

Article

# Factors Affecting Consumers' Purchase Behaviour for Health and Wellness Food Products in an Emerging Market

Global Business Review
I-18
© 2018 IMI
SAGE Publications
sagepub.in/home.nav
DOI: 10.1177/0972150918795368
http://journals.sagepub.com/home/gbr



Tabassum Ali<sup>1</sup> Aftab Alam<sup>2</sup> Jabir Ali<sup>3,4</sup>

#### **Abstract**

This article aims at identifying the factors affecting the buying behaviour of the consumers for health and wellness food products in India, based on a structured primary survey of 218 respondents in the city of Lucknow, India, using the stratified random sampling technique. The survey data has been analysed using appropriate statistical tools such as descriptive statistics, factor analysis and regression analysis. The retail value of health and wellness foods in India has shown a significant annual growth of 14.3 per cent during the last decade. Consumers' preference for health and wellness food product attributes indicate that quality and health benefits are perceived as very important and extremely important by more than 75 per cent of the respondents. Better-for-you (BFY) food products comprise the major share of 32 per cent of the health and wellness food basket of the consumer. Regression results clearly indicate that socio-demographic profile of the consumers, product attributes, market attributes and psychological factors are more likely to influence the consumers' health and wellness food purchase decision. This study provides practical insights for the companies involved in producing and marketing health and wellness food products in terms of the increasing consumer demand for healthier food choices.

#### Keywords

Health and wellness food, consumer behaviour, purchase decision, functional food, organic food, emerging market, India

### Corresponding author:

Tabassum Ali, Department of Business Administration, Khwaja Moinuddin Chishti Urdu, Arabi-Farsi University, Lucknow, Uttar Pradesh 226013, India.

E-mail: tabassumali@live.com

Department of Business Administration, Khwaja Moinuddin Chishti Urdu, Arabi-Farsi University, Lucknow, Uttar Pradesh, India.

<sup>&</sup>lt;sup>2</sup> Department of Business Management, Faculty of Management & Research, Integral University, Lucknow, Uttar Pradesh, India.

<sup>&</sup>lt;sup>3</sup> Institute of Cooperative & Corporate Management, Research & Training (ICCMRT), Lucknow, India.

Current Affiliation: National Institute of Agricultural Extension Management (MANAGE), Hyderabad, Telangana, India.

#### Introduction

Consumer food purchase behaviour is changing significantly across the world and consumers are now getting more and more attracted towards good taste, convenience and health enhancing properties of food (Ali, Alam, & Ali, 2015; Bruhn, 2008; da Silva & Conti-Silva, 2016; Hansen, 2005; Lessa, Zulueta, Esteve, & Frigola, 2017; Shamal & Mohan, 2017). The consumers are now becoming more conscious of the relationship between diet and health and hence are becoming more motivated to take care of their health by way of consuming healthier food. Increased health consciousness and changes in lifestyle, coupled with awareness about the benefits associated with health and wellness food have led to significant changes in consumer behaviour towards healthy food consumption in the recent years (Crofton, Markey, & Scannell, 2013; Hansen, 2002; Lagerkvist, Okello, Muoki, Heck, & Prain, 2016; Quah & Tan, 2009). Besides, various factors such as rise in disposable income, change in family structure, urbanization and increase in consumer awareness have also affected the health and wellness food consumption (Yun & Pysarchik, 2010).

Historically, Indian consumers have preferred fresh and unprocessed food over processed and packaged food; however, the recent changes in consumption patterns, particularly in the middle- and high-income groups, show ample opportunity for strengthening processed and packaged food segments in the country (Chengappa et al., 2005; Deininger & Sur, 2007; Ling, Pysarchik, & Choo, 2004). It is argued that the perceived quality of 'healthiness' in a food product has now become the consumers' main motivation in their food choices (Bech-Larsen & Grunert, 2003; Sondhi & Vani, 2007). Growing at an annual compound growth rate of about 7 per cent during the period 2005–2015, the global health and wellness food market has been estimated at US\$ 733 billion. India also has a huge market for health and wellness food products with a market size of ₹669.4 billion in 2015, which has significantly increased from ₹117.5 billion in 2002 (Euromonitor International, 2015). The retail value of health and wellness food in India has grown at an annual compound growth rate of 14.3 per cent during 2002–2015 and is likely to grow at 12.9 per cent per annum during 2015–2020.

Health and wellness food products are usually associated with distinct health benefits over other food products available in the market. Health and wellness food is 'a food and beverage' that imparts a physiological benefit that enhances overall health, helps prevent or treat a disease/condition, or improves physical or mental performance via an added functional ingredient or processing modification (Divine & Lepisto, 2005; Green, 2006; McMahon, Williams, & Tapsell, 2010; Sloan, 2000). According to Euromonitor International, health and wellness food products are broadly categorized into five groups: Better-for-You (BFY), Food Intolerance (FI), Functional/Fortified Food (FF), Naturally Healthy (NH) and Organic Food (OF). Better-for-You food category includes all the packaged food and beverages where the amount of substances considered less healthy are removed or reduced during production. Food Intolerance category includes gluten-free, lactose-free and diabetic food products. Fortified/Functional products can be defined as those food items to which healthy ingredients have been added. Naturally Healthy category includes food and beverages on the basis of naturally containing a substance that improves health and well-being beyond the product's pure calorific value. Further, Organic Foods is a category that includes food produced through a system of farming that maintains and replenishes soil fertility without the use of toxic and persistent pesticides and fertilisers. With the increasing significance of health and wellness food products, the consumers are also getting interested in learning more about food and beverages that may provide additional health benefits and help in reduction of food-borne and lifestyle diseases.

There has been increasing incidences of food-borne diseases, coronary heart diseases, diabetes and problems of obesity in the recent years, and consequently, the perspective of the consumers about food

intake is changing towards healthy diet. The health-conscious consumers in India are now searching and opting for food products that offer additional health benefits and added nutrients, such as proteins, vitamins, minerals and even omega-3, which offer significant health benefits over the other regular food products, such as naturally healthy beverages like green tea and 100 per cent juices instead of carbonates (Hudson, 2012). The Indian consumers are no longer interested in health and wellness food only for the sole purpose of being disease-free, but they also associate with these food products with increased confidence, freedom from stress and a healthier and more attractive appearance (Jha & Sharma, 2015).

This research article is structured in nine sections. The next section deals with the literature review, which is followed by the objective and rationale of the study. A conceptual research framework and the research methodology are discussed in the fifth and sixth sections. The result of the analysis and discussion is given in the seventh section of the article followed by the conclusion and managerial implications. Limitations and future research directions are discussed in the last section of this article.

### Literature Review

Consumer behaviour, being an aspect of human behaviour in general, is thus studied by many social sciences such as economics, psychology, sociology, anthropology or management (Galalae & Voicu, 2013; Nicholson & Xiao, 2011; Wells, 2014). McMahon et al. (2010) reviewed how the meaning of wellness and well-being is perceived and understood across various disciplines and its effects on the consumers' choices for healthy foods. There are several research evidences on understanding the consumers' behaviour in the form of purchase intention and attitude towards healthy food products (Chung, Stoel, Xu, & Ren, 2012; Granzin, Olsen, & Painter, 1998; Krystallis, Fotopoulos, & Zotos, 2006; Quah & Tan, 2009). Most of these studies have focused on functional foods and organic food products, since these are the two most common and popular types of health and wellness food categories. Chakrabarti and Baisya (2009) investigated consumer purchase behaviour for organic foods by constructing a model based on variables like consumer innovativeness, the related perceived risk and personal influence and the demographic characteristics and time of adoption.

Badrie, Reid-Foster, Benny-Ollivierra, and Roberts (2007) analysed the perception, opinions, choices and motives of the exercise enthusiasts in West Indies, regarding improvement of health through the consumption of functional foods, using primary survey of 120 respondents through structured questionnaire. Annunziata and Vecchio (2011) analysed consumer attitudes and the factors that influences the consumers' attitudes towards functional foods in Italy, based on a primary survey of 400 households, which revealed three groups of consumers on the basis of demographic characteristics with different confidence levels, satisfaction and health perception of functional food.

Chase et al. (2009) studied the purchase behaviour of the Canadian consumers with regard to innovative functional food products, based on socio-demographic profiles of the consumers. Kareklas, Carlson, and Muehling (2014) provided a theoretical assessment on the factors influencing consumer purchase behaviour for organic food products. Kapoor and Munjal (2017) segmented Indian Women consumers using cluster analysis based on their health orientation and perception towards functional foods. Azam, Othman, Musa, Fatah, and Awal (2012) analysed the factors affecting purchase intentions of the consumers for organic food products using primary consumer survey of 250 respondents in Malaysia. Chen and Lobo (2012) investigated the factors affecting consumers' organic food purchase intentions in urban China by developing a conceptual model based on Theory of Planned Behaviour, Consumer Decision-Making Process and Hierarchy of Effects Model, based on a survey of 960 respondents.

## **Research Objectives**

This article aims at identifying the factors affecting buying behaviour of the consumers for health and wellness food products in India. In particular, the study evaluates a set of variables related to socio-demographic profiles of the buyers, product attributes, market characteristics and psychological factors, which are likely to influence the purchase decisions for health and wellness foods in India.

## Rationale of the Study

Most of the studies undertaken for understanding the consumers' attitudes towards health and wellness foods and factors affecting the purchase decisions have been conducted in the developed markets, whereas there is rapid growth in the market potential in emerging markets like India. Consumer purchase behaviour for food is experiencing significant transformation across the world and consumers are now getting attracted towards good taste, convenience and health enhancing properties of food. The health and wellness food producing companies are increasingly undertaking newer initiatives to target the growing consumer markets. Because of the initiatives of these companies, a number of food products are being developed and are constantly coming up in the markets, aiming at satisfying the consumers' need for healthier food options. Therefore, it becomes imperative to understand of the market structure of health and wellness food industry and factors affecting buying behaviour for healthier food choices in the Indian market.

## **Conceptual Research Framework**

Empirical studies provide sufficient evidences on implication of demographic variables on purchase decisions (Cranfield, Henson, & Masakure, 2011; Goetzke & Spiller, 2014; Kapoor & Munjal, 2017; Petrovičová, 2009). Product and market attributes are other set of variables affecting the purchase decisions for healthy food products (Azam et al., 2012; Suh, Eves, & Lumbers, 2012). Divine and Lepisto (2005) examined the consumer's demographics, personal value and psychographic antecedents as important determinants of healthy lifestyle and food consumption. A conceptual research model has been developed and tested to understand the factors affecting purchase decisions of consumers on health and wellness food products. It has been assumed that socio-demographic profile such as age, gender, education, income and so on has significant influence on the purchase behaviour towards health and wellness food products. Further, this study evaluates the significance of the influence of product attributes, market attributes and psychological antecedents have on the purchase behaviour for health and wellness food products. Based on these assumptions, a conceptual research framework for this study is depicted in Figure 1.

## Methodology

#### Data Collection

To understand the consumer behaviour for health and wellness food products, a primary consumer survey has been conducted in the city of Lucknow, India. Lucknow, a large and emerging city in northern

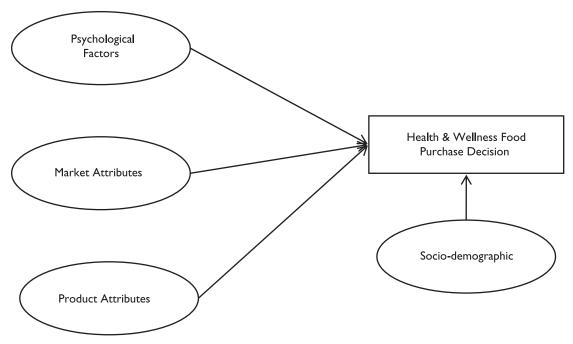


Figure 1. Conceptual Research Framework

Source: Prepared by the author.

India, is the capital of the state of Uttar Pradesh. A structured questionnaire based on primary survey was conducted using a multistage random sampling technique. The city of Lucknow comprises six administrative zones as per the Lucknow Development Authority's city development plan (2006), out of which three zones were selected using a random technique. At the second stage of sampling, all residential localities of the selected zones have been listed and three residential localities have been selected randomly. Finally, 25 households from each selected residential locality have been selected randomly from the voter list available with the local authorities. However, a total of 218 respondents from nine localities were included in the final analysis as seven respondents did not provide the complete information.

## Survey Instrument

A detailed structured questionnaire was designed and developed for the consumer survey covering various aspects of consumer purchase behaviour related to health and wellness food purchase. The questionnaire comprised two sections: (a) Information on demographic profile of the respondents and (b) Consumers' buying behaviour for health and wellness food products. A 5-point Likert scale (1 = not at all important, 2 = somewhat important, 3 = important, 4 = very important and 5 = extremely important) has been developed for recoding the consumers responses on factors affecting their buying behaviour. A pilot survey was conducted among 30 respondents to test the questionnaire and necessary modifications were made for final survey. Cronbach's alpha has been calculated to analyse the reliability of the scale used in the questionnaire, which is widely used test to measure the internal consistency of

the items in a survey instrument (Bonett & Wright, 2015; Christmann & Van Aelst, 2006; Cronbach, 1951; Helms et al., 2006). The construct validity has been done for all three scales developed for product attributes ( $\alpha = 0.842$ ), market attributes ( $\alpha = 0.802$ ) and psychological factor ( $\alpha = 0.685$ ). The survey was conducted in the evening or weekends to ensure availability of the respondents who were responsible for making the purchase decisions in their respective households.

### Data Analysis

The survey data has been analysed using various statistical tools and techniques such as descriptive statistics, factor analysis and regression analysis. Based on the nature of the dependent variable, an ordinary least squares (OLS) regression model has been developed and estimated to analyse the factors affecting the buying behaviour of consumers for health and wellness food products. Under the regression model, the number of health and wellness food products purchased by the respondent is considered to be the dependent variable with four sets of independent variables comprising socio-demographic profile of the consumers, product attributes, market attributes and psychological factors, which are likely to

Table 1. Description of Regression Variables

Regression variables	Code
Dependent variable	
Number of health and wellness food products purchased	NHW
Independent variables	
Socio-demographic variables	
Gender (I = male, 0 = female)	GEN
Age (I $\geq$ 45 years, 0 $\leq$ 45 years)	AGE
Education (I $\geq$ PG, 0 = otherwise)	EDU
Occupation (I = employed, 0 = unemployed)	OCCP
Income (I ≥ ₹40,000, 0 = otherwise)	INC
Family size ( $1 \le 4$ members, $0 = otherwise$ )	FSIZE
Product attributes	
Product quality	PQ
Taste and flavour	TF
Packaging	PKG
Pricing	PRI
Market attributes	
Market offerings	MO
Shopping experience	SE
Market services	MS
Psychological variables	CD
Social prestige Health consciousness	SP HC
Information seeking	IS
- Information seeking	15

Source: Prepared by the author.

influence the level of health and wellness food purchase. The empirical model for analysing the factors influencing the purchase behaviour of consumers for health and wellness food products is defined as:

$$P = \alpha + \sum_{i=1}^{n} \beta_{1} X_{i} + \varepsilon_{i}$$

where P = purchase of health and wellness foods,  $X_i$  is matrix of explanatory variables comprising sociodemographic factors, psychological factors, product attributes and market attributes,  $\beta$  is a vector of unknown parameters,  $\alpha$  is the intercept and  $\varepsilon_i$  is the error term.

Based on the variables used in the regression analysis, regression equation can be written as follows:

$$NHW = \alpha + \beta_1 GEN + \beta_2 AGE + \beta_3 EDU + \beta_4 OCCP + \beta_5 INC + \beta_6 FSIZE + \beta_7 PQ + \beta_8 TF + \beta_9 PKG + \beta_{10} PRI + \beta_{11} MO + \beta_{12} SE + \beta_{13} MS + \beta_{14} SP + \beta_{15} HC + \beta_{16} IS + \varepsilon$$

Table 1 provides description of variables used in the regression model. Dependent variable is indicated as the number of health and wellness food products purchased by the sample respondents. Socio-demographic variables have been transformed into binary values to assess the level of effect on the dependent variable. Further, independent variables related to product attributes, market attributes and psychological factors have been generated based on associated variables extracted by the factor analysis.

### Socio-demographic Profile of the Respondents

Table 2 provides socio-demographic profile of surveyed respondents. The profile of the respondents by gender shows that out of 218 respondents, about 70 per cent were males who normally make most of the household purchase decisions. The age distribution shows that 19.3 per cent respondents belong to the age group of below 25 years, 25.2 per cent were from the age group of 25–34 years, 27.1 per cent from the age group of 35–44 years, 18.8 per cent from the age group of 45–55 years and 9.6 respondents belong to the age group of 55 years and above. It is evident that most of the respondents surveyed were from general social category with a share of 62 per cent followed by other backward classes (27%) and schedule castes and tribes (11%). The educational profile of the respondents highlights that only 5 per cent respondents had education below higher secondary, 45.5 per cent respondents were graduates, 31.2 per cent respondents had postgraduate degrees, 12.4 per cent respondents had professional degree/diploma and 6 per cent respondents were PhD holders.

As far as occupation is concerned, 30.7 per cent respondents were government servants, 23.9 per cent respondents were doing private jobs, 16.1 per cent respondents had their own businesses, 4.6 per cent were retired professionals and 24.8 per cent respondents were unemployed. Students, homemakers and those seeking jobs have been included in the unemployed category. The income profile of the respondents show that 8.3 per cent respondents were having the household income of less than ₹20,000 per month, 20.2 per cent respondents belonged to the income group of ₹20,001–40,000 per month, and 22.5 per cent were from the income group of ₹40,001–60,000 per month. The income group of ₹60,001–80,000 consisted of 18.8 per cent respondents and ₹80,001–100,000 income group had 17 per cent respondents. The family structure of the respondents shows that 66.1 per cent respondents came from families having up to four family members. 19.3 per cent respondents belonged to families having 5–6 members, 7.8 per cent respondents came from families having 7–8 members and 6.9 per cent respondents were having nine or more than nine family members.

Table 2. Socio-demographic Profile of Respondents

Indicators	Number	Percentage
Gender		
Male	152	69.7
Female	66	30.3
Age distribution		
< 25 years	42	19.3
25-34 years	55	25.2
35-44 years	59	27.1
45-54 years	41	18.8
≥ 55 years	21	9.6
Social category		
General	136	62.4
OBC	59	27.1
SC/ST	23	10.6
Education		
Sec./High. Sec.	11	5.0
Graduate	99	45.4
Post Graduate	68	31.2
Dip/Profession course	27	12.4
PhD	13	6.0
Occupation		
Govt. service	67	30.7
Private service	52	23.9
Business	35	16.1
Retired	10	4.6
Unemployed	54	24.8
Monthly household income		
Less than ₹20,000	18	8.3
₹20,001–40,000	44	20.2
₹40,001–60,000	49	22.5
₹60,001–80,000	41	18.8
₹80,001-100,000	37	17.0
More than ₹100,000	29	13.3
No. of family members		
Up to 4	144	66.1
5–6	42	19.3
7–8	17	7.8
9 and above	15	6.9

Source: Authors' calculations.

## **Analysis**

## Consumers' Response on Product Attributes

Consumers' buying decisions are largely influenced by the product attributes (Alemu, Olsen, Vedel, Pambo, & Owino, 2017; Elzerman, Hoek, van Boekel, & Luning, 2011; Lagerkvist et al., 2016; Magalis,

Giovanni, & Silliman, 2016; Tirelli & Martínez-Ruiz, 2014). The principle of Lancaster's characteristics approach provides key theoretical insights on consumers' choices and preferences for products while making a purchase decision (Fernandez-Castroa & Smith, 2002; Lancaster, 1966). In the original theory, Lancaster propounded the idea that products are primarily consumed for the characteristics within the products. Therefore, product attributes have greater influence on the purchase decision. Food products also constitute a bundle of attributes and these may serve as important indicators influencing the consumers' purchase decisions. The consumers' responses on health and wellness food product attributes have been evaluated based on 12 indicators. Analysis of the consumers' preferences indicates that almost all the product attributes have been given high ratings by the consumers with a mean value of more than three (Table 3), implying that the product attributes are important factors affecting the purchase decision of the consumers. A closer look at the mean values indicates that quality and health benefits are highly rated by the consumers with mean value of more than four, making them the most important attributes for the consumers. These are followed by nutritional content, hygiene, food product certification and natural content of the product, which have mean values ranging from 3.74 to 3.98. Analysis of standard deviation indicates that there is significant variability from the mean value in the responses of consumers on almost all the product attributes, which ranges from 0.973 to 1.152.

Factor analysis was conducted to identify the underlying dimensions among a set of health and wellness food product attributes. The principal component analysis was done using varimax rotation criterion. The Kaiser criterion was used to retain only factors with eigenvalues greater than one. Based on factor analysis, four sets of components/factors emerged, which explains 59.421 per cent of variance. The total variance explained by factor one is 22.551 per cent, primarily comprising product quality attributes such as

Table 3. Rotated Component Matrix: Consumers' Response on Product Attributes

				Component			
Attributes	Mean	SD	I	2	3	4	- Factors
Nutritional	3.98	0.983	0.778	0.122	0.105	0.086	Product
content							quality
Quality	4.10	1.106	0.764	0.245	-0.035	0.024	
Hygiene	3.97	1.068	0.612	0.204	-0.011	0.174	
Chemicals/	3.74	1.071	0.610	-0.053	0.264	-0.224	
preservatives/							
pesticides free							
health benefits	4.01	0.979	0.551	-0.380	0.292	0.261	
Food product	3.78	1.152	0.547	0.116	0.095	0.403	
certification							
taste	3.62	1.095	0.082	0.820	0.122	0.086	Taste and
							flavour
Enhanced flavour	3.22	1.040	0.345	0.681	0.132	-0.017	
Packaging	3.34	1.114	0.016	0.143	0.812	0.089	Packaging
Variety	3.41	1.075	0.180	0.078	0.787	0.070	
Price	3.58	1.053	0.078	-0.100	0.007	0.814	Pricing
Shelf life	3.36	1.110	0.070	0.346	0.265	0.543	
% of variance			22.551	13.079	12.978	10.812	
Cumulative %			22.551	35.630	48.608	59.421	

Source: Authors' calculations.

Notes: Extraction method: Principal component analysis. Rotation method: Varimax with Kaiser Normalization.

Table 4. Rotated Component Matrix: Consumers' Response on Market Attribute

		Component					
Attributes	Mean	SD	I	2	3	Factors	
Availability of quality products	3.80	0.971	0.806	0.026	0.113	Market offerings	
Price competitiveness	3.46	1.021	0.648	0.027	-0.027		
Availability of branded products	3.59	1.004	0.596	0.330	0.082		
Shop assistance	3.08	1.026	0.177	0.815	0.093	Shopping experience	
Display/assortment	3.19	1.037	0.036	0.814	0.127		
Hours of operation	3.24	1.052	0.257	0.016	0.848	Market services	
Home delivery	3.15	1.195	-0.119	0.234	0.833		
% of variance			21.968	21.312	20.828		
Cumulative %			21.968	43.280	64.108		

Source: Authors' calculations.

Notes: Extraction method, Principal component analysis; Rotation Method, Varimax with Kaiser Normalization.

nutritional content, quality, hygiene, chemical and preservative free, health benefit and certification, as indicated by factor loading values. Factor two explains 13.079 per cent variation and loads high on factors related to taste and flavour of the product. Similarly, factor three explains variation of 12.978 per cent and correlates high on factors related to packaging of the product. Pricing of the health and wellness food product is extracted as Factor four, which explains 10.812 per cent variance. This analysis clearly categorizes the product attributes into four categories based on consumers' perspective, which can be used by various stakeholders in making appropriate decisions on health and wellness food product attributes.

## Consumers' Response on Market Attributes

Consumer's behaviour on shopping formats is changing rapidly and consumers are looking for a variety of shopping experiences. Under the primary survey, consumers were asked to report the importance of various market attributes based on their shopping experience at different retail formats. Table 4 depicts the consumer's preference on market attributes while buying health and wellness food products. As rated by the consumers, availability of quality product at the retail outlet is the most important market attribute followed by availability of branded products. It is clearly visible from the mean score of the ratings that consumers are very particular about the quality and brand of health and wellness food products.

Market attributes and shopping environment are other sets of factors, which are likely to affect the purchase decision of niche products such as health and wellness foods. Factor analysis has been further conducted to identify the underlying dimensions among a set of market attributes for health and wellness food products. The principal component analysis has been done using varimax rotation criterion. Based on the analysis, three factors have emerged, which explain 64.108 per cent of variance (Table 4). Market offerings which includes availability of quality products, price competitiveness in the market and availability of branded products, have a factor load of 21.968 per cent of variance. Shopping experience includes provision of shopping assistance and a proper display and assortment of the product in the store, having a factor load of 21.312 per cent of variance. Market services includes hours of store operations and provision of home delivery of the products, having a factor load of 20.828 per cent of variance.

Table 5. Rotated Component Matrix: Consumers' Response on Psychological Factors for Health and Wellness Food

Attributes	Mean	SD	1	2	3	- Factors
People who are successful in life generally buy healthy food.	3.19	1.168	0.837	0.002	0.022	Social prestige
Consumption of healthy food is an indication that I am wealthy.	3.18	1.120	0.795	-0.068	0.092	
Buying health and wellness food products is a symbol of prestige.	3.00	1.228	0.772	0.107	-0.062	
Consuming health and wellness food increases my respect in the society.	3.22	1.009	0.686	0.028	0.290	
I am concerned about the health and wellness of my family.	4.09	0.744	-0.103	0.806	0.105	Health consciousness
I convince my family and friends to buy healthy food.	3.90	0.867	0.139	0.790	0.064	
I am interested in information about my health.	4.08	0.802	0.017	0.730	0.127	
I read the food label for information regarding health claims before buying health and wellness food products.	3.69	0.947	0.135	0.074	0.770	Information seeking
I generally gather information before purchasing health and wellness food products.	3.76	0.983	0.026	0.174	0.744	
% of variance			27.211	20.657	14.168	
Cumulative %			27.211	47.868	62.036	

Source: Authors' calculations.

Notes: Extraction method, Principal component analysis; Rotation method, Varimax with Kaiser Normalization.

On the basis of the above analysis, the factors that are important for creating good environment for enhancing the sales of health and wellness food products can easily be identified.

## Consumers' Response on Psychological Factors

Empirical evidences indicate that psychological variables are having significant implications in purchase decisions for healthy and safe food products (Cockerham, 2005; Lesdéma et al., 2016; Michaelidou & Hassan, 2008). Consumers' responses on nine psychological statements have been recorded on a 5-points Likert scale. Table 5 provides analysis on consumers' responses on psychological concerns and considerations which come into play while the consumers are making their purchase decisions for health and wellness food products. The highest rated statement is related to the consumers' concerns for health and wellness of their families with mean score of 4.1. Similarly, consumers have also reported that they are interested in seeking information regarding their health for helping them in making buying decisions

for health and wellness food products. Therefore, most of the respondents reported that self and family health is the key deciding factors for buying health and wellness food products. Most of the consumers gather information before buying health and wellness food products. Therefore, health and wellness companies need to provide sufficient information to the consumers about their products for better market realization. It is also evident that health and wellness food buying is a symbol of social prestige, and the consumption of health and wellness food is a good indicator of success, wealth and respect in the society.

It is assumed that psychological factors may have important implications in influencing the purchase decision for health and wellness food products. To identify the underlying dimensions among a set of psychological factors influencing the purchase of health and wellness food product, factor analysis has been done using the principal component analysis with varimax rotation criterion. The Kaiser criterion was used to retain only factors with eigenvalues greater than one. Based on factor analysis, three sets of components/factors emerged, which explain 59.421 per cent of variance (Table 5). Social prestige, which includes attributes related to success in life, wealth, respect in the society and symbol of prestige, has a

Table 6. Regression Estimates—Factors Affecting Purchase Decision for Health and Wellness Food Products

		Standardized Coefficients			
Variables	Variable Code	β	Т	Sig.	
(Constant)		·	5.764	0.000	
Gender (I = male, 0 = female)	GEN	-0.073	-1.030	0.304	
Age ( $1 \ge 45$ years, $0 \le 45$ years)	AGE	-0.05 I	-0.727	0.468	
Education ( $I \ge PG$ , $0 = otherwise$ )	EDU	-0.064	-0.891	0.374	
Occupation (I = employed, 0 = unemployed)	OCCP	-0.070	-0.968	0.334	
Income (I $\geq 340,000, 0 = \text{otherwise}$ )	INC	0.194***	2.697	0.008	
Family size ( $1 \le 4$ members, $0 = 0$ otherwise)	FSIZE	-0.129*	-1.791	0.075	
Product quality	PO	0.323**	1.513	0.032	
Taste & flavour	TF	-0.067	-0.889	0.375	
Packaging	PKG	0.149*	1.862	0.064	
Pricing	PRI	0.019	0.247	0.805	
Market offerings	MO	0.157**	1.999	0.047	
Shopping experience	SE	0.063	0.797	0.426	
Market services	MS	-0.216***	-2.897	0.004	
Social prestige	SP	0.188**	1.190	0.020	
Health consciousness	HC	-0.040	-0.537	0.592	
Information seeking	IS	0.088	1.179	0.240	
R		0.352			
R square		0.125			
Adjusted R square ANOVA		0.054			
F		1.768**			
df		16			
Sig.		0.041			

Source: Authors' calculations.

Notes: \*\*\*Significant at the 0.01 level, \*\*significant at the 0.05 level, \*significant at the 0.10 level.

factor load of 27.211 per cent of variance. Health consciousness, which includes concern for health of self, family and friend, is having a factor load of 20.657 per cent of variance. Information seeking, which includes reading food label and gathering information on health and wellness, is having a factor load of 14.168 per cent of variance.

## Factors Affecting Consumers' Purchase Decision

Several studies have been conducted to analyse and identify the key decisional variables affecting the purchase decision for health and wellness food products (de-Magistris & Gracia, 2017; Gifford & Bernard, 2006; Kapoor & Munjal, 2017; Kraus, 2015; Teng & Wang, 2015). A regression model has been developed to predict the factors affecting the purchase decision for health and wellness food products based on the survey data collected from 218 respondents. Number of health and wellness food products purchased by the respondent has been taken as the dependent variable in the regression model. Based on the nature of the dependent variable, an OLS regression model has been used. Four sets of variables have been identified, which are likely to influence the level of health and wellness food purchase. These four sets of independent variables are socio-demographic variables, product attributes, market attributes and psychological factors.

The results on the coefficient estimate, *t*-value and significance levels for the parameters of the OLS regression model on factors affecting the purchase decision for health and wellness food products are presented in Table 6. The value of *R* Square and significance of ANOVA indicate goodness of fit of the regression model. Result of the regression analysis clearly indicate that income and family size are two important indicators of socio-demographic profiles which are more likely to affect the purchase decision for health and wellness food significantly. Income has a significant and positive relationship with the health and wellness food purchase decision. This implies that consumers with comparatively higher income are more likely to purchase more health and wellness food products. Contrary to this, there is inverse relationship between health and wellness food purchase behaviour with the family size of the consumer at 10 per cent level of significance. This indicates that consumer with comparatively smaller family size are more likely to purchase health and wellness food products. Out of six socio-demographic variables, income and family size are significant factors affecting the purchase decision. Hence, the assumption that the socio-demographic profile has influence on the purchase behaviour towards health and wellness food products is partially accepted.

Regression analysis clearly indicates that product quality and packaging are two variables of the product attributes having significant influence on health and wellness food product purchase decision. Those consumers who give high importance to food quality are more likely to purchase health and wellness food products. Similarly, those consumers who give high importance to food packaging are more likely to purchase health and wellness food products. This implies that the assumption of the product attributes having influence on the purchase behaviour towards health and wellness food products is partially accepted.

With changing buying behaviour for convenience, consumers consider a number of market attributes while making their purchase decision. Market offerings in the form of availability of quality products, price competitiveness in the market and availability of branded products are the important influencing factors, which are considered while making health and wellness food purchase decision. Contrary to this, there is inverse relationship between health and wellness food purchase behaviour and market services in terms of hours of operation and home delivery at 1 per cent level of significance. Out of three market attributes, two factors significantly affect the purchase decision. Hence, the assumption that the market

attributes have influence on the purchase behaviour towards health and wellness food products is largely accepted.

Psychological factors are other set of variables, which are more likely to affect the purchase decision for health and wellness food products. Out of the three extracted psychological variables, only one variable is significantly affecting the purchase decision that is social prestige. This implies that those consumers who are more concerned about their social prestige are more likely to purchase health and wellness food products. Hence, the assumption that psychological factors have influence on the purchase behaviour towards health and wellness food products is partially accepted.

## **Conclusion and Managerial Implications**

The analysis of the market trends for health and wellness food products in India is showing increasing potential for various types of products. Food safety and quality have become increasingly important in consumers' food choices. The magnitude of retail value growth in various types of health and wellness food products varies significantly. Organic and naturally healthy food markets have been growing at comparatively very high annual growth rate. Analysis of compound annual growth rate for health and wellness food products by category depicts that packaged health and wellness food products' market is growing much faster than health and wellness beverages. Health support products for bone and joint health, brain health and memory, cardiovascular health, digestive health, endurance, energy boosting, immune support and oral and respiratory health are the fastest growing product categories in terms of prime positioning of health and wellness food products.

A buying behaviour model for health and wellness food products has been developed through this study. The result of analysis of survey data indicates that consumers prefer a variety of product attributes while making purchase decision for health and wellness food. The result of the mean values' analysis indicates that quality and health benefits are the product attributes which have been rated highly by the consumers followed by nutritional content, hygiene, food product certification and natural content of the product. The result of regression analysis indicates that income and family size are the factors, which are significantly affecting the purchase decision. Similarly, product quality and packaging are having significant influence on health and wellness food product purchase decision. From the market attributes, market offerings and market services are the factors affecting the purchase decision, significantly. Social prestige is the key psychological variable, which is more likely to affect the purchase decision for health and wellness food products.

This study helps in identifying and understanding factors that affect a consumer's decision-making process while considering purchase of health and wellness food products. This can help the marketers of health and wellness food products in developing more effective marketing strategies in terms of product characteristics, market attributes and psychographic variables. Understanding the psychological factors which affect a consumers' decision-making process while selecting food products can also help the marketers in formulating optimal strategies to educate the consumers and encourage improvement in eating habits of the consumers by incorporating healthier options in their food baskets. The factors underlying the decision making for healthy food purchase will also be helpful for the producers in designing and developing newer and healthier food products and can guide them to properly segment their markets in terms of choice of where and how to market these products. It also provides insights to the regulatory authorities for ensuring delivery of safe food in the market and also provisioning healthy competition among the market players in the health and wellness food industry. The policymakers also need to check the authenticity of the health claims made by the health and wellness food producing companies, by way of strengthening the existing regulations.

### Limitations/Future Research

This study provides a comprehensive learning on health and wellness food products' market structure, consumers' preferences on product attributes and factors affecting health and wellness food purchase decision and provides practical insights to various stakeholders such as companies, regulators, channel partners, consumers and researchers. However, every research faces some possible limitations at its various stages. The major limitations of this research can be highlighted in the form of location, sample size, population coverage, survey bias, analytical tools and methods and theoretical basis of conducting the study. This study has been conducted in the city of Lucknow. For a more comprehensive and clearer picture of the behaviour of Indian consumers with respect to health and wellness food products, similar studies can be conducted in other regions as well. Further, statistically advanced techniques such as structural equation modelling (SEM) may also be explored to get more wide-ranging, meaningful and robust results on the consumer buying behaviour. Most of the empirical evidences have been focusing on functional and organic food products in the developed markets. There is a huge scope for undertaking research on health and wellness food products in the context of emerging economies and developing markets. Future research can also focus on other types of health and wellness food products like nutraceuticals, which are a fast emerging category related to functional food products. There is also scope for utilizing theoretical models with multidisciplinary focus to understand the consumer buying behaviour on health and wellness food products in future researches.

#### Acknowledgement

This article is largely based on the doctoral research of the corresponding author. The authors are grateful to the anonymous referees of the journal for their extremely useful suggestions to improve the quality of the article. Usual disclaimers apply.

#### **Declaration of Conflicting Interests**

The author declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

#### **Funding**

The author received no financial support for the research, authorship, and/or publication of this article.

#### References

- Alemu, M. H., Olsen, S. B., Vedel, S. E., Pambo, K. O., & Owino, V. O. (2017). Combining product attributes with recommendation and shopping location attributes to assess consumer preferences for insect-based food products. Food Quality and Preference, 55, 45–57.
- Ali, T., Alam, A., & Ali, J. (2015). Market structure analysis of health and wellness food products in India. *British Food Journal*, 117(7), 1859–1871.
- Annunziata, A., & Vecchio, R. (2011). Factors affecting Italian consumer attitudes toward functional foods. *AgBioForum*, 14(1), 20–32.
- Azam, N. H. M., Othman, N., Musa, R., Fatah, A. F., & Awal, A. (2012). Determinants of organic food purchase intention. In *ISBEIA 2012: IEEE Symposium on Business, Engineering and Industrial Applications* (pp. 748–753). DOI: 10.1109/ISBEIA.2012.6422990.
- Badrie, N., Reid-Foster, S., Benny-Ollivierra, C., & Roberts, H. (2007). Exercise enthusiasts' perceptions and beliefs of functional foods in Trinidad, West Indies. *Nutrition & Food Science*, 37(5), 345–357.
- Bech-Larsen, T., & Grunert, K. G. (2003). The perceived healthiness of functional foods—A conjoint study of Danish, Finnish and American consumers' perception of functional foods. *Appetite*, 40(1), 9–14.

Bonett, D. G., & Wright, T. A. (2015). Cronbach's alpha reliability: Interval estimation, hypothesis testing, and sample size planning. *Journal of Organizational Behavior*, 36(1), 3–15.

- Bruhn, C. M. (2008). Consumer acceptance of food innovations. *Innovation: Management, Policy & Practice*, 10(1), 91–95.
- Chakrabarti, S., & Baisya, R. K. (2009). Purchase of organic food: Role of consumer innovativeness and personal influence related constructs. *IIMB Management Review*, 21(1), 18–29.
- Chase, D., Emunu, J. P., Nilsson, T., McCann-Hiltz, D., & Yanning, P. (2009). Canadian Consumers' Purchasing Behavior of Omega-3 Products. *Journal of Food Distribution Research*, 40(2), 12–25.
- Chen, J., & Lobo, A. (2012). Organic food products in China: Determinants of consumers' purchase intentions. The International Review of Retail, Distribution and Consumer Research, 22(3), 293–314.
- Chengappa, P. G., Achoth, L., Rashmi, P., Dega, V., Reddy, B. M. R., & Joshi, P. K. (2005). *Emergence of organised retail chains in India during post liberalization era*. Paper presented at the South Asia Regional Conference of the International Association of Agricultural Economists, Globalisation of Agriculture in South Asia, Hyderabad, The World Bank, Washington, DC.
- Christmann, A., & Van Aelst, S. (2006). Robust estimation of Cronbach's alpha. *Journal of Multivariate Analysis*, 97(7), 1660–1674.
- Chung, J., Stoel, S., Xu, Y., & Ren, J. (2012). Predicting Chinese consumers' purchase intentions for imported soy-based dietary supplements. *British Food Journal*, 114(1), 143–161.
- Cockerham, W. C. (2005). Health lifestyle theory and the convergence of agency and structure. *Journal of Health and Social Behavior*, 46(1), 51–67.
- Cranfield, J., Henson, S., & Masakure, O. (2011). Factors affecting the extent to which consumers incorporate functional ingredients into their diets. *Journal of Agricultural Economics*, 62(2), 375–392.
- Crofton, E. C., Markey, A., & Scannell, A. G. M. (2013). Consumers' expectations and needs towards healthy cereal based snacks: An exploratory study among Irish adults. *British Food Journal*, 115(8), 1130–1148.
- Cronbach, L. J. (1951). Coefficient alpha and the interval structure of tests. *Psychometrika*, 16(3), 297–334.
- da Silva, T. F., & Conti-Silva, A. C. (2016). Preference mappings for gluten-free chocolate cookies: Sensory and physical characteristics. *Nutrition & Food Science*, 46(3), 374–387.
- Deininger, D. U., & Sur, M. (2007). Food safety in a globalizing world: Opportunities and challenges for India. *Agricultural Economics*, 37(s1), 135–147.
- de-Magistris, T., & Gracia, A. (2017). Does hunger matter in consumer purchase decisions? An empirical investigation of processed food products. *Food Quality and Preference*, 55, 1–5.
- Divine, R. L., & Lepisto, L. (2005). Analysis of the healthy lifestyle consumer. *Journal of Consumer Marketing*, 22(5), 275–283.
- Elzerman, J. E., Hoek, A. C., van Boekel, M. A. J. S., & Luning, P. A. (2011). Consumer acceptance and appropriateness of meat substitutes in a meal context. *Food Quality and Preference*, 22(3), 233–240.
- Euromonitor International. (2015). *Health and wellness in India*. Euromonitor Passport GMID Database. Retrieved from www.euromonitor.com/
- Fernandez-Castro, A. S., & Smith, P. C. (2002). Lancaster's characteristics approach revisited: Product selection using non-parametric methods. *Managerial and Decision Economics*, 23(2), 83–91.
- Galalae, C., & Voicu, A. (2013). Consumer behaviour research: Jacquard weaving in the social sciences. *Management Dynamics in Knowledge Economy*, 1(2), 277–292.
- Gifford, K., & Bernard, J. C. (2006). Influencing consumer purchase likelihood of organic food. *International Journal of Consumer Studies*, 30(2), 155–163.
- Goetzke, B. I., & Spiller, A. (2014). Health-improving lifestyles of organic and functional food consumers. *British Food Journal*, 116(3), 510–526.
- Granzin, K. L., Olsen, J. E., & Painter, J. J. (1998). Marketing to consumer segments using health-promoting lifestyles. *Journal of Retailing and Consumer Services*, 5(3), 131–141.
- Green, H. (2006). Global obesity: Nestlé initiatives in nutrition, health, and wellness. *Nutrition Reviews*, 64(2), S62–S64.
- Hansen, T. (2002). The effect of physical surroundings in usage situations on consumer perception of food quality and on consumer emotions. *Journal of International Consumer Marketing*, 15(1), 31–51.

Hansen, T. (2005). Rethinking consumer perception of food quality. *Journal of Food Products Marketing*, 11(2), 75–93.

- Helms, J. E., Henze, K. T., Sass, T. L., & Mifsud, V. A. (2006). Treating Cronbach's Alpha reliability coefficients as data in counseling research. *The Counseling Psychologist*, 34(5), 630–660.
- Hudson, E. (2012). Emerging market. *International Food Ingredients*, 3, 12–13. Retrieved from www. ingredientsnetwork.com
- Jha, D., & Sharma, R. (2015). *Health & wellness foods: The marketer's recipe book*. Featured Insights, The Nielsen Company. Retrieved from http://www.nielsen.com/content/dam/corporate/in/docs/reports/2015/nielsenfeatured-insights-health-and-wellness foods-the-%20marketers-recipe-book.pdf
- Kapoor, D., & Munjal, A. (2017). Functional foods: The new secret of the health conscious Indian women. *Global Business Review*, 18(3), 750–765.
- Kareklas, I., Carlson, J. R., & Muehling, D. D. (2014). I eat organic for my benefit and yours: Egoistic and altruistic considerations for purchasing organic food and their implications for advertising strategists. *Journal of Advertising*, 43(1), 18–32.
- Kraus, A. (2015). Factors influencing the decisions to buy and consume functional food. *British Food Journal*, 117(6), 1622–1636.
- Krystallis, A., Fotopoulos, C., & Zotos, Y. (2006). Organic consumers' profile and their willingness to pay (WTP) for selected organic food products in Greece. *Journal of International Consumer Marketing*, 19(1), 81–106.
- Lagerkvist, C. J., Okello, J., Muoki, P., Heck, S., & Prain, G. (2016). Nutrition promotion messages: The effect of information on consumer sensory expectations, experiences and emotions of vitamin A-biofortified sweet potato. Food Quality and Preference, 52, 143–152.
- Lancaster, K. J. (1966). A new approach to consumer theory. Journal of Political Economy, 74(2), 132–157.
- Lesdéma, A., Marsset-Baglieri, A., Talbot, L., Arlotti, A., Delarue, J., Fromentin, G., & Vinoy, S. (2016). When satiety evaluation is inspired by sensory analysis: A new approach. *Food Quality and Preference*, 49, 106–118.
- Lessa, K., Zulueta, A., Esteve, M. J., & Frigola, A. (2017). Study of consumer perception of healthy menus at restaurants. *Food Quality and Preference*, 55, 102–106.
- Ling, S. S., Pysarchik, D. T., & Choo, H. J. (2004). Adopters of new food products in India. *Marketing Intelligence & Planning*, 22(4), 371–391.
- Magalis, R. M., Giovanni, M., & Silliman, K. (2016). Whole grain foods: Is sensory liking related to knowledge, attitude, or intake? *Nutrition & Food Science*, 46(4), 488–503.
- McMahon, A. T., Williams, P., & Tapsell, L. (2010). Reviewing the meanings of wellness and well-being and their implications for food choice. *Perspectives in Public Health*, 130(6), 282–286.
- Michaelidou, N., & Hassan, L. M. (2008). The role of health consciousness, food safety concern and ethical identity on attitudes and intentions towards organic food. *International Journal of Consumer Studies*, 32(2), 163–170.
- Nicholson, M., & Xiao, S. H. (2011). Consumer behaviour analysis and social marketing practice. *The Service Industries Journal*, 31(15), 2529–2542.
- Petrovičová, J. (2009). Consumer behaviour by the purchase of healthy nutrition products. *Cag University Journal of Social Sciences*, 6(1), 49–60.
- Quah, S.-H., & Tan, A. K. G. (2009). Consumer purchase decisions of organic food products: An ethnic analysis. *Journal of International Consumer Marketing*, 22(1), 47–58.
- Shamal, S., & Mohan, B. C. (2017). Consumer behaviour in fortified food choice decisions in India. *Nutrition & Food Science*, 47(2), 229–239.
- Sloan, A. E. (2000). The top ten functional food trends. *Food Technology*, 54(4), 33–62.
- Sondhi, N., & Vani, V. (2007). An empirical analysis of the organic retail market in the NCR. *Global Business Review*, 8(2), 283–302.
- Suh, B. W., Eves, A., & Lumbers, M. (2012). Consumers' attitude and understanding of organic food: The case of South Korea. *Journal of Foodservice Business Research*, 15(1), 49–63.
- Teng, C.-C., & Wang, Y.-M. (2015). Decisional factors driving organic food consumption. *British Food Journal*, 117(3), 1066–1081.
- Tirelli, C., & Martínez-Ruiz, M. P. (2014). Influences of product attributes on sojourners' food purchase decisions. *British Food Journal*, 116(2), 251–271.

Wells, V. K. (2014). Behavioural psychology, marketing and consumer behaviour: A literature review and future research agenda. *Journal of Marketing Management*, 1376, 1–40.

Yun, Z.-S., & Pysarchik, D. T. (2010). Indian consumers' value-based new food product *adoption*. *Journal of Food Products Marketing*, 16(4), 398–417.