

# Lay Perceptions of Healthy Eating Styles and Their Health Impacts

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## ABSTRACT

**Objective:** This study examined perceptions of healthy eating styles among US respondents to determine whether eating styles are defined as a distinct set of people's healthy eating beliefs and how different aspects of eating styles are perceived to affect health.

**Design:** In-person pile sort activities were used to identify key dimensions of healthy eating beliefs, and online surveys were used to confirm these dimensions and examine perceived health benefits of healthy eating styles.

**Participants:** The pile-sorting activity recruited 48 US participants in the Phoenix metropolitan area via social media and snowball sampling. Online surveys recruited US participants via Amazon Mechanical Turk (survey 1, n = 70; survey 2, n = 283).

**Analysis:** The researchers used an exploratory visualizing technique (multidimensional scaling) to analyze pile sort data; Property Filling (PROFIT) analysis was used to analyze online survey 1; paired sample *t* test and repeated-measures ANOVA were used to analyze online survey 2.

**Results:** Eating styles are a distinct set of beliefs within lay models of healthful diets ( $P < .001$ ) viewed as important for a number of health outcomes, including weight management.

**Conclusions and Implications:** In addition to educating the public about choosing healthy food characteristics, health and nutrition professionals may need to address people's beliefs regarding healthy eating styles to identify gaps and misconceptions. Future research is needed to examine the relationships between such beliefs and corresponding behaviors, as well as whether these behaviors result in any health benefits.

**Key Words:** eating styles, healthy eating perception, lay beliefs, mindful eating, food characteristics, chronic disease prevention (*J Nutr Educ Behav.* 2018;■■:■■–■■.)

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## INTRODUCTION

Perceived healthiness is a key factor shaping eating preferences.<sup>1,2</sup> People's views can differ in their interpretations of what a healthful diet is<sup>3</sup> and numerous studies have examined people's theories of what counts as healthy eating.<sup>4,5</sup> Such lay theories are so sufficiently important for policy that the US Food and Drug Administration requested public comments on

definitions of healthiness in food labels to develop guidelines reflecting both current science and public concerns on the topic.<sup>6</sup>

Most work on understanding lay perceptions of dietary healthiness provides detailed information on what people think is good to eat rather than how one should eat it.<sup>5</sup> Yet eating is a patterned activity embedded in context, resulting in various ways of eating.<sup>7</sup> The current study refers to

these 2 domains of beliefs as food characteristics (what to eat) and eating styles (how to eat it). The few studies that examined public views of eating styles suggested that such beliefs are an important part of people's mental models of healthy eating.<sup>8</sup> For example, Bisogni and colleagues<sup>4</sup> reviewed a number of qualitative studies in North America, Europe, and Australia and noted several such beliefs, including the importance of regular meals, having balance, and practicing moderation in one's diet. In addition, pacing of eating (eg, eat slowly), proper food intake patterns (eg, always having breakfast), and social and emotional considerations (eg not eating to alleviate negative emotion) are important eating norms for Americans.<sup>9</sup> Although people conceptualize healthy eating in terms of both eating styles and food characteristics, it is not known whether people classify these as different kinds of beliefs within their models of health-

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ful diets. In addition, for eating styles, it is not known in which ways they are perceived to affect health. Some work suggests that certain eating styles (eg, eating late at night) are popularly believed to cause weight gain, but such discussions were based on examining health-focused websites.<sup>10</sup> The current study thus addressed (1) whether beliefs about eating styles are viewed as a distinct set of healthy eating beliefs, and (2) how different aspects of eating styles are perceived to affect health.

## METHODS

### Overall Study Design

To address these research questions, the study involved 3 rounds of data collection: an in-person pile sort activity ( $n = 48$ ) and 2 online surveys (survey 1,  $n = 70$ ; and survey 2,  $n = 283$ ). For the pile sort activity, 48 participants were recruited to identify dimensions of healthy eating beliefs. Online survey 1 was used to validate these dimensions with a simple online questionnaire. Online survey 2 examined how individuals perceive the health importance of different aspects of eating styles.

### Recruitment

*Pile sort activity.* Recruitment was completed in the Phoenix metropolitan area via social media and snowball

sampling through undergraduate research assistants at Arizona State University (ASU) assigned to the project ( $n = 7$ ). Short study descriptions were posted on Facebook, Twitter, and Instagram with the primary investigator's contact information. In addition, assistants recruited classmates at ASU from a variety of departments: anthropology, geography, law, and business administration. Finally, assistants asked participants to share study information with a friend or family member who was not a current student at ASU. Exclusion criteria were not having been born in the US, not being a US citizen, and being aged  $\leq 18$  years. Each participant was presented with the study information letter. Reading the letter and agreeing to the pile sort activity constituted informed consent. At the end of the activity, participants filled out a short demographic survey collecting information on age, gender, education level, student status, and employment. Each participant received a \$5 gift card for participation.

*Online surveys.* Online survey participants were recruited via Amazon's Mechanical Turk website (<https://www.mturk.com>; MTurk, Seattle, WA),<sup>11</sup> a crowdsourcing system in which surveys and tasks are given to anonymous participants or workers for a completion fee (\$0.35 for survey 1 and \$0.45 for survey 2). MTurk respondents have been shown to

be more diverse than typical US college-based samples, and MTurk data have been shown to have scale reliabilities comparable to data collected with traditional recruitment methods.<sup>11</sup> Study instructions informed participants that completing the survey constituted consent to participate. Online surveys also collected demographic information as well as education level. The online surveys included an attention test (a multiple choice question that, in its description, instructs participants to skip it if they are paying attention). If participants failed to pass it (by answering the question anyway), their surveys were excluded from analysis. Finally, any surveys completed in  $<3$  minutes were excluded from analysis, because such completion time was deemed unrealistically short. Table 1 presents sample characteristics for both the pile sort activity and online surveys.

### Instrument Development

*Pile sort activity.* The in-person pile sorting activity used 42 statements about eating (printed on cards) derived from past interviews on healthy eating interpretations<sup>12</sup> and other studies<sup>9,13</sup> with the goal of reflecting variation in beliefs. These statements mentioned different aspects of food characteristics (eg, it is important to eat foods low in fat; it is important to eat foods that are whole and not processed) as well as eating styles (eg, it is important to avoid eating late in the day; it is important not to be distracted when eating). Respondents were instructed to group the cards in as many mutually exclusive piles as they wished so that statements that were similar to each other were in the same pile and those less similar were in different piles.<sup>14</sup> These similarities and differences were later mapped in a 2-dimensional space (using multidimensional scaling [MDS]) to examine the average judged similarity between different healthy eating beliefs. The sample size ( $n = 48$ ) was well above  $n = 15$ , which is considered the minimum number for this method of qualitative research.<sup>15</sup>

*Online survey 1.* To assess the meaning of MDS-derived dimensions, online survey participants ( $n = 70$ ) were

**Table 1.** Sample Demographics From 3 Stages of Data Collection

Variable	Pile Sort Activity	Online Survey 1	Online Survey 2
n	48	70	283
Age, y (mean [SD])	29.3 (14)	34.7 (11.8)	35.8 (11.5)
Females	52%	55%	55%
Body mass index, kg/m <sup>2</sup> (mean [SD])	24.6 (5.3)	26 (10.7)	26.7 (7.3)
College degree or higher	50%	58%	58%
Try to lose weight	29%	49%	50%

Note: Data collection tested (1) whether eating styles were viewed as a distinct set of healthy eating beliefs, and (2) how different aspects of eating styles were perceived to affect health.

Participants for the pile sorting activities were recruited in Phoenix, AZ. Participants for online surveys 1 and 2 were recruited via Amazon Mechanical Turk.

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