



# *The psychology of food choice: Intention to action*



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# The global context

- World Health Organization (WHO)
  - Society gripped by obesity epidemic (WHO, 2007)
  - CHD via obesity will be THE of major cause of death and disability worldwide by 2020 (WHO, 1996)
- European Food Council (EFC)
  - Relationship between food choice health key public concern (EFC, 2004)
  - Poor food choice linked to disease states (CHD, neoplasms etc.)



# Policy, strategy & progress (?)

- UK Department of Health

- “Health of the nation”, 8 areas of food choice (DoH, 1997)
- 5-a-day fruit and vegetables (DoH, 2003 re-launch)
- Dietary salt (DoH, 2007)
- Energy derived from fat (DoH, 2004)
- Eating range of dairy (Food Standards Agency-FSA-2006)

- UK based information

- Augmented anti-obesity campaign (DoH, 2008) £372M
- Change4life “*eat well, move more, live longer*” (DoH, 2009)
- Food labelling work with food sector (FSA, 2007)
- “*Sales of ‘super foods’ soaring...*” (Telegraph, 2007)
- High profile media e.g. Jamie Oliver (2007; 2008)



# The state of play

- Sobering reality

- 17 yrs since The **Health of The Nation** report (DoH, 1992)
- High rates of **mortality/morbidity** re: poor health choices remain
- People are **not changing** their behaviours



# Why aren't things getting better?

- “Up-stream” information giving campaigns
  - The presentation of information on healthy food choice
    - Traffic lights; Change4life; web based information (inc retailers)
  - Overtime it is the case that these *may* work
    - Lots of evidence from Health Psychology that they might not
    - E.g. anti-smoking information on packets
- Does anyone engage with the information?
  - Cf. Smoking campaigns: does anyone think smoking won't kill?
  - How many people deliberately set out to be unhealthy?
  - **Something is going wrong...**



# We are creatures of habit

- Everyone has their habits
  - *“You can live to be a hundred if you give up all the things that make you want to live to be a hundred”* (Woody Allen)
- Limited control over choices
  - *“Most of a person's everyday life is determined... by features of the environment ...that operate outside of conscious awareness” ... “The unbearable automaticity of being”* (Bargh & Chartrand, 1999)



# How people are hamstrung re: food choices

- Firstly, through these habitual “choices”
  - Best predictor of future behaviour is past behaviour
  - Poor food decisions yesterday = poor decisions today
  - No one can change what happened yesterday...
- Secondly, via our physiology
  - Appetite well adapted to feel full from low energy dense foods before overconsumption occurs
  - Appetite poorly adapted for environment rich in energy dense foods (Blundell et al., 1987)



# Timing is everything...

## *Commercial and social enterprise*

- Moment of synergy?

- Government(s) agenda / growing public and media awareness
- Food industry promoting “health”
- Volume of “pure” research outputs from psychology
- Knowledge Transfer **Food Innovations Project SHU**

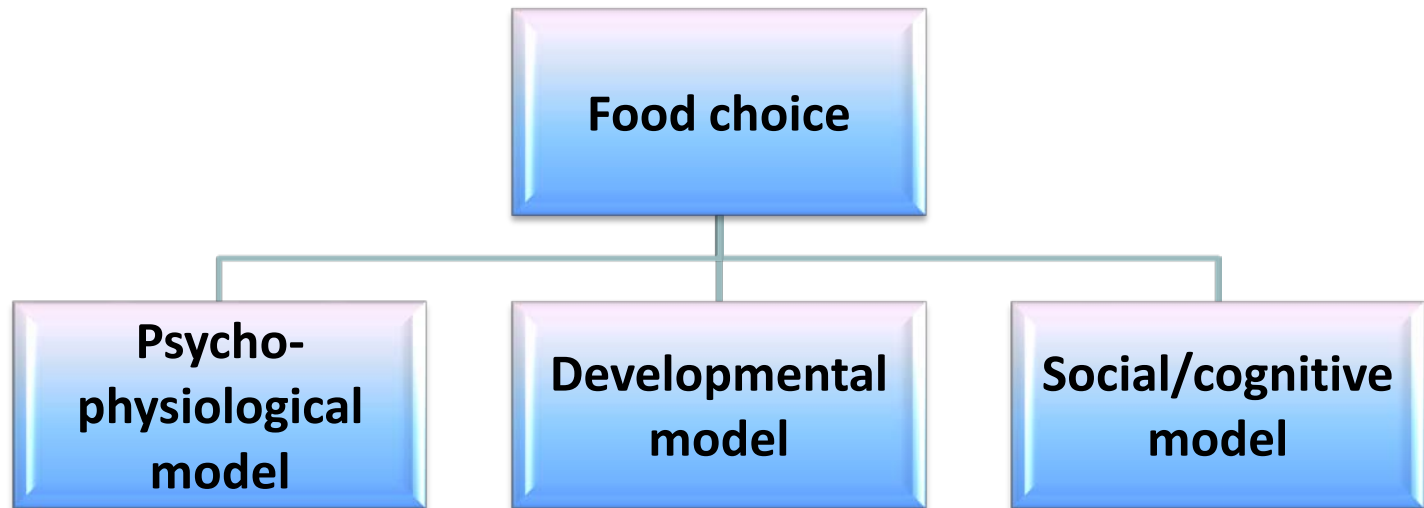
- Sheffield Hallam University’s offer

- To seek to provide products and services to facilitate healthy food choices for clients via the application of collaborative knowledge, developed with commercial partners. **How?**
- **1.** Psychology/CFI track record of working with food sector
- **2.** Expertise in science of behaviour change **3.** Expertise in science of hunger and satiety



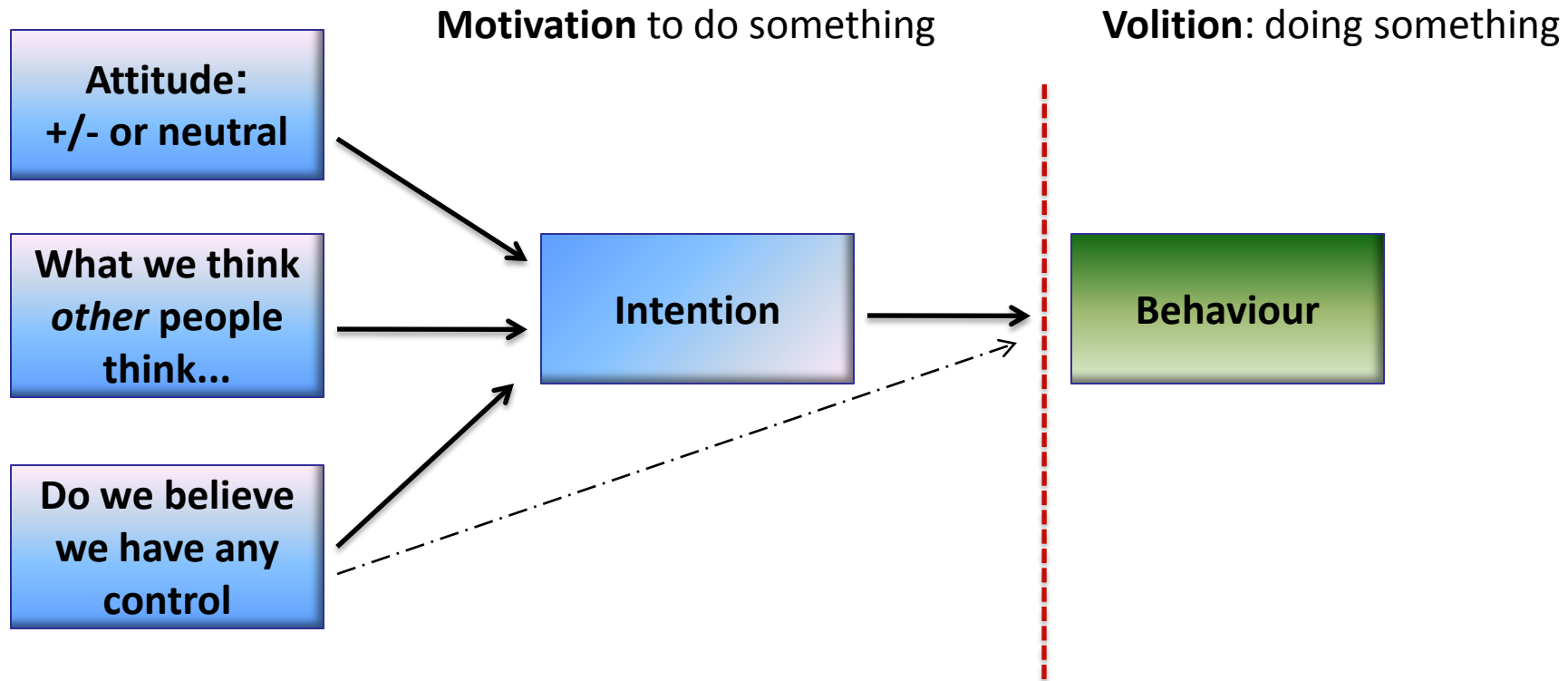
# Understanding food choice

*First step towards altering client behaviour*



# Can behaviour be predicted?

(From: *Theory of Planned Behaviour*, e.g. Ajzen, 1988)



# Motivation ≠ action

Good news:  
*Motivation*

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Bad news:  
*Action*



# Moving from intention to action

- **Goal intention**  
(motivation)

- *What* you will do
- New Year's resolutions...
- *Vague and passive*

vs.

- **Implementation intentions** (volition/ACTION)

- *When, where* and *how* you will do it
- Creating the *illusion* of habit
- Capture of behaviour by cues in environment
- Requires “cognitive” effort before you get to the store

- *Specific and active*



# Some research examples

- Applications of implementation intentions (imps)
  - Different to usual “downstream” interventions aimed at individuals, because requires deliberate planning (Verplanken & Wood, 2006)
  - Significant reduction in dietary fat via imps + 1 month (Armitage, 2004), for motivated and non motivated
  - Evidence that imps comparable to small financial incentive to break habit of not buying organic food (Bamberg, 2002)



# How can we achieve this?

## *Beyond information giving*

“At its simplest, knowledge transfer is about starting a conversation” (ESRC, 2009).

For further information, or to start a conversation about how we may add value to your business, please contact:

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