Making It Easier to Eat Healthily: Consumer Perceptions of Interventions to Make Healthier Food Choices in Wales

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Introduction

Healthy diet is of international concern. In Wales, consumption data indicate consumer reliance on convenience food¹, under consumption of fruit and vegetables² intakes of fat,³ salt⁴ and sugar⁵ exceeding dietary recommendations and consumption of high fat, salt and sugar food and drink products (HFSSFDPs)¹.

Consequently, in Wales 58% of adults² and 25% of children are overweight⁶. Food-related ill health, particularly among children is reportedly greater in Wales than the rest of the UK⁷ ⁸. The cost of food-related ill-health has a significant impact on the National Health Service in Wales⁹.

Such data indicate the critical importance of one of the seven goals of the Well-being of Future Generations (Wales) Act 2015 'A healthier Wales'. The aim is for a society in which well-being is maximised and in which choices that benefit future health are understood.¹⁰

Although vast research has been conducted on nutritional interventions internationally, however there is a lack of data specific to consumers in Wales¹¹. Therefore, identification of potential initiatives to inform and enable Welsh consumers to make nutritionally-beneficial choices to improve food-related health-outcomes are required.

Research aim

The aim of the project was to explore the perceptions of Welsh consumers regarding interventions to assist the population of Wales in making healthier food choices.

Methods

As part of a large Welsh Government funded research project¹¹, an in-depth review of Welsh consumption reports, international nutritional interventions and governmental policy informed the development of a questionnaire.

The questionnaire explored consumer perceptions of interventions including reformulation of food products, taxation of products, nutritional education, regulation of marketing, access to healthier food and provision of information.

Ethical approval for the study was obtained from the Cardiff School of Health Sciences Ethics Committee.

The online questionnaire was completed by consumers living in Wales (n=122).

Acknowledgements

The ZERO2FIVE Food Industry Centre Research Group wish to acknowledge the funding received by the Welsh Government Food Division to conduct the project.

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Results and discussion

Reformulation of products:

Voluntary reformulation in the UK has reduced levels of target nutrients, particularly salt, however research suggests the need for mandatory reformulation. 12

Many expressed positive attitudes towards reformulation, with up to a third indicated a willingness to pay for reformulated food products, some expressed concerns regarding the potential health implications of alternatives utilised for reformulation (Figure 1).

"For those who will always buy ready meals, I think this reformulation is a good idea on the whole. People may not even realise they're buying a new healthier product, so for many this could be a good solution."

"In theory reformulation is a good idea as long as the substitutes are genuinely

better and don't just swap one bad thing for another."

Figure 1. Respondent quotes regarding food product reformulation.

A significant difference (p<0.05) in the reported desirability of 'regular' and 'reformulated' food products such as fat reduced biscuits was determined (Figure 2).



Taxation of products:

The UK Government childhood obesity plan, will introduce a levy on producers and importers to promote sugar reduction in products to give consumers healthier alternatives.¹³

Data suggest 'sugar tax' can influence consumer purchase of sugar-sweetened drinks. Although some believed there a need to tax manufacturers, others believed a tax on consumers would be beneficial (Figure 3), it was perceived that taxation would have more impact on the 'general public' (57%) than on 'self' (33%).



drinks on healthy eating (*n*=107).

Nutritional education:

With regards to nutritional education, multiple methods were reviewed from international research including family based education, mass media campaigns and individual targeted interventions. 11, 12

Many respondents had suggestions for food related health education including cooking skills, portion size awareness and food procurement awareness, along with continued support interventions (Figure 4).

"To be a healthier nation we need to be taught and encouraged more to eat a balanced diet and exercise more. I know exactly what I should and should not eat but I just cannot stick to a diet - more time and money should be invested in helping people 'stick' to things."

Figure 4. Respondent quotes regarding nutritional education.

Regulation of marketing:

Reducing advertising of HFSSFDPs is suggested to be one of the most cost-effective interventions for governments. The UK statutory ban on television advertising of HFSSFDPs was a world first. However family entertainment shows considered as 'adult programming', fall outside current regulations, therefore children remain exposed to HFSSFDP advertisements.

The impact of a pre-watershed ban was perceived to be more beneficial to the general population than to 'self' (Figure 5).

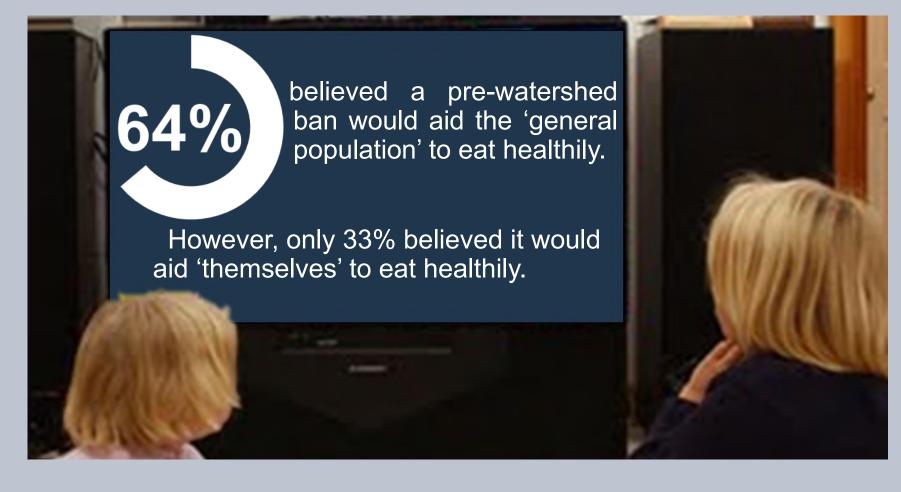


Figure 5. Perceived impact of a pre-watershed ban on HFSSFDP advertising up on healthy eating (*n*=104).

Access to healthier food:

People in deprived areas of Wales reportedly consume an unbalanced diet.^{5, 17} Easier access (with regards to location and finance) to 'healthier' food products compared to the availability of 'unhealthy' foods was discussed by many along with free fruit and vegetables (Figure 6).

"Pop up stands/shows of free fresh fruit and veg in public places/events."

"Healthy food should be cheaper than fat, convenience foods."

"Give me money to buy healthier food."

"Greater access to healthy options. Cheaper prices for healthy food."

Figure 6. Respondent quotes regarding reformulation of food products.

Provision of information:

The majority (75%) reported they notice front-of-pack 'traffic light' nutritional information (Figure 6) when shopping for food. Over a third (36%) thought that including 'traffic lights' on menus would enable healthier choices when eating out.

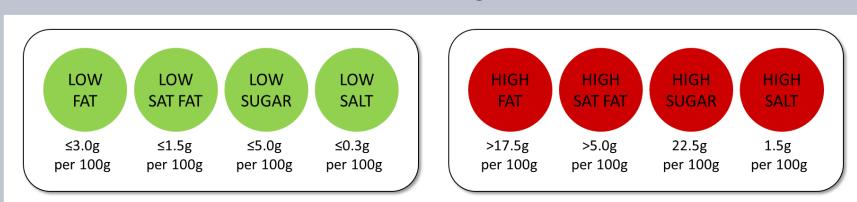


Figure 7. Front-of-pack 'traffic light' nutritional information.

Legislative bills in California¹⁸ and New York State¹⁹ require health warning labels on sugar-sweetened drinks, such labels may improve awareness and reduce purchase.^{20, 21}

Although 52% believed a 'health warning label' (Figure 8C), as utilised on tobacco products to illicit fear would have impact, whereas 77% believed an 'informative label' illustrating sugar content and better alternatives (Figure 8B) would impact upon purchase behaviour.

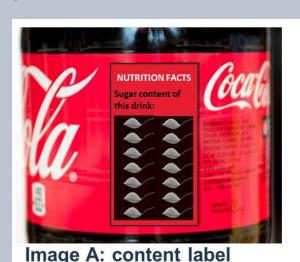






Figure 8. Labels believed to impact upon purchase of sugar-sweetened drinks.

Image B: informative label

Conclusion

- Although positive attitudes were expressed towards interventions, consumers in Wales believed interventions would be more beneficial to 'the general public' than themselves, indicating interventions may be overlooked, suggesting a barrier for health promotion attempts.
- Future interventions need to address personal perceptions of risk, control and responsibility for nutrition and understand factors that influence behaviour. Findings confirm the complexity of efforts to improve food-related health behaviours.
- It must also be considered that as the majority of food consumed in Wales is not produced in Wales, future policies directed at Welsh manufacturing/hospitality to improve nutritional content of foods will have limited impact. Interventions that influence Welsh consumer's point-of-purchase/consumption decisions will have greatest impact.











