

## **Focus Group Research Executive Summary**

In the fall of 2001, an Advisory Committee of experts, led by the National Institute of Nutrition (NIN) and Health Canada's Canadian Diabetes Strategy, sponsored a series of focus groups to explore ways of promoting active living, healthy eating and healthy body weight among those who are at a higher-than-average risk of developing diabetes. People in this target group include adults aged 35 to 55, who are overweight and engage in minimal physical activity.

The focus groups addressed such issues as participants' perceptions of major barriers to achieving a healthy lifestyle and the type of supports or information required. The results will be used to help develop strategies, programs and/or materials that encourage members of this group to engage in physical activity, adopt healthy eating habits, and achieve and maintain a healthy weight.

The work involved 12 focus groups held in six urban centres across Canada during October and November, 2001. Groups were made up of adults, aged 35-55, with a Body Mass Index (BMI) of between 25 and 29, who engaged in minimal physical activity and had less than a completed university or college education. Separate groups were conducted for women and men. At the beginning of each group, participants filled out a brief written questionnaire providing overview demographic information and information about their habits with respect to physical activity, healthy eating and healthy body weight.

### **Key Findings**

Major findings from the focus groups are described briefly below. The findings are organized according to four main headings, corresponding loosely to the key elements of the interview format.

#### ***Physical Activity***

- ▶ Walking was the activity of choice for many people – because it is enjoyable, inexpensive, can be done any time, can be social if done with others, and does not require any particular skill or high level of fitness.
- ▶ While most participants regarded their activity level as “good” or “fair,” they did not feel they do an adequate amount of exercise.
- ▶ Lack of time and lack of motivation were the key barriers to people taking part in physical activity. Most people attributed this to their age and stage in life – i.e., the demands of family and work, and the “natural” process of aging, which they equated with increased fatigue, decreased physical fitness level and more sedentary interests.
- ▶ Although both men and women recognize the benefits of physical activity – including improvements in overall health, appearance and mental attitude – many were

unable to sustain a long-term commitment to physical activity. Women, in particular, suggested that taking part in activities with a partner or as part of a group would help them get started and stay committed to physical activity. Other suggestions included increased access (i.e., more flexible times) to programs that are geared to moderate or low skill and fitness levels.

### *Healthy Eating*

- ▶ Self-rated eating habits were fairly wide ranging among the target group — i.e., although the majority rated their eating habits as “good” or “fair,” a significant proportion rated their habits as “very good” or “poor.”
- ▶ As with physical activity, participants primarily attributed poor eating habits to lack of time – most people were working long hours and caring for children, and weren’t able to devote the time required to plan and prepare healthy meals for a range of tastes and timetables.
- ▶ Other barriers to healthy eating included the ready availability and “lure” of fast foods and traditional attitudes that encourage the consumption of large, carbohydrate-rich meals.
- ▶ Participants suggested various supports for healthy eating, including advance planning of meals, proper labeling of foods and making junk food less accessible.

### *Healthy Weights*

- ▶ While the majority of men and women rated their body weight as “fair” or “good,” women were more likely than men to rate their body weight as “poor.”
- ▶ Both men and women felt there is too much emphasis on measures of body weight and that it is necessary to take into account such variables as a person’s age and body type in determining a healthy weight. Qualitative measures such as “feeling comfortable about yourself” were considered more appropriate than strictly quantitative measures such as BMI.
- ▶ Weight gain was regarded as an inevitable consequence of aging and participants were generally resigned to being heavier than they might like to be.

### *Products, Services and Programs*

- ▶ Preferences for information sources and formats varied; some people wanted a comprehensive information resource, while others preferred “snippets” of information from diverse sources.
- ▶ Key sources for information on healthy lifestyles included television, friends and family members, the Internet, and magazines (especially for women).
- ▶ Most people did not relate well to idealized individuals or couples promoting healthy lifestyles. They wanted to see “real” people, struggling with the same kind of issues they do, such as overweight, lack of

motivation, conflicting priorities, etc.

- ▶ People wanted practical, easy-to-use resources that address the challenges of a busy lifestyle. For example, a number of participants endorsed the idea of simple, easy-to-prepare recipes for healthy food.
- ▶ Although participants did not generally rely on formal sources such as health care providers for information about healthy lifestyles, they want to know that the information comes from a source that they can trust.

## **Recommendations**

The research findings suggest a number of general strategies/approaches for promoting healthy eating, physical activity and healthy weights among this target group. These include:

### **Key Messages:**

- ▶ Acknowledge competing priorities and stress the “enabling” potential of healthy lifestyles.
- ▶ Provide practical information about how to build healthy lifestyles into busy lives.
- ▶ Present clear and consistent messages about how to achieve a healthy lifestyle, and do so repeatedly.
- ▶ Stress the importance of “women first” in messages aimed at women.
- ▶ Ensure that lifelong health and fitness are presented as a realistic and achievable goal for everyone, especially members of this target group.
- ▶ Show “real” people in promotional materials aimed at encouraging members of this target group to lead healthy lifestyles.

### **Programs, Formats and Vehicles:**

- ▶ Provide information in a range of “sizes”– from “sound bites” to comprehensive resources.

- ▶ Provide information in a range of formats and mediums, including television, Internet and magazines (especially for women). For example, consider developing a Web site, accessible from the home or workplace, that contains regularly updated information about healthy lifestyles.
- ▶ Gear the “lion’s share” of promotional initiatives to women as they are generally the family “leaders” in matters relating to diet and physical activity.
- ▶ Provide *practical* tools related to healthy eating and healthy body weights, such as a cookbook and menu planner.
- ▶ Develop/provide community services that link people together to take part in physical activities – both formally and informally.
- ▶ Provide a range of physical activity programs geared to lower fitness levels, lower skill levels.
- ▶ Consider replicating key aspects of ParticipACTION, the national program aimed at increasing Canadians’ physical activity.
- ▶ Promote the Physical Activity Guide.

