

Changing minds about changing behaviour: Obesity in focus



When it comes to reducing obesity, evidence shows that changing food environments is more effective than measures that try to educate or change the behaviour of individuals.

Public opinion is critically important to the government and the food industry, and so public acceptability is likely to affect the delivery and uptake of potential interventions designed to reduce the prevalence of obesity.

However, Nesta and Behavioural Insights Team (BIT) research shows that the public perceives individual behaviour as making the most difference, so there is greater public support for things like educating people about healthy eating, than there is for measures like reformulation of high fat, salt, or sugar foods or taxation on

highly processed products, which are actually more likely to be effective.

What's crucial, therefore, is to increase public awareness and understanding of which interventions are the most effective, so that these measures garner more public support and are, therefore, more likely to be adopted and implemented by government and the food industry.

Our research explored whether this can be achieved by framing messages differently, and by testing the effect of the government as a messenger.

THE RESEARCH

An online trial to explore public support for obesity interventions

A representative sample of 5,791 adults was shown an introductory paragraph about obesity and then asked to rate 14 obesity interventions according to how much they would support the idea being implemented in the UK, and how effective they thought each of these interventions would be. Importantly, different participants saw different introductory paragraphs allowing us to test different framings and messengers.



KEY FINDING 1

Addressing the disconnect between the evidence base and public understanding may be a viable way of influencing public acceptability

The interventions that participants consider to be most acceptable are the same as those that they perceived to be most effective at tackling obesity. However, the interventions that were reported to be least effective and least acceptable — such as reducing portion sizes and the taxation of unhealthy foods — may actually have the greatest potential for promoting healthy eating at the population level. While we must be cautious with how we interpret correlations like this, it suggests that addressing the disconnect between the evidence base and public understanding may be a viable way of influencing public acceptability.

The misconceptions around the effectiveness of **obesity interventions**

How to read this chart:

Box color represents the actual effectiveness of the interventions



How effective the interventions are
(by intervention type)*



How effective they are perceived to be
(by intervention)



Perceived as very effective

Average perceived effectiveness

(How effective they think each intervention is at tackling obesity)

Perceived as not very effective

*These categories and associated rankings are based upon the Nuffield Intervention Ladder. Source: Nuffield Council on Bioethics. Public health ethical issues. London, Nuffield Council on Bioethics, 2007.

KEY FINDING 2

Encouragingly, all interventions we asked about were supported by a majority of participants

All interventions included in the survey were supported by a majority of participants; however, in general, interventions that involved 'providing information' and 'enabling individuals to make better decisions' (e.g. through education or better nutritional information on food) were seen to be more acceptable than those that change, disincentivise or restrict food choices (e.g. changing the position of unhealthy foods in shops, taxation and portion size reduction, respectively). This can be explained as stemming from the widely held, but false, belief that obesity is largely due to a lack of willpower by individuals — 82% of participants said that they agreed that 'maintaining a healthy weight is a person's own, individual responsibility'.

82% of participants said that they agreed that: **'Maintaining a healthy weight is a person's own, individual responsibility.'**

This view is reflected in the misconceptions of **obesity interventions**

How to read this chart:

Box color represents the actual effectiveness of the interventions



How effective the interventions are
(by intervention type)*



Interventions that assist individual action

How acceptable they are thought to be
(by intervention)



Most supported

Average acceptability

(How much people would support these ideas to be used to tackle obesity)

Least supported

KEY FINDING 3

Interventions receive less public support if they are communicated by the government

Using a government messenger to communicate obesity interventions significantly decreased acceptability for interventions. Using a government messenger also significantly decreased the perceived effectiveness of obesity interventions.

This suggests that using a government messenger should be avoided when proposing or otherwise communicating about obesity interventions to the public. However, it raises additional questions about who or which types of organisations (e.g. food industry, civil society, the NHS and other healthcare providers) might be better placed to communicate this information.

Nesta will continue to explore how different framings about obesity can help drive policies that aim to address it, but also look to the media, advertising and other societal influences to adjust the narrative.

You can learn more about the experiment methodology and findings in the [full report](#).

Overall, perceived effectiveness ratings were significantly lower when ideas were communicated using a government messenger

● Neutral message
● Government message

