Informed Dining in Health Care Evaluation

Executive Summary
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Introduction

Informed Dining program overview

The Informed Dining (ID) program, launched in 2012 by the Province of British Columbia, is a nutrition information program for food service establishments (FSEs). The goal of the program is to provide British Columbians with nutrition information for all standard menu items before or at the point of ordering to help them make informed choices when eating out. There is voluntary participation among FSEs in the private sector – with over 1,900 participating outlets as of March 2018. However, the program is mandated in retail FSEs operating in BC health authority owned or operated health care facilities. Currently there are 77 outlets participating in Informed Dining in Health Care.

Compared to Informed Dining in the private sector, Informed Dining in Health Care has enhanced program requirements in terms of the Informed Dining signage displayed and the visibility/accessibility of the nutrition information provided. This evaluation assessed the impact of Informed Dining with these enhanced program requirements one year after its full implementation in health care retail food service outlets.

Methodology and data collection

This evaluation was conducted by Insights West to measure the impact of the Informed Dining program on health care food retail customers. It was conducted with a total of 3,949 respondents in November 2017. The evaluation used different methodologies and slightly different survey versions for each of the three sample groups detailed below. The surveys were built based on questionnaires used in the evaluation of Informed Dining in the private sector in 2015 and used similar questions wherever possible to facilitate comparability of the results from the evaluation in health care to those of the evaluation in the private sector.

To ensure a sample that was representative of British Columbians across the province, the hospital cafeteria customer and general population samples included proportionate regional quotas by health authority. The general population sample was further weighted by age and sex to match the provincial statistics as per Statistics Canada.

<table>
<thead>
<tr>
<th>Sample group</th>
<th>Methodology</th>
<th>Sample size (n)</th>
<th>Margin of error (19 times out of 20)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital cafeteria customers</td>
<td>In-person intercept interviews</td>
<td>753</td>
<td>±3.57%</td>
</tr>
<tr>
<td>Health care staff</td>
<td>Online survey</td>
<td>2,366</td>
<td>±2.01%</td>
</tr>
<tr>
<td>General population</td>
<td>Online survey</td>
<td>810</td>
<td>±3.44%</td>
</tr>
</tbody>
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Key findings

The following section highlights key findings from the Informed Dining in Health Care evaluation:

1. Program awareness
2. Program access, use and impact
3. Understanding of nutrition information
4. General interest in nutrition information
5. Impact of age on Informed Dining awareness, use and understanding

Key finding 1: Program awareness

Awareness of the Informed Dining program was measured using two different methods, with some variation in results across the three different sample groups. Survey participants were first shown the Informed Dining logo and asked if they had seen the logo before.

Health care staff were the most likely to recall the logo, followed by hospital cafeteria customers. Logo recall for the three groups was as follows:

- **Health care staff**: half (50%) recalled seeing the logo before;
- **Hospital cafeteria customers**: two-in-five (38%) recalled the logo; and
- **General population**: one-in-four (26%) recalled the logo.

Survey respondents were then shown the logo again, along with the following description of the Informed Dining program, and asked if they were aware of the program.

This is the logo for the “Informed Dining” program. The Informed Dining program is a nutrition information program for restaurants developed by the Province of British Columbia. Participating food service establishments provide their customers with nutrition information before or at the point of ordering, for all standard menu items.
After reading the Informed Dining description, recognition of the program remained relatively stable among health care staff and hospital cafeteria customers, but increased among the general population. Health care staff remained the most likely to be aware of the program, followed by hospital cafeteria customers. Awareness of the program among the three groups was as follows:

- **Health care staff**: just over half (53%) recognized the program after reading a description (+3 points compared to the logo alone);

- **Hospital cafeteria customers**: two-in-five (42%) recognized the program after reading a description (+4 points compared to the logo alone); and

- **General population**: over one-third (36%) recognized the program after reading a description (+10 points compared to the logo alone).

British Columbians who had eaten in a hospital in the past year were significantly more likely to recognize the Informed Dining program after reading the description (43%) compared to those who hadn’t eaten in a hospital in the past year (30%).

### Key finding 2: Program access, use and impact

British Columbians in the general population and health care staff who were aware of the Informed Dining program were equally likely to have used the program. Among those who had heard of the Informed Dining program before, over one-third of both health care staff (37%) and the general population (36%) reported having used the program.

Among hospital cafeteria customers, one-quarter (24%) noticed the Informed Dining nutrition information before ordering on the day of their interview. Among those who noticed the nutrition information:

- Nine-in-ten (90%) found the information easy to find or access;

- Just under half (46%) looked at the nutrition information before ordering;

- Two-in-five (38%) used the information to make a decision about what they ordered, most commonly to make a menu selection or compare the calories of a menu item to the daily calorie requirement; and

- Four-in-five (83%) hospital cafeteria customers who used the nutrition information available to make their purchase decision reported that it influenced what they ordered on the day of the interview. This included over one-third (35%) who said the nutrition information had a “strong influence”.a

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a Small sample size
Key finding 3: Understanding of nutrition information

After viewing an example of how the Informed Dining nutrition information is displayed, more than four-in-five respondents from both health care staff (93%) and the general population (85%) considered the nutrition information easy to understand. Among the small group who did not find the nutrition information easy to understand (7% of health care staff and 15% of general population), the most common reason was that there was too much information, or it was too confusing.

The evaluation also found that there is an opportunity among British Columbians to increase knowledge of the daily calorie and sodium requirements for healthy adults. Although the majority of health care staff (70%) and the general population (55%) noticed specific information about total daily calorie and sodium requirements in the Informed Dining nutrition information they were shown, less than half of either group were able to identify the correct amount of daily calories (36% of health care staff and 42% of the general population) and sodium (18% of health care staff and 14% of the general population) a healthy adult should consume per day.

Key finding 4: General interest in nutrition information

Nine-in-ten (86%) British Columbians reported looking at nutrition information at least some of the time while eating out, including just under half (45%) who do so at least half of the time. A similar proportion of health care staff (93%) reported looking at nutrition information, including six-in-ten (60%) who were doing so at least half of the time.

After learning more about the Informed Dining program, six-in-ten (61% of health care staff and 59% of the general population) said they would be likely to check the Informed Dining nutrition information the next time they visit a participating outlet. Within this group, close to one quarter (28% health care staff and 23% of the general population) said they “definitively would” check.

Among the one-in-ten (11% of health care staff and 12% of the general population) who said they would be unlikely to use the program in the future, reasons for not using this information were more commonly related to their attitudes about eating out, such as considering eating out a treat or prioritising taste, as opposed to issues with the content or display of the nutrition information in the Informed Dining program.
Key finding 5: Impact of age on Informed Dining awareness, use and understanding

British Columbians under 55 years of age were more likely to recognize the Informed Dining logo compared to those 55 years and older. They were also more likely to pay attention to nutrition information and to consider it easy to understand.

Among all three sample groups, those under 55 years were significantly more likely than those 55 years and older to recall having seen the Informed Dining logo:

- **Hospital cafeteria customers**: 56% of those under 55 years recalled seeing the logo, compared to 36% aged 55 years and older;
- **Health care staff**: 53% of those under 55 years recalled seeing the logo, compared to 36% aged 55 years and older; and
- **General population**: 37% of those under 55 years recalled seeing the logo, compared to 9% aged 55 years and older.

Among hospital cafeteria customers, those under 55 years were also significantly more likely than those 55 years and older to have noticed the Informed Dining nutrition information before ordering (28% under 55 years, vs. 15% aged 55 years and older).

Among the general population, those under 55 years were significantly more likely to report that they checked nutrition information when eating out compared to those aged 55 years and older (90% under 55 years, vs. 80% aged 55 years and older).

Those under 55 years were also significantly more likely to consider the Informed Dining program easy to understand (89% under 55 years, vs. 79% aged 55 years and older).
Summary of key findings

1. Awareness of Informed Dining was higher among health care staff and hospital cafeteria customers compared to the general population.

2. British Columbians under 55 were more likely to recognize the Informed Dining logo and pay attention to nutrition information compared to those aged 55 years and older.

3. Over one-third of British Columbians who have heard of the Informed Dining program have used it before.

4. One-quarter of hospital cafeteria customers noticed the nutrition information before they ordered.

5. Nine-in-ten hospital cafeteria customers who noticed the Informed Dining nutrition information found it easy to find or access.

6. Nine-in-ten British Columbians considered the Informed Dining nutrition information and its display easy to understand.

7. Among hospital cafeteria customers who looked at the nutrition information, four-in-five reported that it had an influence on their purchase decision.

8. Six-in-ten British Columbians showed interest in using the Informed Dining nutrition information.

9. Nine-in-ten British Columbians looked at available nutrition information at least some of the time when eating out.

10. Six-in-ten British Columbians did not know the correct amount of calories and sodium a healthy adult should consume per day.