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Deciphering the gap between good intentions and healthy eating behaviour



Key external stakeholders:

Public Health Policy, Consumer Associations, Food Manufacturers

Practical implications for stakeholders:

The food choices of many Irish people do not correspond with healthy dietary guidelines and, therefore, we observe a rising prevalence of overweight and obesity in Ireland. Research shows that people are motivated to make healthy food choices, however, translating healthy intentions into healthy eating behaviour is challenging in the current food environment. The present study focused on dietary change with the objective of identifying the factors that impede and facilitate people to successfully translate their healthy eating intentions into behaviour.

- Unhealthy eating behaviour is often a result of automatic/unconscious eating. This is also termed passive consumption and must be tackled in order to achieve a healthy and balanced diet.
- Having a dietary related goal is one of the key factors in successfully translating good intentions into good behaviour. However, the goal alone is not enough and must be supported by dietary self-control.
- Dietary planning and dietary self-monitoring are two activities that can help people to overcome passive consumption.

Main results:

- Food choice and eating behaviour is often driven by eating habits or passive consumption.
- People can counteract the factors that impede healthy eating behaviour by bringing order and structure to their diet. This can be achieved through advanced food planning and self-monitoring their dietary behaviour.
- People are likely to be successful in making a healthy dietary change if they set specific behavioural change goals and if they take control of their food consumption patterns.

Opportunity/Benefit:

In order to improve compliance with dietary guidelines, public health agencies should promote the idea of setting dietary related goals that are reasonable to achieve. The importance of setting sub-goals that are related to behaviour (e.g. eat less high calorie foods) rather than a physiological target (e.g. to feel healthier) should be highlighted. From an industry perspective, new/reformulated food products and associated marketing strategies that facilitate dietary self-control are likely to be received favourably by consumers. For example, manufacturers could incorporate easy-to-understand food labels as a value added brand feature. Food packaging is a product feature that can be developed to aid consumer self-monitoring. For example, markings on a packet may indicate how many calories are in the quantity of food consumed and this may also help people to maintain control over portion sizes. Augmented product features could include internet and phone application dietary planners that can help people to track calories consumed.

Collaborating Institutions:

UCC

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1. Project background:

In health behaviour research it has been found that healthy eating intentions often do not result in healthy eating behaviour. This is termed the intention-behaviour gap. Healthy eating is regarded as 'self-directed' behaviour, given that individuals can contribute to their own health and well-being through adopting particular health-enhancing behaviours and avoiding health-compromising behaviours. Therefore, it is useful to identify what are the factors associated with successfully bridging the gap between intention and behaviour in terms of healthy dietary choices?

2. Questions addressed by the project:

- What are the barriers to eating and maintaining a healthy diet?
- What factors may facilitate people to implement their healthy eating intentions?

3. The experimental studies:

Qualitative in-depth interviews were conducted with 80 Irish adults who participated in the National Adult Nutrition Survey (NANS). In these interviews, participants provided accounts of their food choices and eating behaviours over their life course. Twelve of these interviews were analysed in depth in order to identify all discourse related to food choice strategies/goals and successful/failed attempts to make dietary changes. Analysis of the interviews indicated that three important issues mediate the intention-behaviour relationship; unconscious patterns of behaviour, dietary self-control and dietary engagement. These issues were further examined in a questionnaire administered to a representative sample of 500 adults. The questionnaire investigated in detail sugar/confectionery consumption intentions and behaviour. The amount of sugar consumed by individuals is a public health concern in Ireland (Department of Health, 2012) and it may underlie the recent industry trend of reducing the amount of sugar in products (Leatherhead, 2011).

4. Main results:

People's food choices and eating behaviours are often the result of well established habits. In the study, confectionery habit explained 26% of the variance in sugar consumption. Furthermore, people often make instinctive rather than considered decisions to eat foods that contain high amounts of sugar. Attaining dietary self-control is essential in order to break unhealthy patterns of behaviour as indicated by the significant negative relationship between self-control and confectionery habit ($\beta = -0.26$, $p = < 0.01$). In addition to dietary self-control, the findings indicate that people who plan and monitor their dietary behaviour are less likely to have confectionery consumption habits ($\beta = -0.24$, $p = < 0.01$). Furthermore, individuals who target specific behavioural change goals are likely to be more successful in making a healthy dietary change compared with individuals who have vague or no goals. The analysis indicates that individuals who are motivated to reduce their sugar consumption are 8 times more likely to successfully make a change if they set a dietary goal.

Finally, in order to assist people to eat a healthy diet, it is necessary to identify healthy eating segments in the market. The findings from this study indicate that identifying people's willingness to make and maintain healthy dietary change is an effective way to divide the market and target health orientated individuals. In relation to confectionery food consumption, four segments were identified;

- People who tried to maintain their level of sugar consumption over the previous six months and are adhering to recommended sugar consumption guidelines (14%)
- People who tried and succeeded in reducing their sugar consumption in the previous six months and are adhering to recommended sugar consumption guidelines (41%)
- People who tried but failed to reduce their sugar consumption in the previous six months and are not adhering to recommended sugar consumption guidelines (23%)
- People who made no effort to change sugar consumption in the previous six months and are not adhering to recommended sugar consumption guidelines (22%)

5. Opportunity/Benefit:

Health promoting messages should be designed with the objective of helping people to better attain control over their diets. Based on the findings from this study, people should be encouraged to set dietary related lifestyle goals that are reasonable to achieve. This should entail communications that emphasise the positive implications of switching to a healthy diet. People's expectations need to be grounded by providing information on the likely outcomes associated with a specific dietary change. Therefore, the importance of setting sub-goals that are related to behaviour rather than a physiological target should be highlighted. For example a long term abstract goal 'to feel healthier' influences a medium term goal to lose weight which influences a shorter term goal or behavioural intention to eat less high calorie foods. People need to be encouraged and facilitated to self-monitor dietary behaviour related to short and medium term goals, which are easier to evaluate. Food packaging is a product feature that can be developed to aid consumer self-monitoring. For example, markings on a packet may indicate how many calories are in the quantity of food consumed and this may also help people to maintain control over portion sizes. Augmented product features could include internet and phone application dietary planners that can help people to track their food intake and calories consumed.

Planning meals in advance is another means towards dietary self-control. Food labelling that is easy to understand will help people to plan and monitor their diets. There may be an opportunity for food manufacturers to incorporate easy-to-understand food labels as a value added brand feature; this will require food manufacturers to go beyond basic regulatory guidelines. New product developments and reformulations of existing products will facilitate dietary self-control. For example, popular food/snack products should be reformulated to offer low/fat/salt/sugar variations. From a public policy perspective, information campaigns should be based on identifying common barriers to healthy eating, such as time constraints and stress, and suggestions of how to overcome these constraints e.g. through planning and preparing daily meals in advance. However, dietary self-control alone may not be enough to counteract the affects of unconscious eating behaviour and, therefore, it may be necessary to alter the food environments that people are regularly exposed to.

6. Dissemination:

Presented at the Agricultural Economic Society of Ireland (AESI) annual conference 2010 and the AESI student seminar 2011

Presented at the Nutrition Society's 2010 Postgraduate Research Meeting

Presented at the Walsh Fellowship Seminar 2010 and 2011

Presented at the Food, Health, Choice and Change Conference 2012

Popular publications:

Naughton, P. McCarthy, S., McCarthy, M. (2010) 'Mind the gap; deciphering the gap between good intentions and healthy eating behaviour' *T-research* 5: 18-20.

Deciphering the gap between good intentions and healthy eating behaviour, The Teagasc Food Innovator, issue 11, Autumn 2011.

7. Compiled by: Mr Paul Naughton and Dr Sinead McCarthy