

The Effect of Consumer Confusion, Health Consciousness, Food Safety Concerns and Intention to Consume Healthy Foods on Slow Food Consumption

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Abstract

Increasing inspections in Türkiye in recent years have revealed significant problems related to food adulteration and pesticide residues. This situation not only creates unfair advantages for businesses in competitive markets but also raises serious concerns about food safety among consumers. Consumer confusion regarding food safety can lead to both health consciousness and food safety concerns. Furthermore, the widespread adoption of fast food, often associated with unhealthiness, can lead consumers to opt for healthier food. The slow food movement, which emerged as a philosophy against fast food, can be a valuable alternative in combating these negative consequences, primarily in the context of public health. The aim of this research is to reveal the effect of consumers' confusion regarding food safety on health consciousness, food safety concerns, and intention to consume healthy foods, which in turn affects slow food consumption. The research tests a proposed model constructed with variables obtained from the literature. Data were obtained through a survey administered to consumers using a convenience sampling method. Statistical programs and SmartPLS structural equation modeling were used to analyze the data. The findings indicate that consumer confusion, health consciousness, and food safety concerns affect the intention to consume healthy foods. Health consciousness and intention to consume healthy foods together affect slow food consumption. Food safety concerns were not found to affect slow food consumption. This research is significant since it can help understand consumer behavior regarding healthy food and slow food in confusion regarding food safety and can provide meaningful input into the decision-making processes of public and private sector stakeholders in achieving a healthier society.

Keywords: Consumer Confusion, Food Safety Concerns, Health Consciousness, Intention to Consume Healthy Foods, Slow Food Consumption

Introduction

In recent years, consumers have once again confronted the well-known but often overlooked problem of adulteration as a result of regular food inspections conducted by the Ministry of Agriculture and Forestry in Türkiye. The ministry has begun regularly publishing adulterated/imitated products and product information on its website (Safe Food, 2025). The media has helped keep the issue in the spotlight, citing adulteration not only for some well-known national brands but also for some local brands. Presenting a different oil blend as olive oil, the presence of margarine in cheese, and the detection of pork or other suspicious ingredients in products labeled as beef are not only food fraud but also a threat to food safety. The excessive use of chemical inputs to increase agricultural yields harms not only the product but also the environment, leading to numerous problems in ensuring food safety (Kayışoğlu and Türksoy, 2023). Food safety encompasses many routine procedures that must be followed to prevent potential health hazards. However, when these are ignored, non-compliance can be uncovered during inspections. Residues in food products detected at border crossings during food exports, often originating from chemicals, fertilizers, artificial additives, and preservatives used in production, can be considered within this scope. The possibility that similar foods offered to the domestic market may also contain residues above standards causes consumers to question the safety of the food they consume and reconsider their decision-making processes.

Consumer confusion regarding food safety is a disturbing psychological state. Confusion regarding food safety is often caused by chemical residues, adulteration, fraud, and misleading advertising (Peng et al., 2015). This resulting confusion can trigger increased food safety concerns, increased health awareness, and a shift toward healthier products. In the face of such negative consequences, including unhealthy food, that have been experienced for many years.

The slow food movement, a new form of gastronomy that aims for natural raw materials, i.e., additive-free processing methods, prioritizes local cuisine and products while also being associated with a better quality of life and health and characterizes the attitudinal change among consumers who prioritize and enjoy daily activities, emerged in Italy in 1986 as an alternative to fast food (Brito da Silva et al., 2022).

Türkiye is increasingly exposed to fast food or Western-style nutrition communications, also known in the literature as "McDonaldization," which are widely known to cause health problems such as obesity. Our literature research suggests that consumer reactions to slow food in Türkiye have not been sufficiently researched. This research examines the impact of consumer confusion regarding food safety on health consciousness and attitudes toward slow food, which is related to the traditional Turkish eating habits. The topic is significant since it offers an approach that raises awareness of local values and needs for healthier generations based on food safety concerns. In addition to academic outcomes, the research results could contribute to the decision-making processes of public institutions and non-governmental organizations.

The following sections of the study examine consumer confusion, health consciousness, food safety concerns, intention to healthy food consumption, and slow food consumption within

the conceptual framework. The methodology section presents the scales, survey questions, and analysis methods for the proposed model. Finally, the results of the study are discussed.

Conceptual Framework

Life and health rights, which are among the fundamental rights for mankind, also include access to safe food as well as access to food (Soylu, 2022). The unnatural substances used by producers throughout the supply chain, from production to consumption, can pose a threat to food safety. Inspections revealing the level of substances in products that fall outside the required standard limits can raise food safety concerns in consumers. This, in turn, can influence the desire to consume healthy food, as well as slow food consumption.

The slow food movement, which has become more visible in recent years, encourages the internalization of a culturally compatible, fair, conscious, and sustainable lifestyle (Enes and Yavuz, 2023). Drawing on Petrini's (2007) principles, the slow food motto triad of "good," "clean," and "fair" is linked to the general struggle for food sustainability. Accordingly, the pleasure and happiness in food are a universal right that makes it sustainable (good), thus not consuming more resources than it produces (clean), not allowing it to create inequality in any way, and respecting everyone involved in the production process (fair) (Payandeh et al., 2020). The antecedents of slow food consumption are reviewed below.

Consumer Confusion Regarding Food Safety

Consumers are faced with numerous food decisions today, where issues such as product, processing, and sourcing have become increasingly complex (Siegrist and Sütterlin, 2017). The presence of food safety scandals, particularly those involving uncertainty, anxiety, and increasing criticism, further exacerbates these challenges (Bánáti, 2011). Such situations can confuse consumers regarding food purchasing behavior. This confusion can be perceived as a negative influence on consumers (Wobker et al., 2015). This is especially true when food safety information is not transparent during purchases.

Confusion is fundamentally defined as a disturbing psychological state that occurs when consumers are exposed to too much ambiguous, incomplete, or misleading information (Edward and Sahadev, 2012). The media, which has played an active role in exposing food safety issues in recent years, can cause consumer confusion regarding food safety by highlighting adulteration, fraud, scams, pesticide residues, and misleading advertising (Peng et al., 2015).

This confusion, while prompting consumers to choose healthier foods, can also influence their anxiety and health consciousness, as well as their intention to consume healthy foods. Consumer concerns regarding food safety are increasing due to intense media attention and increased awareness of the relationship between nutrition and health (Bolek, 2020). These concerns lead to significant changes in food purchasing and consumption behavior (Yilmaz et al., 2015). For businesses, confusion can also lead to loss of revenue by delaying consumer behavior during the purchasing decision process. It also leads to a distressing situation consisting of negative emotional value and cognitive elements, such as difficulty understanding the incentives provided to consumers (Shiu, 2021).

Today, rising awareness of environmental issues and increasing concern regarding food safety are increasingly popularizing green consumption, which means a sustainable lifestyle and healthy food (Yang et al., 2021). Furthermore, when consumers feel uncomfortable regarding food safety, their anxiety or negative emotions may increase, which can affect their intention to engage in health-conscious behaviors such as purchasing organic or certified safe foods (Iqbal et al., 2021). Accordingly, the hypotheses of the study can be formulated as follows:

H₁: Consumer confusion affects health consciousness.

H₂: Consumer confusion affects food safety concerns.

H₃: Consumer confusion affects intention to consume healthy foods.

Health Consciousness

Health consciousness is defined as the degree to which people manage and participate in their health-related actions (Moorman and Matulich, 1993). Because health-conscious consumers have higher health awareness, they closely follow developments in their environment. Consumers with high health consciousness avoid food fraud such as adulteration/imitation, as well as harmful substances such as pesticides, additives, and pollutants, and opt for safer, purer, and more natural foods (Iqbal et al., 2021). These consumers adopt healthy habits to improve their quality of life and protect themselves from diseases (Newsom et al., 2005). These consumers also prefer foods that provide mental satisfaction and physical nourishment, keeping them away from experiences that could harm their health (Glanz et al., 1998). In this context, organic food is one of the strongest motivators among health-related behaviors in both developed and developing nations with health concerns (Su et al., 2022). Health consciousness is among the antecedents of healthy food consumption. Accordingly, the research hypothesis can be formulated as follows.

H₄: Health consciousness affects intention to consume healthy foods.

Food Safety Concerns

Food safety, which plays a key role in increasing consumer confidence in food sources (Eren et al., 2017), is supported by various standards and certifications, ensuring that products are safe for health, prepared using appropriate processing methods, and meet consumer expectations. Food fraud is a significant problem that threatens consumer health and jeopardizes food safety (Elgin Kılıç and Kesen, 2025).

Food safety concerns represent consumers' concerns about residues in food from chemicals, fertilizers, artificial additives, and preservatives often associated with agricultural practices (Yee et al., 2005). Frequent food safety incidents are causing consumers to be more concerned about food safety (Hsu et al., 2019). Unlike animal diseases (such as bird flu) in food production, consumers perceive additives, chemicals, and preservatives in vegetables, fruits, and processed foods as a persistent safety concern (Yee et al., 2005). Therefore, food quality generally refers to the sensory properties (e.g., taste, odor, appearance) and nutritional value of food, while food safety addresses biological, chemical, and physical hazards that may harm consumers' health (Patra et al., 2022).

Consumers not only check the label for product safety but also pay attention to product ingredients, whether artificial colors or artificial fragrances were used, and whether they contain chemicals and pesticides (Hamzaoui Essoussi and Zahaf, 2009). Consumers who are more concerned about food safety tend to prefer safe, pure, and natural foods to avoid

consuming harmful substances (Teng and Lu, 2016). In this case, consumption motives such as health consciousness and food safety concerns can positively shape attitudes toward products associated with healthy food consumption (e.g., organic products). Accordingly, the research hypothesis can be formulated as follows:

H₅: Food safety concerns affect intention to consume healthy foods.

Intention to Consume Healthy Foods

Malnutrition is among the most urgent health problems, as it is among the main causes of death and disease, including cardiovascular diseases, hypertension, type 2 diabetes, and some types of cancer (An, 2012). Health behavior has been defined as a procedure by measuring the intensity of seven personal health-related practices (Breslow and Enstrom, 1980). Three of these are explicitly related to food consumption (alcohol consumption, breakfast habits, unplanned eating behavior), one is at least partially related (weight control), and the remaining three are not directly related to food intake (additional exercise, sleep duration, smoking behavior). In comparison, consumers' health-related purchases tend to outrank environmental purchases (Schifferstein and Oude Ophuis, 1998).

Food quality is most commonly summarized by production method, place of production, traceability, raw materials/ingredients, safety, nutrition, sensory properties and functional and biological aspects (Morris and Young, 2000). Food quality is among the qualities sought in healthy food. Various terms such as "natural," "fresh," and "pure" are used to describe healthy foods (Ueasangkomsate and Santiteerakul, 2016). These foods are classified as natural foods because they do not contain artificial chemical residues such as fertilizers, herbicides, pesticides, antibiotics, or GMOs (genetically modified organisms). The rise in the incidence of heart disease and diabetes has led consumers to realize the importance of consuming healthier foods (Rana and Paul, 2017). Consumers prefer natural foods since they are perceived as healthier (Schifferstein and Oude Ophuis, 1998). Therefore, organic food literature considers health concerns as one of the main reasons why consumers purchase organic food (Magnusson et al., 2003).

Healthy foods have become popular worldwide because they are associated with changes in consumer attitudes and new consumption patterns that meet the expectations of modern consumers—healthy and environmentally friendly consumption patterns (Rana and Paul, 2017). Behavior changes toward healthy foods are influenced by various factors. For example, first, individual attitudes toward health factors, in other words, a positive attitude, have a positive impact on the purchasing power of healthy foods. Second, lifestyle, health, and environmental awareness are also important factors in the appeal of consuming healthy foods. Third, the prevailing subjective norms in society, namely, environmental stewardship, health aspects, and collective awareness of the important values of a healthy lifestyle. Fourth is the price difference. Healthy foods tend to be more expensive than conventional foods, so the price difference is a significant factor in changing consumption behavior toward healthy foods. Therefore, healthy food consumption increases in parallel with changes in consumer knowledge and healthy lifestyles (Kusdiyanto et al., 2022).

Slow Food Consumption

Fast food is an increasingly controversial topic due to concerns about food safety, food quality, obesity, and related health problems (Jones et al., 2003). Slow food, on the other

hand, is defined as an alternative method of food consumption that relies on individual participation (Strate and Marsden, 2006). It emerged in response to the increasingly widespread prevalence of fast food, which threatens the local culture of food. In contemporary societal thought, the slow food movement is often interpreted as a growing, organized protest against the development of fast-paced lifestyles (Hsu, 2014). Responding to contemporary consumer demands for critical and alternative consumption practices, this movement encompasses not only the pleasures associated with purchasing, preparing, and consuming food, but also environmental issues (Strate and Marsden, 2006).

Slow food aims to promote the right to enjoyment, respect the rhythm of life, and preserve harmonious relationships with nature. It also aims to explore, define, and develop food cultures by respecting each country's cuisine, providing appropriate taste and smell education from childhood, and preserving and defending agro-industrial heritage. It targets to promote the dissemination of quality products in an environmentally sound manner while protecting consumer rights (Jones et al., 2003). Consumers, motivated by health, social, ethical, and environmental concerns, are opposing the industrialization of the agri-food system and demanding more natural cultivation and transformation processes (Nosi and Zanni, 2004).

Since health consciousness aligns with values related to sustainability and food authenticity, consumers with strong intentions to adopt slow food healthy eating are more likely to adopt slow food consumption behaviors (Sobreira et al., 2022). According to Ajzen's (1991) classic statement, intention precedes actual behavior. Accordingly, when consumers consider eating healthy foods, they are likely to voluntarily choose to consume slow food due to a perceived behavioral constraint.

Health-conscious consumers are likely to turn to slow food consumption, which consists of healthy products, when they intend to consume healthy foods. Similarly, consumers who prioritize healthy eating, food quality, food safety, local products, and environmental protection can also be expected to turn to slow food consumption. Accordingly, the hypotheses of the research can be formulated as follows:

H₆: Health consciousness affects slow food consumption.

H₇: Food safety concerns affect slow food consumption.

H₈: Intention to consume healthy food affects slow food consumption.

According to the proposed model, consumer confusion regarding food safety influences health consciousness, food safety concerns, and the intention to consume healthy foods. Health consciousness, food safety concerns, and the intention to consume healthy foods also influence slow food consumption. The proposed model was tested by following the below-given methodology.

Methodology and Measurement

The research model was inspired by the study of Brito da Silva et al. (2024). This study primarily examines the antecedents of slow food consumption, which are associated with health during the Covid-19 pandemic. It was consulted for relevant literature for the research scales. The four-question scale used by Jin et al. (2020) was preferred for consumer confusion regarding food safety. The nine-question scale by Gould (1990) was used for health consciousness. The three-question scale from the study by Michaelidou and Hassan (2008)

was used for food safety concerns. The nine-question scale by Ueasangkomsate and Santiteerakul (2016) was used for intention to consume healthy foods. The scale by Payandeh et al. (2022) was used for slow food consumption. The scale was defined as three sub-dimensions. These were measured with fourteen questions: the good dimension with five questions, the fair dimension with five questions, and the clean dimension with four questions. The survey questions are provided in Appendix 1.

Questions in the survey form were coded on a five-point Likert scale for simplicity. Participants were asked to rate each question on a scale of 1 to 5, with 1 representing "I completely disagree" and 5 representing "I completely agree." After the survey form was prepared, a preliminary survey was conducted with five participants to assess its clarity. The final version of the questionnaire was prepared based on the feedback received.

The electronic survey form, transferred to Google Forms, was offered to participants accessed using the convenience sampling method. The survey was finalized considering the time constraints after 255 participants were considered sufficient. Then, the data were deemed appropriate, and analyses were then completed with this data set based on the assured data quality. SPSS was used for descriptive statistics. SmartPLS structural equation modeling was preferred to test the research model. This analysis was chosen because it does not require a normal distribution in the data and yields accurate results with a small sample size. A minimum sample size is required for the analysis. Hair et al. (2014) recommend the "ten times rule" for minimum sample size. The sample size is sufficient for estimating the PLS path model since 255 data points are greater than the minimum sample size ($3 \times 10 = 30$).

The structural model must be validated using the measurement model in PLS structural equation modeling analysis. The measurement model was examined using factor loadings, which are reliability variables. Cronbach's alpha and composite reliability were used for internal consistency; the average variance extracted (AVE) for convergent validity; and the HTMT ratio and Fornell-Larcker criterion analyses, which show correlations between constructs, were used for discriminant validity. The variance inflation factor (VIF) was used to check for multicollinearity in the structural model. In the final step, the effects between constructs in the structural model were investigated.

Results

Frequency Analysis

Table 1 represents the basic demographic characteristics of the participants. A total of 255 people participated in the survey. 71.4% of the participants were female, and 28.6% were male. 52.2% were between the ages of 18 and 25, 17.3% were between 26 and 35, 12.5% were between 36 and 45, 7.1% were between 56 and 65, and 4.3% were 66 or older. As per marital status, 37.6% were married and 62.4% were single. As per educational status, 24.7% were maximum high school graduates, 38.4% were university graduates, and 36.9% were university students. A scale of one to five was created for the participants' income status. 5 = We can cover all our expenses and save money, 4 = We can cover all our expenses, 3 = We can cover some of our expenses, even if we can't cover all of them, 2 = Only meets basic needs, and 1 represents inadequacy. Accordingly, 7.5% of participants can cover all of their expenses and save money, 39.2% can cover all of their expenses, 45.9% can cover some of

their expenses, even if they can't cover all of them, 5.9% can only meet their basic needs, and 1.6% have insufficient income.

Table 1

Demographic characteristics of the participants

Demographics (N=255)		Frequency	%
Gender	Female	182	71,4
	Male	73	28,6
Age	18-25	133	52,2
	26-35	44	17,3
	36-45	32	12,5
	56-65	18	7,1
	+65	11	4,3
Marital Status	Single	159	62,4
	Married	96	37,6
Education	Up to high school	63	24,7
	University graduate	98	38,4
	University student	94	36,9
Monthly Income	1	4	1,6
	2	15	5,9
	3	117	45,9
	4	100	39,2
	5	19	7,5

PLS Measurement Model

Items with factor loadings below 0.600 in the model were removed from the analysis. Reliability was confirmed since the factor loadings were above 0.668, Cronbach's Alpha (CA) coefficients ranged from 0.805 to 0.944, and were above the 0.700 limit value. Reliability was also confirmed since the composite reliability (CR) values, which are stronger indicators than Cronbach's Alpha (CA) coefficients, ranged from 0.817 to 0.952 and were above the 0.700 limit value. Convergent validity was confirmed since the AVE values ranged from 0.536 to 0.765 and were above the 0.500 limit value. These results ensure that the research model is reliable and valid. Table 2 represents the measurement model values.

Table 2

Measurement model values

Latent Variable	Item	Factor Loading	CA	CR (rho-a)	CR (rho-c)	AVE
Consumer Confusion (CC)	CC1	0.756	0.805	0.817	0.872	0.631
	CC2	0.745				
	CC3	0.848				
	CC4	0.823				
Health Consciousness (HC)	HC1	0.733	0.930	0.931	0.941	0.640
	HC2	0.806				
	HC3	0.811				
	HC4	0.824				
	HC5	0.797				
	HC6	0.802				
	HC7	0.788				
	HC8	0.804				
	HC9	0.832				
Food Safety Concerns (FSC)	FSC1	0.853	0.847	0.848	0.907	0.765
	FSC2	0.879				
	FSC3	0.892				
Intention to Consume Healthy Foods (ICH)	ICH1	0.801	0.944	0.945	0.952	0.690
	ICH2	0.846				
	ICH3	0.842				
	ICH4	0.795				
	ICH5	0.884				
	ICH6	0.831				
	ICH7	0.752				
	ICH8	0.866				
	ICH9	0.852				
Slow Food Consumption (SFC) Good (G) Fair (F) Clean (C)	i1	0.734	0.928	0.931	0.937	0.536
	i2	0.756				
	i3	0.695				
	i4	0.668				
	A1	0.698				
	A2	0.697				
	A3	0.731				
	A4	0.719				
	A5	0.739				
	T1	0.757				
	T2	0.831				
	T3	0.778				
	T4	0.704				

Note: CA = Cronbach's Alpha Coefficient; CR = Composite Reliability; AVE = Average Variance Explained

Fornell and Larcker's (1981) criterion analysis was used for discriminant validity. Table 3 represents the mean and standard deviation values of the variables, along with the discriminant validity values as per Fornell-Larcker. Discriminant validity was confirmed when the diagonal values were higher than the other values in the same row and column.

Table 3

Fornell-Larcker analysis

	Mean	SD	CC	FSC	HC	ICH	SFC
CC	3.855	0.917	0.794				
FSC	4.088	0.929	0.592	0.875			
HC	3.544	0.928	0.402	0.531	0.800		
ICH	4.099	0.893	0.579	0.656	0.639	0.831	
SFC	3.616	0.894	0.430	0.540	0.642	0.659	0.732

Note: CC = Consumer Confusion; FSC = Food Safety Concerns; HC = Health Consciousness; ICH = Intention to Consume Healthy Foods; SFC = Slow Food Consumption

In addition, HTMT ratio analysis examines discriminant validity more precisely. In this analysis, the values in the table must be below the 0.850 limit. Since all values in Table 4, which represents the HTMT ratio analysis results, are below the limit, discriminant validity was also confirmed with this analysis.

Table 4

HTMT analizi

	CC	FSC	HC	ICH	SFC
CC					
FSC	0.705				
HC	0.456	0.592			
ICH	0.658	0.733	0.677		
SFC	0.483	0.596	0.688	0.690	

Note: CC = Consumer Confusion; FSC = Food Safety Concerns; HC = Health Consciousness; ICH = Intention to Consume Healthy Foods; SFC = Slow Food Consumption

A 1000-sample bootstrap test was conducted to assess the significance of the constructs in the model. The results indicate that the measurement model is satisfactory.

PLS Structural Model

Variance Inflation Factor (VIF) values were examined to measure multicollinearity in the model structures. It was determined that the VIF values of the outer model ranged from 1.479 to 4.430, while those of the inner model ranged from 1.000 to 2.210. There was no multicollinearity since these values were below the 5-limit value. Table 5 represents the VIF results of the inner model.

Table 5

VIF inner model

	CC	FSC	HC	ICH	SFC
CC		1.000	1.000	1.564	
FSC				1.826	1.823
HC				1.416	1.754
ICH					2.210
SFC					

Note: CC = Consumer Confusion; FSC = Food Safety Concerns; HC = Health Consciousness; ICH = Intention to Consume Healthy Foods; SFC = Slow Food Consumption

R^2 values were used for the explanatory power of the model. The variance in health consciousness is explained by consumer confusion with a value of $R^2=0.162$ (Adjusted $R^2=0.158$). The variance in food safety concerns is explained by consumer confusion with a value of $R^2=0.350$ (Adjusted $R^2=0.347$). The variance in intention to consume healthy foods is explained by health consciousness, consumer confusion, and food safety concerns with a value of $R^2=0.586$ (Adjusted $R^2=0.581$). The variance in slow food consumption is explained by health consciousness, intention to consume healthy foods, and food safety concerns with a value of $R^2=0.525$ (Adjusted $R^2=0.520$). Accordingly, the explanatory power of the model is, from the biggest to the smallest, intention to consume healthy foods, slow food consumption, food safety concerns, and health consciousness, respectively. Table 6 represents the R^2 values.

Table 6

 R^2 values

	R^2	Adjusted R^2
FSC	0.350	0.347
HC	0.162	0.158
ICH	0.586	0.581
SFC	0.525	0.520

Note: FSC = Food Safety Concerns; HC = Health Consciousness; ICH = Intention to Consume Healthy Foods; SFC = Slow Food Consumption

The f^2 effect analysis was used to determine the effect size in the model. f^2 values were classified as large, medium, and weak, with $f^2 \geq 0.35$, $f^2 \geq 0.15$, and $f^2 \geq 0.02$ (Cohen, 1988). Accordingly, the effect of consumer confusion regarding food safety on food safety concerns ($CC \rightarrow FSC=0.538$) is a large-level effect. The effect of health consciousness on intention to consume healthy foods ($HC \rightarrow ICH=0.239$) and the effect of consumer confusion regarding food safety on health consciousness ($CC \rightarrow HC=0.193$) are medium-level effects. The effect of health consciousness on slow food consumption ($HC \rightarrow SFC=0.148$), the effect of food safety concerns on intention to consume healthy foods ($HC \rightarrow ICH=0.129$), the effect of intention to consume healthy foods on slow food consumption ($ICH \rightarrow SFC=0.122$), and the effect of consumer confusion on intention to consume healthy foods ($CC \rightarrow ICH=0.092$) are weak-level effects. However, intention to consume healthy foods has no effect on slow food consumption ($FSC \rightarrow SFC=0.016$). Table 7 represents the f^2 effect levels.

Table 7

f² Matrix

	CC	FSC	HC	ICH	SFC
CC		0.538	0.193	0.092	
FSC				0.129	0.016
HC				0.239	0.148
ICH					0.122
SFC					

Note: CC = Consumer Confusion; FSC = Food Safety Concerns; HC = Health Consciousness; ICH = Intention to Consume Healthy Foods; SFC = Slow Food Consumption

Hypotheses were tested using a T-test. Hypothesis H₁ was supported since the path between consumer confusion and health consciousness (t=6.893; p=0.000) was significant. Hypothesis H₂ was supported since the path between consumer confusion and food safety concerns (t=12.598; p=0.000) was significant. Hypothesis H₃ was supported since the path between consumer confusion and intention to consume healthy foods (t=3.546; p=0.000) was significant. Hypothesis H₄ was supported since the path between health consciousness and intention to consume healthy foods (t=6.069; p=0.000) was significant. Hypothesis H₅ was supported since the path between food safety concerns and healthy food consumption intention (t=4.134; p=0.000) was significant. Hypothesis H₆ was supported since the path between health consciousness and slow food consumption (t=4.874; p=0.000) was significant. Hypothesis H₇ was not supported since the path between food safety concerns and slow food consumption (t=1.715; p=0.086) was not significant. Hypothesis H₈ was supported since the path between intention to consume healthy foods and slow food consumption (t=4.730; p=0.000) was significant. Table 8 represents the results of hypothesis tests.

Tablo 8

Path coefficients and hypothesis tests

Hypothesis	Stdβ	Mean	Std. Dev.	T Stat.	p value	Result
H ₁ : CC→HC	0.402	0.407	0.058	6.893	0.000	Supported
H ₂ : CC→FSC	0.592	0.595	0.047	12.598	0.000	Supported
H ₃ : CC→ICH	0.244	0.243	0.069	3.546	0.000	Supported
H ₄ : HC→ICH	0.374	0.376	0.062	6.069	0.000	Supported
H ₅ : FSC→ICH	0.313	0.312	0.076	4.134	0.000	Supported
H ₆ : HC→SFC	0.351	0.354	0.072	4.874	0.000	Supported
H ₇ : FSC→SFC	0.119	0.124	0.069	1.715	0.086	Not Supported
H ₈ : ICH→SFC	0.357	0.354	0.076	4.730	0.000	Supported

Note: CC = Consumer Confusion; FSC = Food Safety Concerns; HC = Health Consciousness; ICH = Intention to Consume Healthy Foods; SFC = Slow Food Consumption

The presence of mediation effects in the model was also examined. Accordingly, health consciousness mediated the effect of consumer confusion on healthy food consumption intention (t=4.297; p=0.000). Intention to consume healthy foods mediated the effect of consumer confusion on slow food consumption (t=2.476; p=0.013). Food safety concerns mediated the effect of consumer confusion on the intention to consume healthy foods (t=3.801; p=0.000). Health consciousness mediated the effect of consumer confusion on slow food consumption (t=3.820; p=0.000). Intention to consume healthy foods mediated the

effect of food safety concerns on slow food consumption ($t=3.394$; $p=0.001$). Intention to consume healthy foods mediated the effect of health consciousness on slow food consumption ($t=4.090$; $p=0.000$). Health consciousness and intention to consume healthy foods mediated the effect of consumer confusion on slow food consumption ($t=3.610$; $p=0.000$). Food safety concerns and intention to consume healthy foods mediated the effect of consumer confusion on slow food consumption ($t=3.294$; $p=0.001$). However, food safety concerns did not mediate the effect of consumer confusion on slow food consumption ($t=1.668$; $p=0.095$). Table 9 summarizes the mediating effects.

Table 9
Mediating effects

Hipotez	Stdβ	Mean	Std. Dev.	T Stat.	p value	Result
CC→HC→ICH	0.151	0.154	0.035	4.297	0.000	Supported
CC→ICH→SFC	0.087	0.088	0.035	2.476	0.013	Supported
CC→FSC→ICH	0.185	0.186	0.049	3.801	0.000	Supported
CC→HC→SFC	0.141	0.144	0.037	3.820	0.000	Supported
FSC→ICH→SFC	0.112	0.109	0.033	3.394	0.001	Supported
HC→ICH→SFC	0.134	0.132	0.033	4.090	0.000	Supported
CC→HC→ICH→SFC	0.054	0.054	0.015	3.610	0.000	Supported
CC→FSC→ICH→SFC	0.066	0.065	0.020	3.294	0.001	Supported
CC→FSC→SFC	0.070	0.074	0.042	1.668	0.095	Not Supported

Note: CC = Consumer Confusion; FSC = Food Safety Concerns; HC = Health Consciousness; ICH = Intention to Consume Healthy Foods; SFC = Slow Food Consumption

As a result of these analyses, Figure 1 represents the revised structural model.

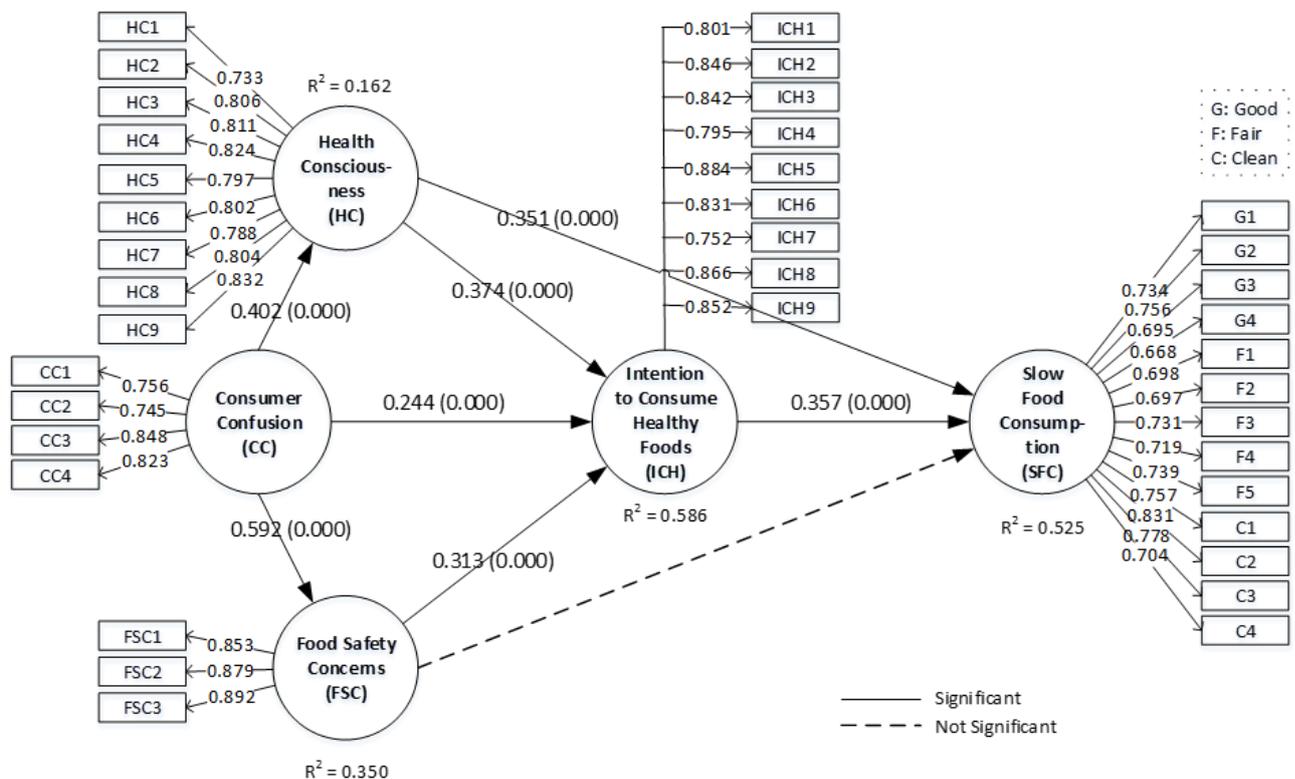


Figure 1. Revised structural model

Conclusion

This study examines the impact of consumer confusion regarding food safety on health consciousness, food safety concerns, intention to consume healthy foods, and slow food consumption using a proposed model. The slow food movement, developed as an alternative to fast food, could be effective in reintroducing traditional food production and consumption. Healthy food consumption not only fosters healthier future generations but also offers significant opportunities for preserving and developing local values.

According to the findings of the study, consumer confusion affects health consciousness. This finding is consistent with the literature (Iqbal et al., 2021). Consumers' insufficient product and food safety knowledge, coupled with skepticism in their decision-making processes, can contribute to the development of health consciousness while living in an era where food production is becoming more technologically advanced and complex, products are constantly being developed with a marketing point of view, and uncontrolled pesticide use and adulteration are on the rise.

Consumer confusion affects food safety concerns. This finding is consistent with the literature (Yang et al., 2021). Food scandals in the news increase consumer anxiety. The rise in these scandals may be primarily due to economic problems and the high inflation experienced in recent years. However, it is clear that regulatory authorities need to find more effective solutions to food safety concerns. While it may be advisable to choose national and international brands, food scandals have also been reported in the media for such corporate businesses. For local brands to enhance their brand equity, the priority of food safety in their positioning strategies should not be neglected.

Consumer confusion affects intention to consume healthy foods. This finding is consistent with the literature (Teng and Lu, 2016). Consumers ultimately turn to healthy foods whenever possible for their own future and that of their families. Raising awareness of food fraud through marketing communications and emphasizing the importance of evaluation criteria in consumer decision-making processes is crucial.

Health consciousness affects intention to consume healthy foods. This finding is consistent with the literature (Rana and Paul, 2017). It is essential for consumers to act responsibly and take preventive measures to avoid exposure to the increasing prevalence of food adulteration, poor environmental conditions, and their increasing long-term negative consequences. Food safety concerns affect intention to consume healthy foods. This finding is consistent with the literature (Morris and Young, 2000). Similarly, health consciousness affects slow food consumption. This finding is also consistent with the literature (Sobreira et al., 2022). This resulting anxiety can proactively guide consumers toward healthy food consumption. In fact, it is known that nutritional problems are a significant cause of many diseases. Rather than consuming more food, a better solution may be to consume less, safer, and healthier food responsibly.

Intention to consume healthy foods affects slow food consumption. This finding is consistent with the literature (Ajzen, 1991). Intention to consume healthy foods can, in a sense, lead to a rapid shift away from fast food and towards healthier products, which can also be described as freshly cooked meals. While the unhealthiness of fast food is evident, its impact,

particularly on young people, is obvious, and intense marketing communication may help in changing eating habits. Although Türkiye is considered the world's food gene center, its adherence to traditional food is crucial for the continuity of culture. Obesity and the resulting chronic diseases are among the major threats to the future of the world. The slow food approach is significant for both healthy generations and sustainable development with local values. Slow food deserves greater awareness among all stakeholders since it increases pleasure and happiness (goodness), consumes no more resources than it produces (cleanliness), and respects everyone in its production (fairness).

The hypothesis that food safety concerns affect slow food consumption was not supported. This finding is inconsistent with the literature. The proliferation of ready-made and fast food, the rapid forgetting of food scandals and the subsequent fading of concerns from the agenda, the perceived innocuous nature of new consumer preferences, and the lack of awareness of the slow food approach in terms of its content may all contribute to getting this result. Communication efforts must be intensified to restore local products, processes, and culinary dishes to their rightful place.

Health consciousness, consumer confusion, and food safety concerns explain 58.6% of the variance in intention to consume healthy foods. Furthermore, slow food consumption is explained by health consciousness and food safety concerns, along with the intention to consume healthy foods, at a high rate of 52.5%. Based on these high rates, it would be wise for public authorities and civil society organizations to increase their communication efforts to raise consumer awareness of these variables.

According to the effect analyses, consumer confusion regarding food safety has a significant effect on food safety concerns. Simply, confusion affects food safety concerns. If this confusion is perceived as a threat to a healthier society, this negative situation can be a motivating force for creating opportunities. Similarly, the impact of health consciousness on intention to consume healthy foods and the impact of consumer confusion regarding food safety on health consciousness are both medium-level effects. Therefore, improving consumers' health consciousness can yield valuable results for producers, consumers, public authorities, and relevant institutions and organizations. On the other hand, the effect of intention to consume healthy foods on slow food consumption is almost negligible. This may be due to the fact that the existing relationship between healthy food and slow food has not yet been established with consumers. Mass communication about the importance of slow food as a viable alternative to fast food is essential for public health and development. In addition to raising healthy generations, increasing the awareness of the slow food approach could contribute to decreasing the widespread use of imported medicines and efficient usage of healthcare budgets.

Theoretical Contribution

To the best of our knowledge, the impact of consumer confusion about food safety on the intention to consume healthy foods and engage in slow food practices is a topic that has not been extensively studied. The slow food approach could be a solution to malnutrition and rising health problems of the generations by repositioning local values of cultures when food products threaten food safety. It is clear that increased academic interest in this topic will also

support sustainable development. The proposed research model contributes to the literature by taking care of the variables.

Managerial Contribution

Consumers' increasing health consciousness, preference for healthy food, and slow food consumption may lead businesses to reshape their decisions in this direction. Healthy food production plays a vital role in ensuring sustainability, making it essential for the sector's success resulting in more profitable category options in all over the world. Conventional food production always has the potentation for food scandals damaging brand equity. Maintaining a healthy lifestyle throughout the supply chain, from producer to consumer, can provide a competitive advantage in an environment requesting sustainability.

Research Limitation and Recommendation

The convenience sampling method in collecting research data limits the coverage of the population. A larger sample size would have been significant to identify the approaches of different groups to slow food consumption. The study excluded the impact of demographic characteristics on variables. Despite the multifaceted nature of the topic, a limited number of variables were included in the model. The research is significant in that it reveals general consumer trends. Studies using models developed with different variables and demographic structures are recommended for future research.

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Appendix 1. Questionnaire Items

Consumer Confusion Regarding Food Safety

CC1. It is often difficult to identify the right product since many foods are similar in terms of their safety characteristics.

CC2. When consuming foods, I rarely feel adequately informed about the product's source and production process.

CC3. There are so many unsafe foods out there that I get genuinely confused about the safety features of a product.

CC4. When consuming foods, I feel uncertain about the food safety characteristics of these products.

Health Consciousness

HC1. I think about my health a lot.

HC2. I am very conscious of my health.

HC3. I am generally aware of how I feel about my health.

HC4. I constantly monitor my health.

HC5. I remain alert to changes in my health.

HC6. I am generally aware of my health status.

HC7. I pay attention to my health throughout the day.

HC8. I pay attention to how I feel physically throughout the day.

HC9. I am very concerned about my health.

Food Safety Concerns

FSC1. Most foods today contain chemical and fertilizer residues.

FSC2. I am very concerned about the amount of artificial additives and preservatives in foods.

FSC3. I am concerned about the quality and safety of food today.

Intention to Consume Healthy Foods

ICH1. I intend to purchase healthy food.

ICH2. I intend to purchase healthy food to improve my health.

ICH3. I aim to consume as much healthy food as possible.

ICH4. I would pay more for healthy food to improve my health.

ICH5. I intend to purchase healthy food to avoid diseases.

ICH6. I intend to purchase healthy food to reduce environmental problems.

ICH7. I intend to purchase healthy food due to animal welfare issues.

ICH8. I intend to purchase healthy food to be a responsible consumer.

ICH9. I intend to purchase healthy food.

Slow Food Consumption

Good

P1. I go to relevant places to consume local and regional food.

P2. The flavor of local and traditional cuisine is the main reason I visit local restaurants and places.

P3. Eating local food makes me happy and satisfied.

P4. I travel with my family to embrace and promote a healthy eating culture.

**P5. I trust the quality of food in rural households (roadside vendors).*

Fair

F1. My main motivations for using local products and repeating trips are simple packaging and reasonable prices.

F2. I have enough money to buy local food and visit rural areas.

F3. The quiet and relaxing atmosphere of local restaurants makes them affordable.

F4. Food prices at local restaurants are more reasonable than in urban areas because of the direct and easy access to organic produce.

F5. Spending my free time in rural homes and natural landscapes makes me feel better than long-term, expensive travel.

Clean

C1. The natural landscapes of the countryside fascinate me and encourage me to travel again.

C2. Protecting the rural environment (biodiversity) and the diversity of rural food is important to me.

C3. I prefer to consume these types of foods since they produce recyclable waste.

C4. Eating foods prepared with natural ingredients is a valuable experience.

**Omitted from analysis due to low factor loading.*

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