



Selecting Infant Food Products: Trust, Value Perception and Buying Behavior

ბავშვთა კვების პროდუქტების შერჩევა: ნდობა, ღირებულების აღქმა და ყიდვის ქცევა

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Abstract

Introduction: During the decision-making process, the focus is on communicating values, trust and purchase behavior. The research's purpose is to study parents' decision-making process and motivating factors when choosing baby food products. **Methods:** both qualitative and quantitative methods were used during the research process, within which in-depth interviews of mothers and pediatricians were conducted. **Results:** The study found that pediatricians (51%) are the most trusted influencers in the decision-making process, while social media and store advisors are the least trusted (34%). 97% of respondents report that they read the composition of the product and pay attention to the ingredients on the label. During the decision-making process, preference is given to German products (37%), the lowest demand is for products produced in Ukraine (45%). According to the composition and price, popular brands such as Nutrilak and Vinni are distinguished. In most cases (57%) of the brand replacements, the main reason is the allergic reaction of the baby. **Conclusion:** professionals' recommendations and composition transparency are important factors in the decision-making process. The quality of products produced in Western and Central Europe is perceived as a benchmark due to the high requirements of the production process there and the strict monitoring of quality control.

Keywords: Infant Nutrition, Parental Decision-Making, Consumer Behavior, Value Communication, Consumer Trust

Quote: Giorgi Mamniashvili. Selecting Infant Food Products: Trust, Value Perception and Buying Behavior. Health Policy, Economics and Sociology, 2024; 8 (2)

აბსტრაქტი

შესავალი: გადაწყვეტილების მიღების პროცესის დროს ფოკუსი კეთდება ღირებულებების კომუნიკაციაზე, ნდობაზე და შესყიდვის ქცევაზე. კვლევის მიზანია შეისწავლოს ჩვილ ბავშვთა კვების პროდუქტების არჩევისას მშობლების გადაწყვეტილების მიღების პროცესი და მამოტივირებელი ფაქტორები. **მეთოდები:** კვლევის პროცესისას გამოყენებულ იქნა როგორც თვისებრივი, ისე რაოდენობრივი მეთოდები, რომელთა ფარგლებში ჩატარდა დედებისა და პედიატრების სიღრმისეული ინტერვიუები. **შედეგები:** კვლევამ აჩვენა, რომ გადაწყვეტილების მიღების პროცესში პედიატრები (51%) არიან ყველაზე სანდო

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ინფლუენსერები, ხოლო სოციალურ მედიას და მაღაზიების კონსულტანტებს ყველაზე ნაკლებად ენდობიან (34%). რესპონდენტთა 97% აღნიშნავს, რომ კითხულობს პროდუქტის შემადგენლობას და ყურადღებას აქცევს ინგრედიენტებს ეტიკეტზე. გადაწყვეტილების მიღების პროცესის დროს უპირატესობა ენიჭება გერმანულ პროდუქტს (37%), ყველაზე დაბალი მოთხოვნა უკრაინაში წარმოებულ პროდუქტებზეა (45%). შემადგენლობისა და ფასის მიხედვით იკვეთება პოპულარული ბრენდები, როგორცაა NutrilaK და Vinni. ბრენდის ჩანაცვლების უმეტეს შემთხვევებში (57%) ძირითადი მიზეზი ჩვილის ალერგიული რექციაა. **დასკვნა:** პროფესიონალების მიერ გაწეული რეკომენდაციები და შემადგენლობის გამჭვირვალობა უმნიშვნელოვანსი ფაქტორებია გადაწყვეტილების მიღების პროცესში. დასავლეთ და ცენტრალურ ევროპაში წარმოებული პროდუქციის ხარისხი აღიქმება როგორც ეტალონი იქ არსებული წარმოების პროცესის მაღალი მოთხოვნებისა და ხარისხის კონტროლის მკაცრი მონიტორინგის გამო.

საკვანძო სიტყვები: ჩვილის კვება, გადაწყვეტილების მიღება, მომხმარებელთა ქცევა, ღირებულების კომუნიკაცია, მომხმარებელთა ნდობა.

ციტატა: გიორგი მამნიაშვილი. ბავშვთა კვების პროდუქტების შერჩევა: ნდობა, ღირებულების აღქმა და ყიდვის ქცევა. ჯანდაცვის პოლიტიკა, ეკონომიკა და სოციოლოგია, 2024; 8 (2)

Introduction

The process of selecting infant food products is complex and multidimensional, as parents must consider multiple factors, such as product composition, brand reputation, price, and the credibility of recommendations from healthcare professionals. Parents' choices are heavily influenced by a need to trust that the products they choose align with best practices in infant nutrition, as well as by an inclination toward certain brands that they perceive as trustworthy or higher quality (Blaxter & Hughes, 2001).

In Georgia, the infant food market has expanded rapidly in recent years, featuring a mix of internationally recognized brands alongside regional and lesser-known options. This diversity offers parents an array of choices, which, while beneficial, also adds complexity to the decision-making process. The increased availability of infant food brands means parents must now carefully assess product claims, compare prices, and consider composition to determine which products best suit their needs (Revenue Service, n.d.; National Statistics Office of Georgia, n.d.). Understanding the intricacies of consumer behavior within the Georgian infant food sector is crucial. Such an understanding not only supports parents in making more informed decisions but also guides companies in developing clearer, more effective communication strategies that resonate with parents' expectations and provide genuine value.

Healthcare professionals, particularly pediatricians, play a pivotal role in shaping parents' choices around infant feeding. Pediatricians are often the first to guide parents on nutrition during the early months of an infant's life, influencing decisions around breastfeeding and formula use. According to studies, trust in pediatricians is a significant factor; parents often feel reassured when a healthcare provider recommends a particular approach or product (Blaxter & Hughes, 2001). However, trust is not always absolute. If parents encounter issues or believe they have received incorrect advice, trust in pediatricians can diminish, leading them to seek additional information from other sources.

In addition to healthcare professionals, social networks and family members are crucial influences in parents' decision-making processes around infant feeding. Cultural factors strongly shape these choices, particularly in societies like Georgia, where family input is highly valued. Many parents rely on advice from family members, such as grandparents, who may share their own child-rearing experiences and recommend particular feeding practices based on tradition or personal beliefs

Online social groups, forums, and parenting networks also play a growing role in decision-making. These communities offer platforms where parents share personal experiences, advice, and product recommendations. Although this social guidance can provide practical insights and support, it can also create confusion when conflicting advice is given, particularly when it contradicts professional recommendations. Balancing this blend of social influence and medical advice presents a unique challenge for parents, as they attempt to make choices that align with both family expectations and evidence-based practices.

Brand reputation and marketing efforts strongly shape parental preferences in the infant food market. Brands that emphasize values like quality, safety, and nutrition tend to gain higher trust among parents, who look for reassurance that products meet high standards. Marketing that promotes these qualities, particularly through credible endorsements or partnerships with healthcare professionals, can positively influence brand perception (Blaxter & Hughes, 2001).

In today's information-rich environment, parents are exposed to an overwhelming volume of advice and recommendations from a range of sources, including pediatricians, family members, social media, brand advertisements, and discussion forums. Each of these sources may present different, sometimes conflicting, views on the best practices for infant nutrition, which can complicate parental decision-making.

While many parents place significant trust in pediatricians, they also consider recommendations from family members and other information sources, including dedicated parenting groups. In this context, trust in the source of information becomes a vital factor influencing decision-making (Blaxter & Hughes, 2001).

Adding to the complexity, companies invest heavily in branding and marketing to convey the value and quality of their infant food products. However, it remains uncertain how effectively these marketing efforts influence parents, who may prioritize independent research and trusted personal sources over branded messaging. This discrepancy suggests a gap in the literature on how effectively companies communicate value and how parents interpret and respond to these messages in the context of infant nutrition. Addressing this gap is essential for developing insights into parental perceptions and guiding companies to refine their marketing approaches in a way that genuinely aligns with parents' values and concerns regarding product safety and nutritional integrity (Neuman, 2005).

The aim of this study is to shed light on the factors that influence parental decision-making in the selection of infant food products. Specifically, this study seeks to achieve the following objectives:

- To examine parents' experiences and challenges as they navigate the complex decision-making process for selecting infant food products in a crowded market.
- To identify common patterns in parental purchasing behavior, with a focus on the influence of various information sources and the role of trust in shaping these decisions.
- To analyze the key factors within the value chain—such as product composition, brand reputation, and source credibility—that impact parental purchasing choices.

Methods

The study employs a mixed-methods approach, integrating qualitative and quantitative methodologies to thoroughly examine the factors influencing parental choices for infant food products. This approach is chosen to capture both the depth and scope of consumer behavior, which is essential in a field like infant nutrition where decisions are influenced by both objective factors (e.g., product composition, brand reputation) and subjective factors (e.g., trust in healthcare advice, family influence). By combining qualitative and quantitative data, the study addresses limitations inherent in each method when used alone. This mixed-methods approach allows for a layered analysis, where qualitative insights

provide a foundation for developing quantitative measures, ensuring that the survey questions reflect real-world parental concerns and experiences (Creswell, 2003).

Data integration in this study ensures that insights from qualitative interviews are contextualized and validated with quantitative findings, providing a comprehensive view of parental behavior. The research process begins with qualitative data collection through interviews with parents and pediatricians, allowing for open-ended exploration of factors like trust in healthcare advice, the role of social influence, and perceptions of product quality. MAXQDA and SPSS software were used for the data analyses.

Qualitative Research

Description of sampling units

The qualitative phase involved two primary participant groups: mothers who make active feeding decisions for infants, and pediatricians who offer professional guidance on infant nutrition. Mothers were selected based on their experience feeding infants between 2 and 24 months old, as this age range is critical for nutritional transitions and the introduction of complementary foods. Mothers had to have experience with formula feeding or other types of infant food to ensure they could provide detailed insights on the decision-making process. Pediatricians were selected based on their experience in infant healthcare, ensuring they could speak knowledgeably about parental concerns and commonly observed decision-making behaviors. The selection criteria helped ensure that the study gathered relevant, experience-based insights from both parental and professional perspectives.

The mothers who participated in the interviews ranged in age from 25 to 35 years, representing a broad cross-section of Georgian families. The sample for qualitative research concentrates on urban residents, reflecting the varied social contexts and access to information that influence feeding practices. Pediatricians who participated in the study were based in different cities, ensuring a diverse perspective on healthcare advice and access to resources. These demographic variations allow the study to consider different cultural and socioeconomic influences on parental choices, providing a well-rounded view of the decision-making environment within Georgia.

Data Collection and Analyses

To gain a comprehensive understanding of parental decision-making, semi-structured interviews were conducted with mothers. This format provided a balance between consistency, ensuring that key topics were covered across all interviews, and flexibility, allowing participants to elaborate on unique experiences. Topics covered included mothers' sources of information on infant feeding, levels of trust in healthcare advice, and factors influencing brand choices.

As for Pediatricians, they were asked questions about the common concerns they observe among parents, the role of healthcare guidance in purchasing decisions, and general trends in parental behavior related to infant nutrition.

All interviews were transcribed and subsequently analyzed in MAXQDA, a software tool designed for content analysis. Using MAXQDA, responses were systematically coded to identify major themes and sub-themes, ensuring that key patterns in behavior were clearly documented and organized. This structured approach enabled to categorize and compare data effectively, facilitating a thorough analysis of the motivations behind parental choices and the common concerns affecting their purchasing decisions.

Quantitative Research

Description of sampling units

The quantitative survey was developed based on the themes identified in the qualitative phase, ensuring that the questionnaire would address the real-life concerns and priorities expressed by parents and pediatricians. Key themes from the interviews were translated into structured survey questions, including both closed-ended and scaled questions to quantify factors such as trust in healthcare professionals, the influence of social networks, and the role of brand reputation. This alignment between

qualitative and quantitative phases ensured that the survey captured both specific insights and general trends, enhancing the relevance and validity of the findings.

To ensure the relevance of responses, filter questions were included at the beginning of the questionnaire to confirm that respondents matched the target demographic. Participants had to be parents of children aged 2 to 24 months and involved in active decision-making for infant food products.

A total of 260 parents participated in the survey, reflecting a diverse sample with a range of socioeconomic backgrounds, including variations in residence (urban and rural), education level, and income. This diversity allowed the study to capture a wide perspective on factors influencing infant feeding choices within Georgian society, accounting for potential differences in access to resources and cultural practices between different demographic groups.

Results

Background of Mothers and Feeding Choices

The study included nine mothers aged 25–35, each meeting the criteria of having a child between 3 and 24 months and actively participating in feeding decisions. The diversity of their feeding experiences illustrates various challenges and adjustments in parental choices:

- **Initial Formula Feeding:** Two mothers initiated formula feeding from birth due to low milk supply. Their decisions were rooted in a need to ensure nutritional adequacy for their infants.
- **Transition Due to Work or Health Needs:** One mother shifted to formula at two months to return to work, while two others had to supplement or replace breastmilk due to health concerns in their infants. These cases highlight a balance between economic, health, and logistical factors influencing feeding choices.
- **Gradual Transition:** A few mothers combined breastfeeding with formula feeding initially, then transitioned fully to formula due to milk insufficiency or perceived child health benefits.

This diversity highlights that parents are often adaptive in their choices, tailoring feeding approaches based on a combination of personal circumstances and their infants' evolving needs.

Information-Seeking Patterns

Pediatricians are the primary advisors for most mothers, with six out of nine citing pediatricians as their first source of infant feeding information. Pediatricians are seen as credible and objective sources, especially valued by first-time mothers. However, two mothers switched pediatricians due to negative experiences with initial advice, indicating conditional trust where professional credibility depends on demonstrated outcomes.

Family influence is also significant; two mothers initially consulted older relatives but showed caution, concerned about the generational gap in feeding practices. One mother fully trusted her family's advice, highlighting how cultural traditions can still shape parental behavior despite modern, medically informed alternatives. This pattern suggests that while medical guidance is essential, many parents seek to balance it with the familiarity and cultural reassurance offered by family support.

Digital resources, including Google and social media groups, were secondary but widely used sources. Four mothers searched for information online, turning to Google as an initial touchpoint for understanding general nutrition concepts and product comparisons. Social media parenting groups, especially "Georgian Moms," were highlighted by two mothers for providing peer-based support. However, while social media offered shared experiences, most mothers were cautious, treating online advice as supplementary and subject to validation through medical consultations. This selective trust in digital sources underscores parents' prioritization of safety and credibility, balancing easily accessible information with professional validation.

Factors Influencing Brand and Product Choice

Healthcare professionals, particularly pediatricians, exert significant influence over brand choices, with mothers often adopting brands recommended by pediatricians, viewing these recommendations as assurances of safety and quality. Pediatric guidance is especially crucial when mothers face uncertainties around formula and complementary foods. However, the qualitative findings reveal that trust is dynamic and can decrease if recommendations prove ineffective, as reported by two mothers.

Most mothers prioritize ingredient transparency, scrutinizing labels for potentially undesirable additives like palm oil, artificial sugars, or non-beneficial fillers. This selective approach reflects a health-conscious, ingredient-focused consumer mindset. In addition to ingredients, six mothers noted that the country of origin plays a significant role, with a preference for European products due to perceptions of higher regulatory standards. Certain regions, particularly Russia, are avoided due to perceived inconsistencies in quality control. This awareness and selective trust based on origin highlight a sophisticated consumer mindset where national reputation affects parental trust in brand safety and integrity.

Price sensitivity emerged as a key factor, with many mothers seeking brands that balance quality with affordability. Established brands with strong reputations are generally preferred, as mothers associate brand reputation with consistent quality and safety. Conversely, negative product reviews or reported quality issues lead to immediate skepticism, with mothers willing to switch brands if they perceive potential safety risks. This adaptability highlights that while brand loyalty exists, it is closely tied to continuous reassurance of quality.

Reasons for Brand Substitution

The child's response to a product is often the most immediate factor in brand substitution. Mothers monitor reactions closely, noting any digestive discomfort or refusal to eat as indicators of product incompatibility. If a negative reaction occurs, substitution is typically immediate, with mothers consulting pediatricians for alternatives. This responsiveness emphasizes a child-centered approach, where product decisions are subject to frequent reassessment to prioritize the child's comfort and nutritional compatibility.

Price increases can drive brand switching, particularly among families on tight budgets. When prices rise, mothers often search for comparable but more affordable brands, demonstrating flexibility to meet budgetary limits without compromising quality perception. Social media also plays a role in brand substitution; one mother noted that widespread criticism on digital platforms would deter her from using a specific brand, while others required multiple negative reports to justify a switch. This reliance on social proof illustrates how social media affects brand trust, although most mothers balance online feedback with direct child responses and pediatric advice.

Empirical Results of Pediatrician Interviews

Both pediatricians observed a generational shift, with modern mothers increasingly seeking information online before consultations. Pediatrician #1 noted that many mothers arrive with online research, while Pediatrician #2 reported that, unlike previous generations, current parents favor digital resources over traditional family advice. This trend reflects changing trust patterns, where digital access provides immediate information, though pediatricians encourage parents to cross-check online advice with professional consultations to ensure reliability.

Key Factors in Product Selection

Both respondents cited product composition as an essential selection criterion. They advise parents to avoid formulas containing sugars, palm, and rapeseed oils, while encouraging probiotics for their health benefits. Country of origin is also relevant, with a preference for European brands known for stricter quality standards. Pediatrician #1 specifically recommends German brands, while Pediatrician #2 noted

that many parents prioritize products from Western Europe, perceiving these regions as having superior quality controls. These recommendations support parental concerns regarding product integrity and align professional guidance with mothers' preferences for safe, transparent ingredients.

Factors Leading to Brand Substitution

Both pediatricians identified price and child acceptance as primary reasons for substitution. Rising costs force some parents to opt for more affordable brands, while the child's response, particularly if adverse, necessitates immediate changes. Pediatrician #1 observed that parents avoid high-cost brands if they risk future affordability, while Pediatrician #2 added that negative reviews on social media could deter brand loyalty without further verification. These insights underscore that parents prioritize adaptability, responding to economic constraints, child health, and social perceptions to make flexible, well-informed decisions regarding infant nutrition.

Quantitative Findings

The survey encompassed a range of age groups, with the largest segments between 26-30 and 31-35 years, comprising 19% and 16% of the sample, respectively. Mothers below 18 years were not represented, aligning with the sample's focus on typical childbearing age. Crosstab analysis in SPSS revealed a connection between mothers' age and family size, with the highest percentage of single-child households occurring in the 26-30 age range (18%), while larger families (two or more children) were more common among older respondents, particularly those aged 31-35. These findings provide insight into the demographic characteristics of the sample, which aligns with the life stages and parental experiences influencing infant feeding choices (Table 1).

Table 1. Mothers' age and number of children

	Below 18 years	18-25 years	26-30 years	31-35 years	36-40 years	41-50 years	51 + years
1 child	1%	17%	18%	11%	4%	1%	
2 children		2%	11%	13%	8%	2%	
3 children			3%	6%	2%	1%	1%
4 + children						2%	

Source: own research data

Analysis of feeding practices revealed that 76% of respondents practiced mixed or artificial feeding, while 48% used exclusive breastfeeding initially but transitioned to formula or mixed methods due to various factors such as health issues, lifestyle demands, or return to work obligations (Table 2).

Among respondents using artificial feeding, nearly one-third (32%) introduced formula within the first two months, commonly citing inadequate breast milk supply. This data reflects the frequent need for formula as a supplement in the early months, highlighting the dependency on formula when breastfeeding alone is insufficient to meet nutritional needs.

Introduction timing of formula and cereals showed varied practices based on personal circumstances and awareness of pediatric guidelines. For instance, 70% of mothers introduced formula between 0-2 months, predominantly due to insufficient lactation or immediate feeding challenges post-birth (Table 2).

The survey also captured a strong adherence to recommended timing for introducing cereals and other solids, with 75% following guidelines and introducing cereals between 4-6 months, as endorsed by the American Academy of Pediatrics (see Table 2). This high adherence indicates a tendency to rely on pediatric recommendations to ensure nutritional adequacy, highlighting parental awareness of developmental feeding stages.

Table 2. Feeding habits

Feeding practices		Introduction of artificial feeding		Introducing of cereals	
	(%)		(%)		(%)
Only artificial feeding	33%	0-2 months	70%	0-2 months	2%
Only breastfeeding	25%	4-6 months	23%	4-6 months	75%
Mixed feeding system	43%	7-9 months	6%	7-9 months	22%
		10-12 months	2%	10-12 months	2%

Source: own research data

Advisor influence plays a crucial role in purchasing decisions, with a marked preference for professional recommendations. Pediatricians ranked as the most trusted advisor, with 61% of mothers identifying pediatric recommendations as their primary influence when choosing formula. Family members were also a significant influence, cited by 24% of respondents, reflecting cultural reliance on family support. Social media groups, such as "Georgian Moms," accounted for 10% of influence, revealing moderate trust but highlighting the appeal of community-based support. In-store consultants and brand social media pages were the least trusted, with only 6% viewing these as reliable sources due to perceived commercial biases and insufficient product knowledge among consultants (Table 3).

For cereal purchases, the influence of advisors shifted slightly. While pediatricians remained the primary source of trust, their influence dropped to 55%, with mothers showing almost the same openness to family members and greater acceptance of social media input for cereal purchases. Trust in in-store consultants and brand pages increased slightly, indicating that mothers may feel more comfortable exploring non-formula options based on broader recommendations. This shift may reflect a perceived lower risk with cereals compared to formula, allowing mothers to diversify their advice sources while still prioritizing professional input (Table 3).

Table 3. Influence of different sources on baby food choosing process

	Artificial feeding	Cereals
Pediatrician	61%	55%
Family members or friends	24%	23%
Social media groups	10%	9%
Consultants in shops or pharmacist	3%	7%
Infant's food brand's social media page	3%	4%
other		1%

Source: own research data

Social media brand pages ranked lowest in trustworthiness, with 32% expressing skepticism due to perceived biases in promotional content. Social media groups, though useful for peer opinions, were cited as untrustworthy by 25%, with concerns over misinformation and lack of professional oversight. Similarly, in-store consultants were often ignored due to perceived sales motives rather than genuine care for infant health, as well as a lack of in-depth knowledge about product composition and nutritional standards.

Ingredient composition was a significant factor, with 97% of respondents indicating that they review product labels for key ingredients. 85% of respondents are informed about palm oils and 65% about rapeseed oils.

Country of origin was another critical factor, with 37% of respondents preferring products from Germany, perceived as maintaining high standards for product safety and quality. Switzerland and Italy

followed closely at 16% and 15%, respectively, underscoring a preference for Western European products that align with perceptions of quality assurance (Table 4).

Table 4. Preferences in country of origin – desirable countries

Germany	37%
Austria	4%
France	12%
Italy	15%
Russia	11%
Switzerland	16%
USA	5%

Source: own research data

On the avoidance side, 45% of mothers avoided products from Ukraine, with 23% avoiding Russian products. Interestingly, 16% avoided American products due to perceived differences in regulatory practices. This pattern underscores an underlying association between product origin and quality expectations, with mothers actively choosing brands from countries viewed as maintaining stringent quality controls.

Brand loyalty data showed that Nutrilak was the most commonly used formula brand, with 18% of respondents, followed by Humana (14%) and Hipp (14%). For cereals, Vinni held the top position with 18% market share, followed by Heinz at 17% and Humana at 13%. These preferences indicate that Nutrilak and Vinni have established a strong reputation for quality and safety among parents, reflecting trust in their brand values.

Despite the presence of brand loyalty, 38% of mothers reported switching brands at least once, often due to issues such as adverse child reactions, ingredient concerns, or price increases. Child reactions, such as allergic responses, were the leading cause of substitution, cited by 57% of respondents. Price changes influenced 14% to switch to a more affordable option, while 12% noted composition concerns as a deciding factor in their choice to switch. (Table 5).

Table 5. Reasons for substituting or removing food brand

Undesirable ingredients in the composition	12%
Child had an allergy	57%
Due to increased price	14%
Recommendation from the pediatrician	12%
Recommendation from the consultant or pharmacist	2%
Recommendation from a family member or friend	1%
Recommendations in social media groups	1%

Source: own research data

Ingredient sensitivity was further analyzed by examining how awareness influenced purchasing. Even among those informed about palm and rapeseed oils, ingredient concerns varied. Palm oil strongly influenced purchasing decisions for 43% of informed respondents, while rapeseed oil affected 41%. This selective approach indicates that mothers' awareness of certain ingredients is a determining factor, influencing their purchasing patterns and leading to product avoidance if these ingredients are present. Additionally, 50% reported avoiding products with milk powder instead of raw milk, illustrating a preference for natural, minimally processed ingredients in infant foods (Table 6).

Table 6. Evaluation of factors impacting buying decision

	No impact at all	Partially has no impact	Neutral	Partial impact	Ful impact
Rapeseed Oil	7%	10%	16%	26%	41%
Palm Oil	9%	8%	7%	33%	43%
Country of Origin	11%	12%	7%	30%	41%
Milk powder instead of raw milk	10%	4%	6%	29%	50%

Source: own research data

Conclusions

Trust in Advisors: Pediatricians are the most trusted sources, with 51% of parents reporting full trust and 36% reporting partial trust. Friends and family are also influential, with 72% considering them reliable, while only 6% reported full trust in consultants and social media advisors.

Product Composition Sensitivity: Ingredient awareness is high, with 97% of parents regularly reviewing product labels. Specifically, 85% are informed about palm oil content and 65% about rapeseed oil. Despite this, only 43% are strongly influenced by palm oil presence.

Country of Origin Preferences: Trust in country of origin plays a significant role in decision-making, with 37% of parents preferring German-origin products for perceived quality assurance, while 45% avoid products from Ukraine, and 23% avoid those from Russia.

Advisor Trust: Pediatricians are highly influential, as 87% of parents consider their guidance pivotal in early feeding choices. Family advice also ranks high, while social media brand pages hold the least trust, with 34% of parents rating them as “strongly untrustworthy.”

Ingredient Transparency: High ingredient sensitivity influences decision-making, with 97% checking product composition, and 43% stating they avoid products with palm oil and 41% avoiding rapeseed oil.

Brand and Origin Impact: Brand loyalty is closely tied to the country of origin, with 58% of parents showing strong preferences for Western European products due to perceived quality, while only 2% trust lesser-known or locally promoted brands without strong reputations.

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