
Are We Listening to Consumers on Diet and Health?

SUSAN BORRA

*American Dietetic Association
Chicago, IL*

*International Food Information Council
Washington, DC*

I wish to include the consumer in our discussions: what are consumers' attitudes on nutrition, food and health, and what messages are they hearing on these subjects? Also, what are the implications for communicating information to the consumer in the future?

POPULAR VIEWS ON FOOD

We went onto the streets of Chicago last summer and asked a variety of questions and videotaped responses. We asked consumers to tell us what they think of food, what are their favorite foods, what do they like about food? As they talked about foods they love they smiled and their eyes lit up.

- I like vanilla ice cream.
- Donuts. Yeah, I work in a courthouse and we love donuts.
- I love bread.
- I like oatmeal.
- I love pizza—I'm from New York. Pizza. Pizza. Pizza.
- I like spaghetti.
- Cream sauces and gravies.
- Shrimp. Shrimp. Shrimp. Shrimp.
- Desserts. Cake is good but cookies are even better.
- Etc.

Then we asked them to tell us what they think about nutrition.

- Oh, when I hear the word nutrition I think of flat, boring, no taste.
- Nutrition? No, nutrition usually gets in the way of good food.

FOOD AS A SOURCE OF CONCERN

As a dietitian working in communications at the International Food Information Council (IFIC), I am involved in consumer research. We talk with consumers in formal focus groups, in one-on-one interviews, and in national research surveys. In 1998, talking with female food gatekeepers about fat in the diet, we learned that messages about controlling fat intake induce guilt, anger, worry, helplessness, and fearfulness—an array of strongly negative emotions associated with food.

In a survey published in May 2002 by the Food Marketing Institute (FMI), consumers were asked if they are concerned about the foods they eat. Fifty percent said that they were “very concerned,” 40% said “somewhat concerned,” and only 10% said “not at all concerned.” This question has been asked almost every year since 1983; the “very concerned” rating peaked at 64% in the early 90s and has declined over the past decade. Clearly, people are changing in how they think about dealing with nutrition. We don’t know whether this decline in concern means, “I’m not concerned because I think I’m eating more healthfully” or is because “I’m just tuning this stuff out due to information overload.” The FMI Trends Survey also tell us that 70% of consumers need help with their diet. Only about a third claimed that their diets are already healthy.

Consumers tell us that to eat healthfully, they must forego desserts, snacks and their other favorite foods—“If it tastes good it must be bad for me.” In a consumer survey by the American Dietetic Association (ADA) 2 years ago, 44% said that they really don’t try to eat a healthy diet because they are afraid they would have to give up their favorite foods. A third of those surveyed said that they are confused over conflicting information, and almost 40% said that it just takes too much time to be bothered with it all.

However they did feel that this is important: 80% of consumers told us that diet, nutrition and health are important to them, which may be something to build upon. When asked if they are doing everything they can to achieve a healthful diet, only about a third replied in the positive. Similarly for physical activity—they feel that is important, but need help to achieve their goals.

In ADA’s trend survey for 2002, we gauged attitudes towards food and nutrition. About a third said, “I’m already doing everything I can. I think I’m doing great.” This represented an increase of 10% over 2 years before. About 30% said, “I know I should be doing this but...” with a whole string of excuses behind the “but”: it takes too much time, it costs too much money, it doesn’t taste good, *etc.* As nutrition professionals, we must confront those barriers to achieving a healthy diet. About a third of respondent said, “Don’t bug me about this. I don’t want to hear it. I don’t want to see it. I don’t want to get near it.” As a dietetic professional, I usually say, “Let them do their thing. I’m not sure that I can change them. We might be able to change the environment around them.”

NUTRITION COMMUNICATIONS AND GENETICALLY MODIFIED FOOD

How do we get consumers to say, “Maybe some day I can do better”? This is part of the goal of understanding nutrition communications. In the ADA survey, we asked aided questions: “Have you heard something or a lot about” a variety of subjects. For example, 87% knew that obesity is a problem and a national health issue. Eighty-one percent had heard of dietary supplements. Food radiation was known to smaller numbers and 40% said they had heard something about genetically modified foods. Of those who had heard “something,” 65% were concerned about overweight and obesity, 45% about food radiation, 40% about dietary supplements, and under 40% about genetically modified foods.

In research at IFIC, we asked consumers if they believe that biotechnology will provide benefits for them and their families within the next 5 years, and, for the most part, people do believe that biotechnology will bring benefits. When targeting specifically what those benefits might be, about a third said that biotech will help them in health and nutrition. Improved quality, taste or variety was also considered a likely benefit. Reduced use of chemicals and pesticides was perceived as a benefit as was improved safety.

We gauged the likelihood of their purchasing a genetically modified product if it tasted better or fresher. A little more than half were “likely,” but some were “not likely.” It depends on the value system: taste may do it for some people, and health may do it for other people. The information-knowledge base is important. We have seen data that show that education level affects how consumers understand information that is presented to them. Ability to trust who is giving the information and what is the source of the information is part of it. Overall perception of the safety of the food supply certainly impacts it.

Having conversations with consumers is fundamentally important. We have conducted numerous focus-group studies looking at consumer reactions to terms like “genetically modified organisms.” Consumers react negatively to such scary words, whereas “food biotechnology” is more acceptable in the context of conversation, and they then tend to relate to those products differently.

FUNCTIONAL FOODS

Further aided questions in the ADA survey indicated almost 100% of people believe that certain foods can reduce the risk of disease or have other health benefits. Of those surveyed, 77% had heard about low-fat and over half said they had taken steps to increase their intake of low-fat foods. About half said that they had heard of the positive health effects of red wine, antioxidants, berries, and soy. It is interesting that fewer were drinking red wine than, say, including more berries in their diet. Awareness of folic acid, green tea and energy drinks were in the 40% range, then omega-3 was in 30s. Lycopene hadn’t made it onto the radar screen.

There is need for a definition of functional foods that makes sense to consumers. According to IFIC, they are foods that provide a health benefit beyond basic nutrition. In 1998, 53% of consumers said that they were eating at least one functional food, and in the year 2000 it was about 63%. Although consumers say they are overloaded with information, they also say that they want more and are interested in learning the health benefits of functional foods. We must find better ways to frame that communication. As a dietician I see this as an opportunity to talk more broadly about what are the good things about food. People are tired of hearing what is bad about foods, what is going to harm them. They really want to hear the good stories that are out there.

INFORMATION SOURCES

Finally, where are people getting their information? The ADA trend survey showed that they get most of their information on food, nutrition and health from the mass media: mainly from television, less so from magazines, and less so from newspapers. Other studies suggest that physicians and medical people are also getting their information from these sources.

What do consumers perceive as good sources of such information? Some 90% of consumers expressed awareness of registered dietitians and 86% felt that RDs would be credible sources on obesity for example, which certainly makes sense. Over 50% felt that dietitians would be credible sources of information on dietary supplements, food radiation, and food biotechnology. Clearly, this represents a great opportunity—the more dietetic professionals involved in communicating through the mass media, the better will be the information received by consumers.

The ADA Website, www.eatright.org, is an excellent resource for information on biotech and functional foods, as is IFIC's, ific.org.