Differences in the Food Choice Determinants Before and During the COVID-19 Pandemic in the Adult Population of Croatia and Belgium (CFC CRO-BE): A Study Concept



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INTRODUCTION

Adequate dietary habits are believed to have a substantial positive influence on the prevention and treatment of the coronavirus disease 2019 (COVID-19) infection. Since the onset of the COVID-19 pandemic, numerous studies showing both positive and negative impacts of COVID-19 pandemic and lockdown on dietary habits and diet quality have been published [1]. However, studies dealing with food choice determinants (in the literature also reffered as factors influencing food choice or food choice motives) during the COVID-19 pandemic are rare and they predominantly tend to analyze the determinants influencing food choices only partially [2-7].

For the purposes of the present study, the Western Balkan Countries versions of the Food Choice Questionnaire will be slightly modified with more appropriate translations to the Croatian language and then translated to English, French, and Dutch.

The importance of each of the 36 items will be evaluated on a five-point Likert scale (1 - strongly disagree; 2 – disagree; 3 – neither agree nor disagree; 4 – agree; and 5 – strongly agree), and the items will be grouped in nine factors according to the original Food Choice Questionnaire developed by Steptoe et al. [9] (Picture 2).

Therefore, the aim of the present study will be to examine the differences in food choice determinants before and during the COVID-19 pandemic in the adult population of Croatia and Belgium.

MATERIALS AND METHODS

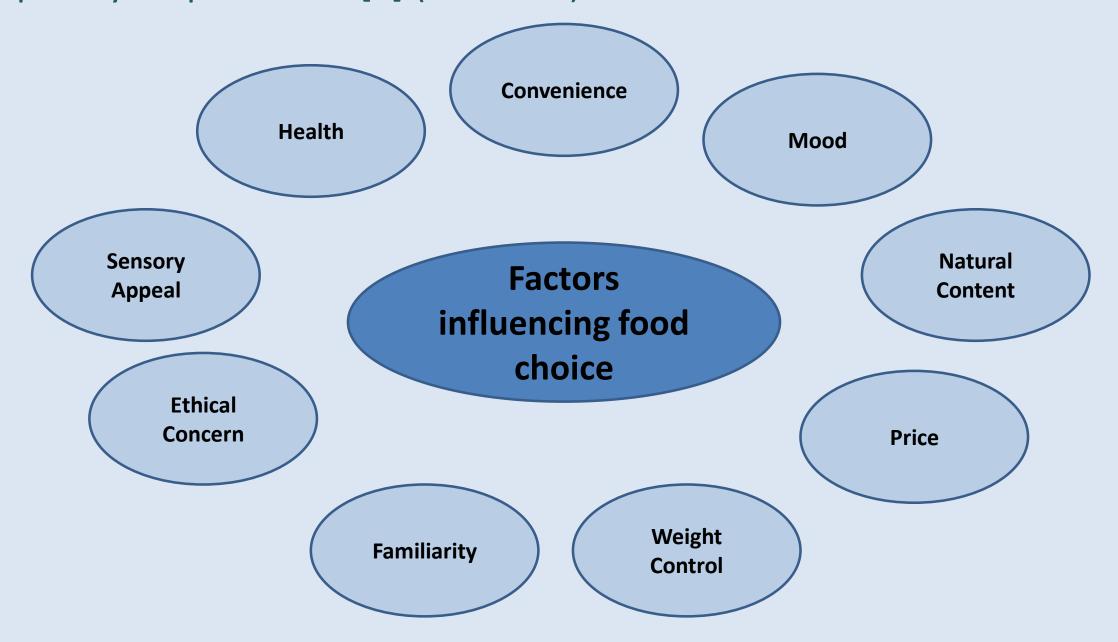


study target: \geq 1,000 participants from Croatia and \geq 1,000 participants from Belgium age: \geq 18 years



Picture 1. Online questionnaires

A self-administered online questionnaires, prepared in Google Forms online survey platform for Croatian part of the research and in Microsoft Teams online survey platform for Belgian part of the research will be used to assess all the necessary data from the study participants. In Croatia, the online questionnaire will be distributed in Croatian language, while in Belgium the French, Dutch, and English versions of the questionnaire will be applied (Picture 1).



Picture 2. Factors influencing food choice.

The study was approved by the Ethical Committee of the Institute for Anthropological Research, Zagreb, Croatia and the Institutional Review Board of the Institute of Tropical Medicine, Antwerp, Belgium. All participants will have to provide an informed consent before completing the questionnaire.

RESULTS AND DISCUSSION

It is planned for the online questionnaire to be distributed to professional networks and personal contacts of the research team members by e-mail, messaging applications (WhatsApp[®], Viber[®], and Messenger[®]), social media networks (Facebook[®], Instagram[®], and LinkedIn[®]), and by posting research advertisements in relevant groups on social media networks (e.g., public Facebook[®] group aimed at gathering students, etc.).

The questionnaire designed for the purposes of the present study consists of three sections described in the Table 1.

Table 1. Sections of the self-administered online questionnaire.

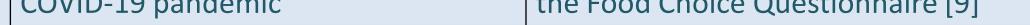
Section	Description
Socio-demographic, COVID-19, and anthropometric data	 questions concerning age, sex, educational level, marital status, residential area, working status, employment status, average monthy net income, COVID-19 infection, self- isolation, vaccination, body height, and body weight
Food choice determinants before the COVID-19 pandemic	Western Balkan Countries version [8] of the Food Choice Questionnaire [9]
Food choice determinants during the COVID-19 pandemic	Western Balkan Countries version [8] of the Food Choice Questionnaire [9]

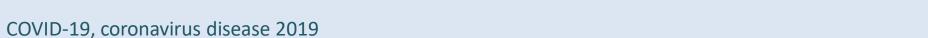
The results are expected to show significant changes in food choice determinants during the COVID-19 pandemic, when compared to the period before the pandemic, indicating the amelioration in the overall dietary habits of both the Croatian and Belgian adults during these challenging times.

The aforementioned results could therefore represent a basis for the development of more efficient public health policies related to prevention of diet-related diseases.

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