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Research report

'Food hates' over the life course: an analysis of food narratives from the UK Mass Observation Archive



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ABSTRACT

This article presents data from the UK Mass Observation Archive drawn from the 1982 Winter Food Directive, which focuses on memories of childhood food 'hates'. Through our analysis of these data, we identify three main findings: (a) there is a discrepancy between individual-level and collective aggregate level food hates, which problematises the notion of commensality; (b) a small but powerful 'outlier' group of respondents, which we refer to as 'visceral repulsors', show relatively extreme reactions to certain foods throughout their lives; and (c) the duration and temporalities of food hates can be used to sketch a rough model of change and continuity of food hates over the life course. Finally, the discussion focuses on the food hate trajectories through the life course, situated in a social context, to explore the implications the findings may have for food and health policy more generally.

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Introduction

For the past three decades, there has been an explosion of research on food preferences and eating habits (Backett-Milburn, Wills, Roberts, & Lawton, 2010; Cheng, Olsen, Southerton, & Warde, 2007; Devine et al., 2006; Germov & Williams, 1999; Lang & Heasman, 2004; Mennel, Murcott, & Van Otterloo, 1992; Mintz & Du Bois, 2002; Murcott, 1998; Warde & Martens, 1998; Watson & Caldwell, 2004). The literature is vast, relatively eclectic and spans many disciplines. Much of this research aims to identify patterns in which food preferences impact on long term health, as well as how to modify 'bad' eating habits (Carrillo, Varela, Salvador, & Fiszman, 2011). This general approach to understanding food preferences and their impact on individual health has been the predominant way of approaching food and eating at individual and collective levels (Sobal, Kettel Khan, & Bisogni, 1998). Understanding which foods are eaten, when and why, it is suggested, helps to better predict and prevent veritable health outcomes that are postulated to be intrinsically connected with particular diets. Thus, health concerns around obesity and related illnesses, such as diabetes and heart disease, are rife within the literature, since it is assumed that these might be prevented and ameliorated if only people would eat

differently (Baker et al., 2010; Scarborough, Morgan, Webster, & Rayner, 2011).

Yet the difficulties of changing eating patterns are also widely recognised (Verplanken & Faes, 1999; Warde, 2012). Altering eating habits, once engrained with particular kinds of lifestyle, is much harder than steering young people into good habits in the first place. Therefore, forming 'good' eating habits early in life is seen as key driver to improving health outcomes (e.g. Erjavec, 2012; Kelder, Perry, Klepp, & Lytle, 1994; Williams, 2011). In turn, there is a growing emphasis on studying children and young people and understanding why they eat what they eat and what can be done about their eating preferences in order to prevent longer term health problems (e.g. Mikkelsen, 2011; Schwartz, Scholtens, Lalanne, Weenen, & Nicklaus, 2011; Stead, McDermott, MacKintosh, & Adamson, 2011).

Hence, food studies entail three assumptions that have for the most part become fairly mainstream 'taken for granted' positions. First, it is assumed that individuals will be and can be, so long as they are given the right kind of education and opportunities, influenced in what they eat (In the UK, the 5-a-day policy rests on this first assumption.) Second, it is assumed that, ultimately, although individuals choose what they eat, it is the geographical and socio-cultural environment in which individuals are situated that really matter in shaping food choices (Fisk et al., 2011; Larson & Story, 2009; Story, Kaphingst, Robinson-O'Brien, & Glanz, 2008). Put differently, change someone's environment and re-shaping their eating habits also becomes more likely (e.g. Glanz, 2009).

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Hence, many policy interventions focus on access to food in neighbourhoods (e.g. Larson, Story, & Nelson, 2009) and food education in schools and families, etc. (e.g. Backett-Milburn et al., 2010; Briefel, Wilson, & Gleason, 2009). Third, it assumed that the life course matters in relation to food and long term health outcomes. Thus, food studies tend to investigate not only what we eat, but also the extent to which what we eat matters *over time* (e.g. Kelder et al., 1994; Lake, Mathers, Rugg-Gunn, & Adamson, 2006).

Bearing these assumptions in mind, rather than examining what people eat, and why and how what they eat impacts later in life, this paper extends existing literature by exploring what people do *not* eat. After all, underpinning the assumptions is yet another a priori presupposition relating to food preferences, namely that people choose to eat some foods over other foods. By implication, some foods are positively avoided. The fact that certain foods are *not* eaten is necessarily implicit in existing research on food choice, yet seldom explicitly considered (MacClancy, Henry, & MacBeth, 2007). However, as will be argued, focusing on this aspect of 'food preferences' problematises the very basis of the three main assumptions outlined above. Approaching food and eating from this different angle raises new questions about the im/possibilities of change and continuity of eating habits over the life course.

Examining continuity in relation to what is *not* eaten offers rich insights into the individual level continuities that are sometimes present *in spite* of change throughout the life course and the socio-cultural environment in which any biography is constructed. Tracking the actual foods that are avoided throughout the life course also highlights how certain food hates are 'normalised', widely accepted or taken for granted. Indeed, the term 'food narratives' is used precisely to convey how the collective and the individual levels are intertwined and enmeshed in idiosyncratic stories about specific food hates. Investigating the continuities of foods not eaten acts much like a 'control' over time, like a baseline with which to gauge individual level change amidst so many social changes in which the individual is situated. As Mars and Mars (2004:75) suggest, 'Understanding patterns of repetition can tell us much about people's social organisation. If a structure can be thought of as made up of building blocks – then food and its context is the cement that shows how these blocks are bonded together'. As will be argued, patterns of repetition of what individuals have *not* eaten over time may offer a window into some of the continuities of social organisation that have endured.

The study: working with the Mass Observation Archive

The study draws on data taken from the UK Mass Observation Archive. The archive, now stored at the University of Sussex, UK, was established in the late 1930s (Madge & Harrison, 1937) and houses letters of a non-random sample of 'respondents', who answer various topic-focused 'Directives'. This article is based specifically on the 1982 Winter Food Directive, which poses many food related questions. Here, we focus on just two: the first asks about what individuals do not eat and why, and the second asks about memories of food, including childhood hates. (We have presented analyses of other questions elsewhere, Nettleton & Uprichard, 2011.)

As many authors have commented (e.g. Bloome, Sheridan, & Street, 1993; Hubble, 2005; Nettleton & Uprichard 2011; Sheridan, 1993a, 1993b, 1996; Sheridan, Bloome, & Street, 2000), Mass Observation data raise several methodological challenges, such as the blurriness of the sample details, missing details, and the idiosyncratic ways in which each letter is written. In citing respondents here, we render visible some of those idiosyncrasies by providing verbatim quotes (including spelling mistakes); where

available, we provide personal identifiers, such as gender, date of birth, self-reported occupation and location. Each quote includes the archival code (e.g. [A23F]), so readers can locate each document for further reference.

To analyse the material, we followed Savage's (2010) approach in his study of social class over time using Mass Observation although we sampled the documents slightly differently. Whilst Savage sampled respondents with surnames beginning with A–B, our approach was more methodical and went roughly as follows: (1) scan-read *all* documents to obtain initial impressions of the general form and content of the entire Directive; (2) alphabetically from A to Z, starting with the male respondents before moving to the females', closely read documents; (3) in the order of reading, select documents to photograph for in-depth analysis following grounded theory's (Glaser & Strauss, 1967) 'theoretical sampling' by 'constant comparative method', whereby selection was driven by how they *differed* from those already read; (4) repeat steps 2–3 until 'theoretical saturation'; and (5) read all documents again, to sieve out any remaining documents that still stood out as different; repeat steps 2–4 twice. This resulted in a sample of approximately 25% of the total documents written by adults, i.e. a total of 32 (45%) documents by men and 50 (20%) by women.

To aid the analysis, we also developed a data matrix to aid the systematic comparison of themes across cases, similar to that used in 'framework analysis' (Ritchie & Spencer, 1994; Srivastava & Thomson, 2009), where columns were key questions or themes and rows were individual respondents; each cell contained verbatim snippets corresponding to each question or theme for each respondent. This meticulous sampling and analytical procedure was deemed necessary to: (a) help minimise selection bias based on such things as legibility of handwriting, quality or colour of paper, etc. and (b) better synthesise the qualitative material with the quantitative material used elsewhere in the overall study. Thus, whilst we make no claim towards any statistical generalisations, we believe the analysis of this particular Directive is sufficiently rigorous to make what Payne and Williams (2005: 297) call 'moderatum generalisations', which are necessarily tentative, not intended to hold for all cultures across time and space, and remain subject to further research.

Similarly, although there are specific groups of individuals who actively avoid large groups of foods, such as vegetarians or those with specific health conditions like coeliac disease or food allergies, these groups are not considered to be special cases of food avoidance. Instead, we explore the commonalities shared across the whole sample, rather than within groups of people. After all, there is no reason to assume that sub-groups of particular food avoiders have a particularly 'special' life course. This may be incorrect, but it is nevertheless a reasonable position to start with, at least within this initial focus on which foods are not eaten over time.

The sheer quantity of written material is rather bemusing. Those that write very brief notes or simply list their food hates are few and stand out against the rest, who instead go to great lengths to qualify the extent of their 'food hates'. Indeed, much of what was written was qualifying, explaining and justifying their various 'hates'. Whilst we acknowledge that the term 'food hates' may be conceived of as 'food avoidance' or 'food dislikes', 'food hates' is preferred since it reflects both the wording of the questions and the empirical narratives of the mass observer respondents themselves. Likewise, we have deliberately mimicked the respondents in consistently referring to food 'hates', even though 'hate' sometimes implies 'disgust'. While disgust is an implicit part of the data, the line between 'hate' and 'disgust' is unclear: information on why a food is hated is not always given; other times, the information provided suggests that the food is rejected not because it causes disgust per se, but because of another reason (e.g. causes a headache). Moreover, we do not always know if a food

has even ever eaten. Usually, it is clear that it has been, but sometimes the opposite is true: something is hated even though it has never been tasted. Whilst this is not inconsequential to the interpretation of the data, we restrict the discussion to the form and content of the food narratives in general and the term 'food hates' is used with caution.

In what follows, we tease out three key findings that resonate throughout the data, each forming a distinct section of the paper. The first sketches how food hates allow both personal and social dimensions of food to be understood. The second outlines a particularly strong kind of food hate narrative by those we call the 'visceral repulsors', who have relatively intense food hates. The third relates to the duration and temporality of the food narratives, particularly as these concern the life course. In doing so, this section provides a rough model of change and continuity of food hates over the life course. Finally, the discussion reflects on food hate trajectories through the life course, situated in a social context, to discuss the implications the findings may have for food and health policy more generally.

Individually idiosyncratic versus collective commensality?

From a sociological perspective, food hates are interesting. As Lawler (2005:438) puts it, 'disgust is an immensely powerful indicator of the interface between the personal and the social', and so it is here with respect to food hates. The data suggests that *we each have our own individual set of food hate configurations*. For example, one might hate bananas, broccoli and offal, but there seems to be no pattern between a hatred of bananas with, say, that of broccoli and/or offal. Much analytical time and effort was spent verifying this point. Like a unique finger print, each individual referred to his or her own food hate configuration. This problematises the assumptions outlined in the introduction relating to food choices, since it suggests that at a *micro*-level, the configuration of food hates unique to each individual.

Furthermore, food hates reflect what Inglis et al. (2008) term the 'individually idiosyncratic', which is also always fundamentally social. They explain:

What people eat is to a certain degree individually idiosyncratic; but it also very much reflects the nature of the group(s) they belong to, and the like conditions of those groups. Thus dietary likes and dislikes, culinary preferences and alimentary avoidances, stimulants of appetite and those comestibles that provide disgust – all these things can be crucial points of investigation for the social scientist.

(Inglis, et al., 2007: 2)

Indeed, there seems to be something peculiarly 'British' about the hated foods at a more macro-level. The narratives go beyond merely reflecting the individual in a wider social context. In a sense, they problematise commensality. Normally, the notion of commensality tends to focus on what happens when we are 'eating food together' or sharing meals (Sobal & Nelson, 2003), but our argument here is that groups can also demonstrate commensality through 'not eating certain food/s together', through the shared habitual collective rejection of foods at an imagined macro-level 'shared meal'.

We saw something like this recently in the UK in relation to the 'scandal' surrounding horse meat, which is collectively rejected in the UK, even though it is an acceptable meat in other national contexts. Likewise in our data, a dislike of 'milk puddings', such as tapioca, semolina or rice pudding, often discussed in relation to memories of school dinners not only shouts out 'British' school diet, but also very much one located in the 1950s and 1960s.

Indeed, many list their food hates and go on to also locate some of them in memories of collective school meals, as in seen here:

Tripe (the very look of it, despite my northern background!) black pudding, (ditto), hearts (too fatty), swede (loud complaints from my husband that I do not make swede which he now gets only when he visits his parents!). The odour as we lifted the lid off the tin at school dinners was enough to put anyone off for life!). [B70F]

Milk puddings which I heartily dislike. This may stem from memories of school dinners. [A09F, 1939]

Likewise, it is hard to imagine the dislike for offal and liver to be such a prevalent food hate across the life course in all other national contexts. This may also reflect the likely over representation of white, middle class respondents in the sample. Yet, for some, 'Liver was and still is the one food [they] would not attempt to eat' [G216F] and a food they 'have never learnt to like' [D166M]. Indeed, hating liver was normalised: 'Obviously I have some dislikes, the most intense of which is liver (intense is not strong enough)' [G216F] and when it was not hated, it was noted as an exception, as this woman explains: 'I do not have any strong dislikes for food other than all types of offal with the exception of liver' [A27].

Thus, we see a collective commensal rejection of certain foods. As Fischler (2011) explains:

Commensality is both inclusive and exclusive: it creates and/or sanctions inclusion (even transient inclusion) in a group or community, as well as exclusion of those not taking part. It can manifest equality (around the fire or a round table) or hierarchy (who gets served first or sits at the 'high table'). It provides the script or a template for many or most of human eating occurrences.

(Fischler, 2011: 533)

Yet, these features of commensality do not go away because key foods are *not* eaten. Commensality, we argue, is also present in the *collective rejection* of certain foods, which unites individuals at a more macro-level, in the way that they sit down to dinner and *reject the same foods*. Thus, to adapt Simmel (1997 [1910]: 130), 'Persons who in no way share any special interest can gather together at the common meal *in their rejection of certain foods*'. Hence, rejecting foods that have symbolic cultural significance at a collective, more macro, possibly national level, is another way that individual food hates create bonding and bring individuals together, especially over time.

Visceral repulsors

A key food narrative to emerge was expressed by those we refer to as 'visceral repulsors'. The 'visceral repulsors', we suggest, passionately, emotively and vehemently dislike or very deliberately avoid a particular food (usually only one) because they find that food to be utterly repulsive. The extent to which a food is hated may seem to be a matter of taste, but the 'visceral repulsors' suggest that there is more to it than that. As Rozin, Haidt, McCauley, and Imada (1997) note, some foods are considered so repulsive that they are 'inedible'. They have bodily rejections, which are largely beyond their control; these foods, many suggest, even make them feel 'sick'. For example:

He [husband] won't touch eggs in any form because just the smell of an egg makes him feel sick. He says that as a child he was always being given eggs and told to eat them and I suspect that this is what has put him off, literally.

[Female, S502F, 1956, Medical secretary, Maidenhead]

I hated, to death the fact that my father fished for eels and brought them home for my mother to jelly. They were disgusting things and when they were chopped up all the little bits would jump down the big wooden draining board, all on their own! Yuk. I could never eat them and I never actually saw my mother do so either now I come to think of it!

[Female, O412F, Housewife, 1944, Bedford; original emphasis]

Sometimes, these ‘visceral repulsors’ respond to the visceral reactions of others they know. For example, here we have a 38 year old woman commenting on her husband’s extreme reaction to meat:

... Roger [husband] is very difficult, he has I have tried to explain has [sic] a phobia and it is most meats that he abhors, and when he see’s [sic] raw meat or mostly internal organs of animals, he’s most likely to faint, well he’s improving slowly, but he would never eat anything like that.

[Female, C141F, 1944, Typist]

Hating something ‘to death’ and feeling ‘sick’ by the mere smell of the hated food were common throughout the food narratives of the ‘visceral repulsors’. When ‘hated foods’ become ‘inedible’ they tend to cause extreme emotive reactions, which are full of affect, permanent and powerful. They tend to involve talk about the way the body is rendered into a particular state of being. Vomiting, nausea, hives, and an emotional and bodily recoil were expressed in this category of food avoiders, echoing at times the kind of reaction shown in studies on ‘disgust’ (Angyal, 1941; Miller, 1997; Rozin & Vollmecke, 1986) or ‘food allergies’ (Asero et al., 2007; Kerr, Woods, Nettleton, & Burrows, 2009; Nettleton, Woods, Burrows & Kerr, 2010). This kind of intense and visceral food hate manifests itself where a food is considered to be so ‘repulsive’ that the individual ‘loathes’ and ‘cannot abide’ it. Indeed, the mere act of speaking about the urgent need to avoid the food can cause anxiety in itself.

The interrelation between food and identity has been documented elsewhere (Caplan, 1997; Douglas, 1984; Fischler, 1988; Ohunki-Tierney, 1993), as have the ways in which identity, food and disgust are bound closely together. As Lawler (2005:438) suggests, whilst there are many theories about disgust, what is shared between them is that disgust has little to do with the object of disgust in itself. Instead, what is important is ‘the relationship between the disgusted and the object of disgust’ with ‘an emphasis on an ontological grounding to disgust: part of who we are relies on not being (or liking) the disgusting object’. Here, we want to suggest that the interrelation between food, disgust and identity is so intertwined that the ‘visceral repulsors’ have such extreme reactions to particular kinds of foods they also *become* their food dislike (see Miller, 1997 on this issue). This is illustrated in the following quote in which a friend’s ‘absolute loathing of cheese’ is contrasted with his own ‘dislike’ for cucumber:

The only food I have personal dislike for is cucumber. This I will under no circumstances eat. I have a friend who has an absolute loathing of cheese. Whilst not actually allergic to it, the sight of cheese let alone eating it, upsets him. *He’s become celebrated for it. Friends say ‘it’s like kryptonite to Superman.*

[Emphasis added, Male F191, 1947, Civil servant, Manchester]

‘Visceral repulsors’ are those for whom a particular food causes both extreme distress and discomfort in the way that they are used as ‘personal identifiers’. Their food narratives of hate are embodied, personalised and they follow individuals throughout their lives. Indeed, as we show below, the force of their rejection to certain foods as well their appropriation of that specific food rejection to the

core of their being is reflected in how they use duration to further qualify that this kind of food rejection is no ordinary kind of food hate; instead, it is intense, enduring, permeating their entire life narrative. For this group, the frequently said phrase, ‘we are what we eat’, becomes ‘we are what we do *not* eat’.

Change and continuity over the life course

Whether or not something is *still* hated in adulthood is one of the most common strategies employed when discussing food hates. The *duration* of the food hate is used as a measure of hate. Thus, one woman [A9F, 1937, Canvasser, Sowerby Bridge] suggests her ‘heartily [sic] dislike’ for milk puddings “may stem from memories of school dinners, and a particularly obnoxious pudding called ‘Barley Kernels’” and that she ‘heaves’ even as she writes about this particular food hate in the present. Most stress the extent of their hate by explaining that they *still* cannot eat one thing or another, as illustrated by the following extracts:

“Hates: Spinach (now tolerated if made with butter and black pepper). Swede, turnips (school memories), custard, chips (both much enjoyed now), borscht (should be pickled or served cooked in white sauce) sugar in tea (now extended to coffee too), warm milk (yuck!) sweets (still rarely eaten – chocolate is an exception: liked but seldom indulged in!), skin on milk puddings or custard (still disliked), carrots (enjoyed raw but not cooked as a child, now eat both), honey (still not liked).” [Female, B70F, Lecturer, 1950, Uxbridge]

“...there were many, many childhood hates, most of which I still have apart from mushrooms which I now adore.”

[Female, B83F, 1944, Writer/Drycleaner, Birmingham]

In thinking about the entire pattern of food hates across the different narratives, then, we have a basic typology of food hates over the life course (see Fig. 1). This broadly delineates the possible stories of food hates over time by anchoring continuity and change of the food hate onto childhood and adulthood. Although basic, it is nevertheless robust insofar as it stays close to the data and reflects the ordered way that the messy data can be conceptualised by using *duration* as the mechanism for distinguishing the different food hate ‘trajectories’.

Thus, the four ‘trajectories’ of a food hate over the life course are: (i) foods hated as a child and as an adult; (ii) foods eaten as a child, but avoided as an adult; (iii) all foods loved as a child and as an adult; and (iv) foods hated as a child, but eaten as an adult. Although the majority of the sample fit trajectories (i) and (iv), almost all wrote about the way their food hates did or did not change over time; time and temporality were intrinsic to the food hate narratives. Typically, respondents recounted foods that they hated as children, but then went on to eat as adults, as one housewife (A27F, 1950, Hempstead) explains: ‘I detested any form

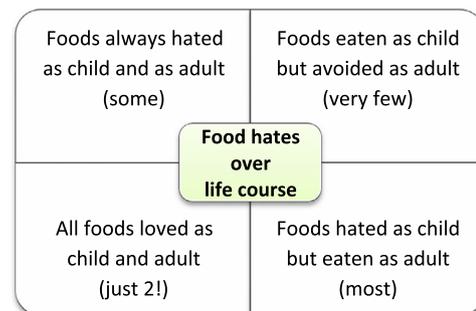


Fig. 1. Typology of food hates over the life course.

of greens especially brussel [sic] sprouts as a child but they are now my favourite vegetables and I love all greens. I also disliked liver and fish as a child, but enjoy them both now'. As one male observer echoed, 'I... hated 'greens' but have been educated to 'tolerate' them' (G239, 1924, Teacher/deputy head, East Sussex).

The change in food hates between childhood and adulthood is so prevalent that it was by far the most discussed kind of food hate over the life course. Indeed, one might say that the 'visceral repulsors' are a minority group at one end of the food hate spectrum, with a small but strong group of respondents identifying this kind of powerful food hate throughout their life course, and at the other end lies the vast majority for whom particular food hates vary over time between childhood and adulthood. We expand on this point in the remainder of the paper.

Discussion

In this final section, we focus on the issue of food trajectories through the life course, situated in a social context, and discuss the implications the findings may have on food and health policy. After all, a key pattern that emerged from all the food narratives was that respondents qualified the extent of their rejection for particular foods through notions of *duration*. Duration is used as the yardstick of the extent to which a hated food is or is not tolerated, but it also seems to be used as a way of understanding transformations in food tastes over time. More precisely, whether hated foods have journeyed with individuals throughout their entire life course or whether the foods that they hated as children eventually came to be tolerated or even enjoyed as adults was a recurring theme. Generally speaking, the narratives had the following 'structure' (see Riessman, 1993): mention specific food item, then reflect on duration in terms of childhood and adulthood, then if an explanation about the duration is provided, note whether this food hate has endured or changed since childhood. Typically this involved emphasising the continuity of the hated food, which has 'always' been or is 'still' avoided or hated. Thus the temporality of the life course itself is used to stress the force with which the food has *always* been hated and that it is *still*. Alternatively, if food hates have changed at all over time, then the food narratives hinge around a 'then and now' arc where the food hates divide the different stages of the life course. Indeed, reflections on food hates typically divide the life course into two: childhood and adulthood; there are no grey areas. Of course, this structure to the responses may have as much to do with the framing of questions as the actual answers provided. Nevertheless, what is striking is its regularity and consistency throughout the sample of documents.

What is interesting is that the temporality inscribed in the narratives becomes a key 'divider' between two types of food hate narratives:

1. *'Always' and 'still'*: These are food narratives in which one or more foods have *always* been avoided, considered repulsive or hated since childhood, and *still* are in adulthood, right through the life course; these food hates follow the individual throughout their life.
2. *'Then and now'*: These are food narratives which typically involve food hates that were present in childhood but not in adulthood. Most respondents reported this kind of food hate.

The only exception came from those who claimed to eat everything and always had, of which there were only two out of our sample of 82 cases. Only one suggested a 'reverse' scenario of loving a food but still not being able to eat it, stating that her 'husband loves rice pudding, but if he eats it he is immediately sick' [A23F, 1912, Nurse, Retired, Lincoln; original emphasis]. The rest, however, fall into one or both of these two types of food hates (see Fig. 2).



Fig. 2. Food hate narratives of duration throughout the life course.

The fact that most respondents discussed the ways in which their food hates changed over time, specifically in relation to being able to enjoy or tolerate the foods they avoided as a child is significant. On the one hand, it normalises, to some extent, the notion that children are 'fussier' eaters than adults. On the other, it raises the question as to whether adults go onto to actually eat those foods because so much effort from parents goes into trying to get their children to, say, 'eat greens', as though the parental food narratives become so internalised that they are eventually appropriated and practiced, or whether in fact most children dislike some foods, but then generally grow out of those dislikes and eat those foods as adults. A combination of both is likely to be at work.

Hence, our data suggest a slightly different model to food trajectories than many authors explicitly adopting a life course approach to food choice (e.g. Devine, 2005; Devine, Connors, Bisogni, & Sobal, 1998; Wethington, 2005) in which the life course is depicted as a linear form, from past to present. As Corna (2013) sums up in relation to research on socioeconomic inequalities in health:

there are common underlying threads in this work, namely, the concepts of cumulative exposure (or duration) and social trajectories (or pathways). The former outlines how the length of time in disadvantaged circumstances is particularly important for understanding subsequent health disparities (cumulative exposure), while the latter suggests that early disadvantage sets individuals on disadvantaged trajectories or pathways over time.

(Corna, 2013: 2)

In our data, however, we find that initial conditions in childhood lead to multiple possible outcomes in adulthood (see Fig. 2). Hating one food as a child does not imply hating another as an adult; vice versa, hating certain foods as an adult does not imply that those foods were hated as a child. Thus, the point remains as to whether there might be a case of relaxing the emphasis on food policies aimed at targeting children's diets specifically where the focus is on increasing the uptake of particular foods items (e.g. Brug, Tak, Velde, Bere, & de Bourdeaudhuij, 2008; Perez-Rodrigo et al., 2005; te Velde et al., 2008).

This may seem counter-intuitive, as the idea that children must eat well in order to eat well as adults is so ingrained in everyday life as well as the research literature (Dovey, Staples, Gibson, & Halford, 2008; Rozin & Vollmecke, 1986). Yet, there is a large and rapidly growing literature suggesting that most individuals lose a number of taste aversions as they grow up (Birch & Marlin, 1982; Pliner, 1994; Raynor & Epstein, 2001; Rolls, 1994; Stein, Nagai, Nakagawa, & Beauchamp, 2003). This supports the notion that food hates are temporal and that perhaps there are as many reasons to think that the continuity and change of particular food hates over the life course have as much to do with the biological necessity of ageing as the socio-cultural interactions of likes and

dislikes of foods over time. This is not to say that normative pressures to stop being so 'fussy' are caused by age per se. Part of the transition from childhood to adulthood could be a rejection of childish things. Having a certain food hate may be seen as childish just as the rejection of a certain food on a particular occasion may be a lot more socially unacceptable as an adult than it is as a child. Our point is that hating a food in childhood may or may not lead to hating that food as an adult precisely because of complex nonlinear biological and socio-cultural interactions taking place over time.

Of course, allowing particular food hates to endure is not necessarily the right way forward either. There is certainly no harm in encouraging a balanced diet in both children and adults, and the long term health benefits of children eating particular foods are likely to outweigh the costs of avoiding particular foods. However, given the financial implications associated with children's healthy eating and the sheer emotional labour that parents and other adults put into encouraging children to develop particular tastes and eating preferences, there may be a case for having greater trust in the pattern, which is strongly supported by empirical research, in the way that most children have strong aversions towards certain foods, but then grow up to become adults who can tolerate and enjoy those same foods. As one woman comments, 'for myself my taste in foods have changed greatly. [...] I eat many items that I hated when a child' [C141F, 1944, Typist].

What we do *not* eat varies over time. We might even consider the reverse scenario of *not* varying what we eat over time to be problematic in the long run. This life course perspective to food trajectories – or rather, more specifically, to *food hate* trajectories – both extends and problematises research on food choice and preference over time. Indeed, what is suggested is there may be micro-individual food configurations that are *not* shared, whilst at the same time there may be macro-level social patterns that *are* shared. By implication, there may be a shared invariance of *both* change and continuity within the life course. That is, most people report changes to their food hates over time, including childhood food hates that become tolerated or even liked, even though there remains a small group of 'visceral repulsors', who may vehemently reject a particular food over time.

Hence, this research suggests that examining food hates as a necessary element to food choice research is fundamental to being able to piece together a possible causal narrative that explicitly taps into micro-macro interactions relating to the individual in society. This study has but provided a tentative first step towards such an approach. Cross-national comparative research focusing on food hates over multiple cohorts over time would be beneficial and greatly substantiate and/or contradict the findings presented here. Exploring similar data in other national contexts and alongside what is eaten over the life course is necessary to fully understand the extent to which patterns are rooted in individual and collective histories. Nevertheless, the main point of the article remains: in order to understand patterns of change and continuity of food and eating over time, food hates over the life course must be given greater attention than they have been so far.

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