among vegetarians and a very low one among vegans [5], [7]-[16]. It is suggested that vegetarians, having a lower BMI than non-vegetarians, report a slight decrease in mortality from ischemic heart disease, probably due to low blood cholesterol levels compared to non-vegetarians [13]. However, studies also indicate a lower frequency of obesity in vegetarians compared to non-vegetarians [17], and obesity is prevalent among Indians, who are known to follow a vegetarian diet at a large scale [18], [19].

Several women ($n = 4$) assumed having certain affections that no longer occurred after following a vegetarian diet (e.g., digestive or skin issues, dizziness, gynecological issues). This fact might be due to the health effects of a vegetarian diet [5], [6]. Even when participants stated their health state is similar to the previous one (before becoming vegetarians), it usually happened because they did not have previous health issues, or they could not identify changes that have to do with their new diet.

Being a meat-eater was seen as a more accessible and flexible choice for omnivores. Moreover, the environmental impact of meat consumption was questioned. In this study, vegetarians considered themselves very tolerant with omnivores, whereas they stated they experienced negative opinions coming from omnivores. Relatives were perceived as more skeptical about their practices than others, and especially women had this view. Compared to men who mainly believe that by our human nature we are made to eat meat, women are especially tempted to become vegetarians, and they also take more into account the hostility of family or partner as significant barriers to adopting a vegetarian diet [30]. Generally, friends and family have a neutral or even favorable attitude towards men's vegetarian diet, while family members

of vegetarian women, especially men, are significantly more hostile to such a diet [31].

The obvious limitation of this study is the cross-sectional nature of the investigation and the number of variables that might interfere when assessing the relationship between health and vegetarianism. Also, auto-reporting data using interviews is a subjective technique of study as opposed to other advanced quantitative approaches. Moreover, the studied sample was small and was not integrally formed from pure vegetarians; some were occasionally tempted or wished to eat meat. However, our study focused on vegetarians' attitudes, and not on their behaviors. From this point of view, we could state that we have obtained veritable data from a sample of Romanian participants. This study provides a valuable insight into health-related beliefs and practices and how a vegetarian diet might interact. Recommendations for future research are to explore the study further and supporting the findings by using more advanced techniques and more participants to participate in interviews.

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