

“Low carb, high fat”: commensality and sociability in restrictive diets times

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Abstract

Throughout the history of mankind, concerns related to health, well-being and fitness have boosted the occurrence of different dietary trends, which reflect not only scientific discoveries, but also the afflictions of every age. This paper presents a preliminary reflection on restrictive diets adopted nowadays, especially with regard to the spread of these new habits and the strategies adopted by dieters, as well as the impacts of these new ways of eating in terms of exercising commensality and sociability. Therefore, a literature review was conducted on the subject and also an analysis of two semi-structured interviews with respondents who currently follow restrictive diets that prescribe high protein and low carbohydrate intakes: Paleolithic and Dukan. The results point to a structural change in eating habits and the search for new forms of commensality and sociability that support and enhance these new food choices.

Key words: Eating habits. Trendy diets. Commensality. Sociability. Eating.

Introduction

Eating is an act without which the individual is doomed to death. A physiological need, it is responsible for “supplying” the body, forming it, feeding it, and keeping it, with an irrefutable influence on health and well-being.* Food/health ratio has been explored since ancient times, as evidenced by manuscripts from the classical antiquity, with prescriptions and understandings of what foods would be considered healthier or more suitable for some diseases.¹⁻³

In a contemporary way, concerns related to health, well-being and also fitness have boosted the occurrence of different dietary trends, which now condemn certain foods, now elect them as beneficial, as in the case of the Paleolithic** and Dukan diets.*** However, these diets are not constructed only in the field of counting calories, vitamins, fats and proteins. They are embedded in a cultural context that reveals much about beauty representations and the breakdown of traditional eating patterns. As warned by Maciel & Castro (p. 323)²:

[...] if on the one hand, there is the nutritional value of food and a whole repertoire of elements that characterize it from the biological point of view – proteins, carbohydrates, vitamins – there is, on the other hand, a symbolic value, a symbolic meaning in the food act which complicates the issue.

This study constitutes a preliminary reflection on restrictive diets adopted in the contemporary world, especially with regard to the spread of these new habits and strategies adopted by their practitioners, as well as the impact of new ways of eating in terms of exercising commensality and sociability.

Methodology

This is a first and still exploratory reflection by the authors on the subject, in which publications, articles published in magazines and Internet portals and semi-structured interviews about food were considered.

* For a definition of food and nutrition categories, see Carvalho; Luz and Prado.³

** The Paleolithic diet states that food should emulate what was consumed by hunter-gatherers who lived before agriculture, over ten thousand years ago, since our genetic code has not changed since then: high amounts of animal protein and fiber, considerable quantities of fat and carbohydrates, and foods which are very rapidly digested, increasing the glycemic index (or the speed at which the sugar from the food is released into the bloodstream).⁴

*** The Dukan method was created by French nutrition specialist Pierre Dukan and is divided into four phases: an extremely restrictive one, suitable for rapid weight loss, in which one can eat only animal protein without fat and oat bran, and the other ones are milder, for maintenance, in which carbohydrates and lipids are gradually ingested, except for one day a week.⁵

The bibliographical research sought to discuss concepts such as food preferences and gastronomie, besides other aspects related to the food and culture relationship to build a theoretical framework that would allow not only the construction of the interviews script but also an analysis of the testimonials collected.

The script of a semi-structured interview, according to Thiollent,⁶ is characterized as presenting key issues, maintaining, however, flexibility for new questions that arise along the contact between the interviewer/interviewee. Respondents were chosen due to their receptivity and time availability to participate in the research. Probabilistic criteria were not taken into account, and these consumers are not essentially different from others at their age, income level and living situation.

The analysis presented here, based on the principles of content analysis according to Bardin,⁷ focuses on statements from two subjects, both female: Alessandra and Bárbara. The names of the interviewees have been changed to preserve their privacy and their pseudonyms were adopted in alphabetical order according to the interviews order: the first interviewee got a pseudonym starting with the letter A and the second one got letter B. Alessandra is 30 years old, a financial manager, lives by herself and is on the Dukan diet; Bárbara is 33 years old, is a journalist, also lives by herself and is on the Paleolithic diet.

By written consent, the interviews were conducted in March and April 2015 in order to investigate the interviewees' dietary habits as young women on quite popular weight control diets. The interviews were recorded, transcribed and analyzed. The most relevant excerpts are presented here, transcribed without any speech change or correction. The analysis of selected statements is not intended to explain or characterize a bigger picture, i.e., exhausting the discussion was not sought. The aim is indeed a possibility of greater understanding of such a complex and interwoven universe.

Results and discussion

Eating is a social and cultural act in which the choice and consumption of food put into play a set of ecological, historical, cultural, social and economic factors, being connected to a network of representations, symbolism and rituals.⁸ As observed by Giard (p. 232),⁹ "[...] even raw and harvested directly from a tree, the fruit is already an acculturated food before any preparation and by the simple fact of being considered edible." Thus, eating habits – which are translated in the form of selection, preparation and food intake – become the very image of a society.^{10,11}

Therefore, food preferences are marked by the merger between biology and culture, approaching the idea advocated by Bourdieu,¹² for whom preferences characterize a propensity and an ability for the material and symbolic appropriation of a certain category of objects or practices classified and classifying, constituting the generative formula of a lifestyle, a unitary set of distinctive preferences which express a style unit principle, a set of specific tastes. Individual choices and practices have the appearance of subjectivity, but they are not born in the individual, but in the society which they belong to. Thus, the individual exercises their individual preferences within a culturally sanctioned framework that provides an already selected set of food from which they can choose. For example, for a Brazilian, enjoying dog meat, no matter how well prepared it may be, is unthinkable: this animal is not part of the list of protein suppliers we admit in our diet.

In this regard, members of social groups tend to share certain choice skills (tastes) that eventually connect them, making them capable of being recognized as such, including in terms of food decisions. Eating, then, is a complex social deed which puts into play a set of differentiated and differentiating production and consumption (material and symbolic) movements, causing food consumption and the social and cultural processes that sustain them to contribute to the constitution of collective identities, since they are the expression of social and power relations.⁸ Food then can be also seen as a form of language,^{13,14} with which the individual communicates with the world.

For Giard (p. 250),⁹ “individuals tend to be identified to eating habits from their childhood: food they are used to eating from a young age and that extend throughout their daily lives.” In a similar reasoning, de Garine (p.5)¹⁵ writes that “individuals feel emotionally attached to habits from their childhood, usually marked by traditional culture.” However, Fischler¹⁶ points out that the traditional culinary rules that structure cuisines undergo a process of deinstitutionalization, especially in the Western culture.

The regulatory power that structures food is being replaced by gastro-anomie,¹⁶ characterized by the flexibility of socially accepted food selection criteria within the group. Consequently, consumers create new ways of eating and relating to food, detaching from habits so far shared with family and friends. Consequently, some commensality habits are also disrupted, directly interfering in sociability processes – here understood, according to Baechler,¹⁷ as the human capacity to create and maintain social ties – of these individuals.

As for how the diet that she is on has changed her eating habits, interviewee Bárbara reveals:

The great thing [...] that made all the difference for me was [avoid eating] gluten, and foods derived from wheat, actually anything with wheat. [...] Sugar, for example, for some time I don't eat it; then I eat some sweet, and sometimes I have tachycardia. Or else I eat rice, risotto, which are things that quickly raise glucose levels, then I feel this... I get a little uncomfortable with this... with this tachycardia. But then it is when I for some time go on without... [...] I think my body's already unaccustomed.

Interviewee Alessandra has also made changes in food consumption: “I’m not depriving myself from eating anything. I’m just decreasing. So, for example, candies. Candies are one thing that I haven’t eaten for some time. I have stopped drinking soda...” But despite insisting that “there’s nothing I can not eat” she reveals some self-imposed restrictions that test her willpower:

Chocolate. Candy for me is chocolate. And chocolate... melted chocolate [...], that sauce that comes on top of chocolate... I miss it. And potatoes... it is not potato actually: cheese sauce; I really miss it, which is something I could not resist to, I would always have it... it was my preference for having, you know, something with much cheese sauce. Sometimes I would be in a restaurant, at the buffet, and would not even get the dish: there would be some chicken with cheese sauce, I would not get the chicken, I would have something else, but the cheese sauce I would go and get it. I miss that.

Among her new dietary strategies, Alessandra often resorts to a less caloric alternative for lunch:

I like to have the Herbalife health shake every now and then, which satiates a lot and turns me off from willing to eat sweets [...] It is around 200 calories. I have two glasses, I drink 800 ml of tea before drinking the health shake, which are also Herbalife teas. But the teas... actually I do not like them, but the health shake is pretty good, it satiates a lot.

What a Brazilian means by lunch – according to general standards, a hearty meal of solid foods – follows the country’s food system, or the set of technological and social structures constituents of the process from production to consumption of foods recognized by the diner as foodstuffs.^{11,18} When the ideal meal, that is, the maximum symbolic expression of a particular social order¹⁹ is replaced by an individual choice and displaced from the food system, the communication within the social group is no longer so effective. And for Fischler (p. 10),²⁰ “if the codes, rules, regulations that culturally fit the eating process can be circumvented or subverted so easily, it is undoubtedly because they are already weakened, cracked, disorderly.”

According to Fischler,¹⁶ the gastro-anomie framework is also reflected in the proliferation of information available for diners. There is a polyphony of discourses on eating, coming from different mediators (chefs, food industry representatives, health professionals), which are adopted – and often adapted – by consumers.

Many of these new food speeches focus on the healthy eating concept and its adoption with a view not only on the individual's health, but also their weight loss. Alarming data on overweight and obesity in Brazil and abroad**** have motivated many people – even those who do not have a disturbing overweight condition – to rethink their eating habits.^{21,22}

For Pollan,²³ this concern feeds a real nutritional misinformation industry, which can be seen, among other occasions, in the offer of products targeted for the new food cravings. The diet, light and zero calorie foods are already a constant presence on the dieters' shopping lists, as commented by interviewee Alessandra: “Ricotta-like cheese is light; if I'm going to drink juice, it is the light one; everything that is light; yogurt must be the zero calorie one. [...] I research what is healthier and then I swap it.” And the list goes on: these products, which for long have focused on eliminating or reducing the content of sugar and fat, are now also presented in versions with low sodium content, and lactose- and gluten-free.

Moreover, the so-called miraculous products alternate in the healthy podium, such as flax, chia, goji berry and coconut oil. All this not to mention the meal-replacement health shake enjoyed by Alessandra, which in the (American multinational multi-level marketing corporation) Herbalife International company website is presented as “complete,” “nutritionally balanced” and a “source of protein, fiber, vitamins and minerals, which provide nutrition and satiety as of a standard meal.”²⁴

Much of that consumption is encouraged not only by consulting doctors or nutritionists, but also by the media, by books and websites that tout the wonders of diets that are fashionable. That was the path taken by the two interviewees for the survey. They had not seen a doctor before starting their weight loss diets, rather they sought information on books, websites and blogs, and friends.

Alessandra tells us about the motivation to try the diet:

*To hear people talking, to hear some people who had already been on the protein diet and lost weight fast. Then there is the diet book by Dr. Dukan.***** [...] But I found about the diet from people talking, and then I went on the Internet and found out what I could and what I could not [eat].*

**** People with a body mass index (BMI) between 25 and 29 are considered overweight, and obesity is determined when the BMI reaches 30. This is the situation of almost 30% of the world population, a total of 2.1 billion people overweight or obese.¹⁹ In Brazil, a survey conducted by the Ministry of Health in 2012 has revealed that for the first time in history more than half of Brazilians are overweight, an increasing number: 51% of the population over 18 are overweight, compared to 43% in 2006.²²

***** The Dukan diet is explained in details in five “official” books published in Brazil: *I can't lose weight, The Dukan Method Illustrated, In good shape with Dukan, The Dukan Everyday Easy Cookbook and The Dukan Diet Desserts and Patisseries*.⁴

Interviewee Bárbara has followed the same path: she had heard about the Paleolithic diet from a couple of friends and complemented with information sought on the Internet.

*The day she [the friend] told me about that diet [...] she also spoke about the bacon that she would eat, and meat, rump cover. Many years ago I had already been on a protein diet. But the way she told me... I was a little shocked. I said, “My God, guys, but you’re eating all this?” It is like... you do not count calories, you go as far as you can eat. When you are satiated, it is over. You don’t need to count... Ah! It is a portion of this, two tablespoons of that. It was nothing like this. And then I said, “Yeah, I’ll do it.” And then she told me, “Take a look at doctor Souto’s.”***** She gave the blog website address, I started reading it [...] Doctor Souto’s blog, which is about low carb and high fat, which is the diet that he advocates there as the ideal one and which brings several benefits.*

In that blog website, the interviewee found book recommendations to deepen the research on the diet:

*I even have three books here and I am in the middle of reading them. One of them is “The Surprising Truth about Wheat, Carbs, and Sugar,” I don’t know if you’ve heard about it. Then I’ll tell you the book’s subtitle: “Your Brain’s Silent Killers.” It’s a horror book this one [laughs], it is terrible. It is tense! Then I stopped in the middle because I thought it was too for my mind, but I’ll continue. And then I’m reading now the one by Gary Taubes, which is, “Why We Get Fat – And What to Do About It” [...]. And also (William R. Davis’) “Wheat Belly: Lose the Wheat, Lose the Weight, and Find Your Path Back to Health”, which is an gluten-free best seller in the United States.******

But why haven’t the interviewees seen a specialist? Alessandra explains:

You see a nutritionist and they kind of say... I’ve been other times and I know what they will say that I have to eat, and how much, and how it has to be eaten, and how often I have to eat... And then I found it rather unnecessary to go in that direction.

***** The blog website which the interviewee is mentioning is *Dieta Low-Carb e Paleolítica*, (Low carb and paleolithic diets), written by Brazilian urologist José Carlos Souto and available on <http://www.lowcarb-paleo.com.br>.

***** The author of *The Surprising Truth about Wheat, Carbs, and Sugar* is American neurologist David Perlmutter, who had his book published in Portuguese in 2014 by Brazilian publishing company Companhia das Letras. Gary Taubes, an American journalist specializing in science, had *Why We Get Fat – And What to Do About It* published by Brazilian publishing company L&PM Editores also in 2014. *Wheat Belly: Lose the Wheat, Lose the Weight, and Find Your Path Back to Health*, by American cardiologist William R. Davis, was published in Brazil a year before by Brazilian publishing company Martins Fontes. The three books were originally released in the United States.

The speech shows how information overload gives the diner the feeling that they master the recipe for health. The problem is that the speeches about prescribing and banning from these mediators do not always converge, creating some “food cacophony.”¹⁶

In a society that does not know how and what to choose for meals, it increases the number of eating disorders. According to Pollan,²³ the search for understanding what we eat, makes people adopt deterministic solutions such as nutrition, which holds that eating should have the sole purpose of maintaining physical health and that therefore we should value the nutrients at the expense of food containing them and the scientists’ opinions about how to leverage them best.

Where previously the familiar names of recognizable foods – things like eggs, breakfast cereals or snacks – held the most important position in colorful packages that crammed the [supermarket] aisles, new terms of scientific resonance such as “cholesterol,” “fiber” and “saturated fat” have started to be printed and highlighted (p. 26).²³

From this point of view, we can go back to the health shake consumed by interviewee Alessandra. Although the drink sweet taste is pleasant, the taste is not the main motivation for consumption: the shake is only 200 calories – less than two fried eggs – and to ensure “satiety” it must be preceded by not so tasty teas. The taste is left behind at the expense of the “benefit” of the potential weight loss.

This paradoxical food compartmentation caused by an unbridled quest for what is healthy may have even generated a new form of eating disorder. Unlike anorexia and bulimia, which focus on quantity, orthorexia nervosa is the obsession with eating properly and healthily, bringing the patient, among other behaviors, to the habit of preparing all their food in order to be sure of their hygiene.²⁵ According to American Steven Bratman, M.D., author of the term, the condition arises when the individual ignores the pleasure of eating at the expense of health and hygiene, and restricts food to avoid sugar, fat, pesticides and genetically modified organisms (GMO), as well as potentially allergenic products such as those containing lactose, gluten, dyes and preservatives. Whole groups of foods and important nutrients are eliminated, which, besides affecting the health, isolates the individual from society.

The two interviewees in this research say that the diet has created friction in the relationship with family and friends. In restrictive stages, choosing between the appropriate menu and the company was granted.

“When I was at a more, shall we say, restrictive [diet] stage, that phase in which I would actually eat just protein, I think it would kind of even limit the number of people who would go out to eat with me, you know?” explains Alessandra. “Because then, you know, that thing where we go to a

place and ‘what will she eat?’. I always have lunch with some co-worker, then this always happens,” – she tells. On the challenges of staying on the diet, the appeal (or pressure) from friends and family is also mentioned:

[The biggest challenge to maintain the diet] is the weekend, you know? And also because there is a Sunday barbecue, which always ends up having fat meat, always served with beer. And then there is the issue of alcohol. Therefore, that to me is a challenge because, ah, I’m at a happy hour, and then sometimes it is even possible to eat something healthy, but then you are like... Ah, everyone there is having beer and I don’t drink it, and since I like it, it is difficult. But this time I’m really succeeding, I have already done that, because previously I would not even go places, you know, to not fall into temptation. And when I would go, I would always think that... ah, whatever, you know, one day... it is not what will affect it and stuff like that. But now I have been able to go places and eat my light dish. Recently, I was at a restaurant here with some of my friends. They all ate a (Brazilian popular sandwich) bauru and then I ordered a bauru on the plate, you know, just the meat, lettuce, tomato and I asked him to add maize and a boiled egg. And that was it. And I drank water.

Interviewee Bárbara tells us a similar story:

And this thing from friends and family is upsetting, they say that I have become boring. But then I’ve been much more boring at that time [...] when I was too focused on the diet. I was really exaggerating, it seemed I had been brainwashed. But today I try to say, you know, “no, that I can, that I can not.” Sometimes my mother [asks], “What will I cook for you?” And I say, “Oh, mother, make me some chayote with eggs, this I can eat.”

Also according to Bárbara, a major challenge for maintaining a diet is the environment in which she lives:

I think actually in my case [at work] there is a lot of events midweek; there is this and that, you know, which distracts me a little, because I still have the temptation to... ah, I can not miss such event, and I go there, what am I going to eat? You know, I think a bit of the environment that I live in disturbs me. [...] The most I can do is refuse invitations as much as I can. That’s what I try to do. And when I say I’m on a diet, it seems that the people want to tease me even more, you know? But then, you know, I’m managing to get around and excuse myself. I say that I have an appointment, you know. I don’t explain much so that the person won’t annoy me. But I’m already going to far less events in order to get away from this, to try and focus, to follow a path.

Being overzealous on a diet is ambiguously seen by both. For one thing, both would like to have the “discipline” needed to follow the precepts to the letter and achieve weight loss and wellness. However, on the other hand, they try not to allow the eating restriction to prevent sociability.

[Someone invites], “Hey, let’s have lunch somewhere, let’s go eat.” Then I think of a place that has an alternative for me,” says Bárbara. But giving up the diet is unthinkable, as Alessandra tells:

Last weekend, on Saturday I ate some pasta at midday and at night, you know, which is something I did not want to, but it was the option that I had. There was nothing else to eat, and then I’m not such a pain, [...] everybody was sitting and having dinner together and I go there and I’ll make, like, an egg for me, an omelet. That I can not. I wanted to be able to be like that, to be this focused, but I think some things are not worth it, you know?

Alessandra’s comment is not meaningless – she has in mind a good example of who is “this focused”:

In fact [my brother-in-law] did this during some time when he slimmed down, you know? [...] Right now [he] was again on a diet and instead of having lunch [with everyone at a break at work] he was having lunch in the car outside. I think he brought food from his house and was eating in the car, you know? I find this absurd, you know?

As the picture of who takes the diet so seriously is not the most positive, the respondents tend to avoid the subject within their social groups. Bárbara tells:

I don’t talk much because with [my friends] I have already argued because, you know, it’s something that breaks paradigms, so people don’t take it well, they think I’m crazy, you know? [...] Then I got tired of being seen as crazy. [...] I got sick of it, I stopped talking to people, I talk only to two of them today, who understand me, you see? Because overall I’m the boring one, the crazy one. Because of the diet.

Restrictions – and the way the food decisions end up affecting a number of other daily decisions – allows to think of such diets as food subcultures, in that they are the basis for setting up new groups whose individuals are approached by specific needs and practices. In contemporary times, such subcultures have the support of virtual social networks, to the extent that these new communication tools allow not only disclosing precepts, but also identifying and approaching new members.

As an example, interviewee Alessandra may be mentioned, who participates in a virtual group created by a friend in order to post photos of meals, relying on a collective control when willpower fails. The support group is always at hand: it is accessed on the smartphone on a mobile messaging app.

They spend all day sending photos, they are 52 women now sending photos of what they eat. And sometimes it is good, you even feel ashamed for eating more, you know? [My fiancé]... sometimes I'll eat something that is not in, and then he says [speaks] as follows: “Ah, give me your cell, I'll take a picture and send to the group,” you know? So I think it ends up encouraging me too, this has been greatly encouraging me.

Groups like this offer the comfort of being among those who share the same goals and dilemmas, creating a sense of unity and even identity among its members. Even if there is some embarrassment when dealing with diet paths with others who are not on it (at the risk of getting the stigma of being “boring,” as stated above), the coexistence “among equals” gives another meaning to the embarrassment, which can be used as an incentive that allows plunging harder in the world of the chosen diet.

Eating habits are then defined as a link, removing individuals from some groups, but also approaching them of others. These new ties, at first created virtually, may be even strong enough for the diet to create an extended coexistence in the real world, as in the example told by respondent Alessandra:

So, actually, in the relationship let's say that [the diet] has brought me new friends, because we have ended up creating a group with which we will do some hiking, we have already agreed to go out and have lunch together. Today I was going to have dinner with them, we were going to a meal-replacement health shake restaurant, we have discovered one that opens at night, then... well, you know. It is very interesting.

Having a common eating diet not only creates new social groups, but it provides the emergence of eating places for sociability of those groups, where they can experience some lifestyle characteristics that they share.¹² The *meal-replacement health shake restaurants* frequented by Alessandra and her new friends are examples of shops devoted not only to the sale of specific products for dieters, but also their *on the premises* consumption. Next to these spaces, it is possible to include nutritional supplement stores, juice and açai palm blends bars (usually located in the vicinity of gyms) and stores devoted to organic, vegetarian and vegan meals, among other specialties focused on dietary restrictions.

Conclusions

Commensality and sociability obtain new and interesting contours today. For young women like Alessandra and Bárbara, the interviewees in this research, adopting restrictive diets in search of weight loss and well-being can be arduous in that it questions the dietary rules learned within the social group and affects conviviality with family and friends. Adopting these diets, for these people, implies including on the menu adaptation strategies to ensure successful results, although disconnected from the unpleasant stigma often coming together with the dietary restriction. The search for fad diets points to effects of gastro-anomie and individualized decisions today impacting the way we eat and relate to food. Loneliness and embarrassment can be side effects of *low carb* and *high fat* lifestyles, not to mention “missing” tasty foods such as chocolate.

But these fortunately are not the only results that can accompany the scale pointer pointing downward. Everyday decisions affected by diet may be just the common element that creates new ties with other individuals, causing these people to join new groups that offer comfort and encouragement to achieve the goals. These new food strategies create bonds among individuals and seem to outline new food subcultures.

Following diet requirements such as Paleo, Dukan or others, which implies reducing or eliminating the consumption of certain food groups, may prove a big challenge but also an opportunity to create and experiment with new ways of eating and relating to food and with other people. These disruptions with the so-called more “conventional” diets require a reorganization of commensality and sociability practices, strongly aided by social networks in the search for identifying and approaching people who share these same ways of thinking and consuming food. Therefore, it appears that, even in the face of new food standards, food remains an element generating identity among diners, as well as an important unifying element in human groups.

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Received: April 16, 2015

Revised: May 26, 2015

Accepted: June 5, 2015