

## Students Perceptions about Food Offer in University Canteens and Adherence to Mediterranean Diet

# OBJECTIVES

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- To examine students' perceptions of canteen services and its food supply
- To verify students' knowledge and promptness to comply with a Mediterranean Diet (MD) menu.
- To explore how the individual characteristics influence students' perceptions about canteens and knowledge about MD.

# METHODS - Participants

Recruited **3400** participants

Campus Flyers; Institutional Emails; Student Networks; Social Media

**1660** completed the survey

Final sample = **1614** [e.g., systematic responses]

Participants were mostly full-time students (85.1%) holding a bachelor's degree (76.8%); in life sciences (26.8%) or Formal sciences (23.6%)



$n = 500$



$n = 604$



$n = 510$

# METHODS - Instrument

Online survey (Qualtrics) to assess students' perceptions of their university canteens and the Mediterranean Diet (available in 4 languages).

Sociodemographic screening

Health status screening

Dietary practices scale

Perceptions about food services and offers in campus canteens scale

- NET promotion score

- Willingness to pay

Mediterranean Diet index (MEDAS)

Mediterranean Diet Knowledge scale & Information seeking

Open-ended questions :

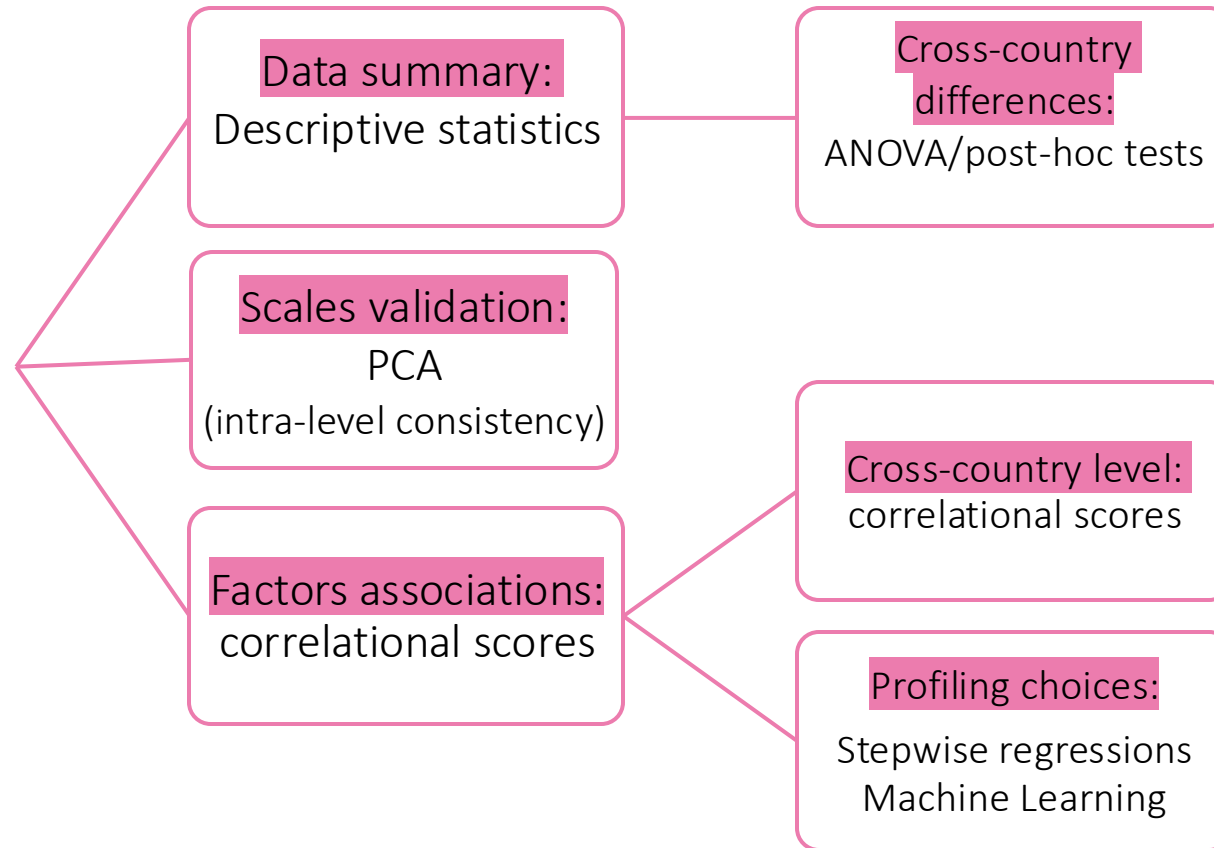
➔ Qualitative assessments of perceptions of enablers & barriers to the use of campus canteens

➔ Qualitative assessments of perceptions regarding MD and its compliance



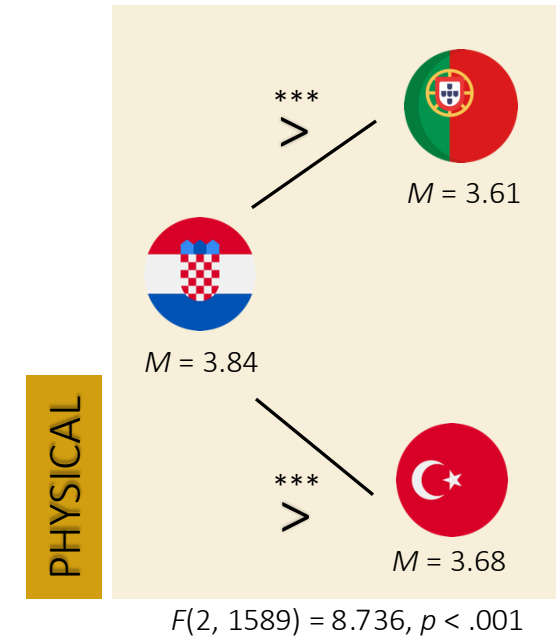
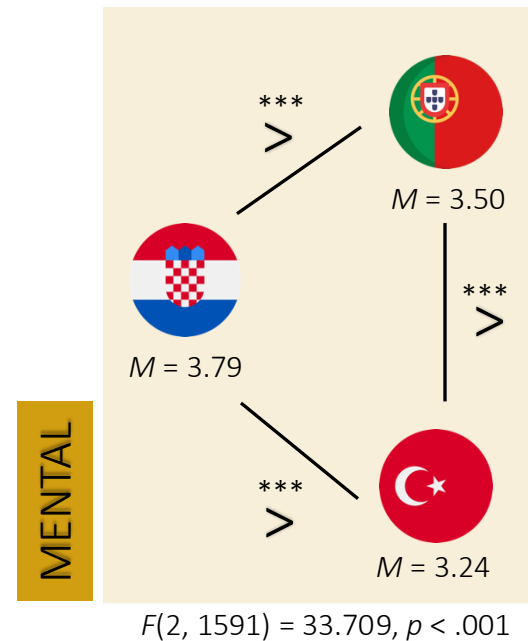
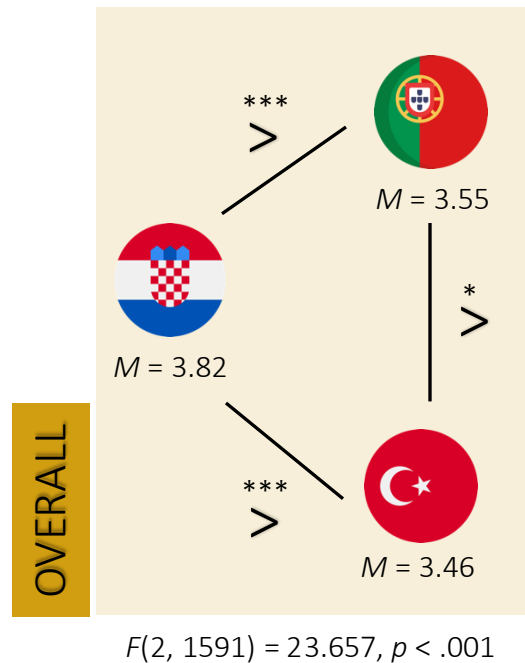
# METHODS – Data Analysis

## DATA EXPLORATION & ANALYSIS



- **Stepwise linear RM:** to uncover the influence and weight of each co-factor in canteen assessment & MD compliance.
- **Fuzzy C-means cluster algorithm:** to define clusters combining food habits on campus, perception of the food offer in canteens, & overall perceived health.
  - **PREDICTIVE BEHAVIOR CATEGORIES:** to compare groups & capture trends in compliance with MD, canteens promotion & WTP for better services.

# RESULTS – Health-Related Characteristics






All countries presented moderate levels of PH status:

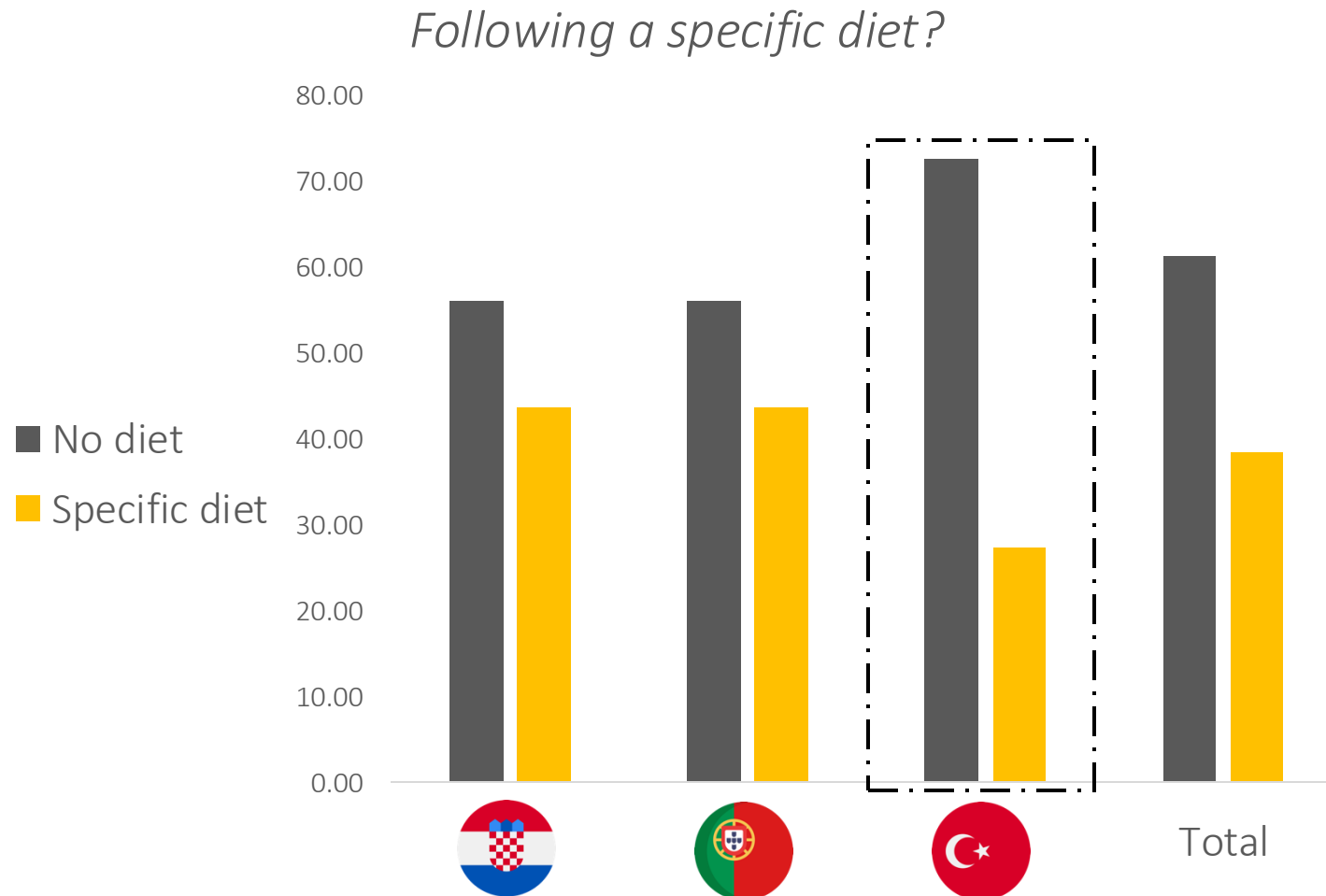
- Croatia presents the highest scores in all categories.
- Portugal showed better physical than mental health scores.
- Turkey referred to the lowest mental health scores.

# RESULTS – Health-Related Characteristics

## HEALTH CONDITIONS

				
Diabetes	1,18%	1,22 %	0,40%	0,95%
Cardiovascular	7,78%	10,16%	4,02%	7,34%
Food Intolerance	5,41%	4,67%	3,02%	4,43%
HTA	0,51%	1,42%	1,01%	0,95%

# RESULTS – Diet-Related Characteristics



## DIET RESTRICTIONS

+ students without specific diet guidelines, particularly in TURKEY

$$\chi^2(2, 1612) = 39.92, p < .001$$






# RESULTS – Diet-Related Characteristics

## MEDITERRANEAN DIET PERCEIVED ADHERENCE



$\chi^2(4, 1612) = 146.76, p < .001$

			
Vegan	4,8%	9,0%	2,2%
No gluten	5,1%	2,4%	4,7%
Lactose free	7,3%	7,6%	4,5%
Lose weight	16,8%	9,2%	13,2%
Gain weight	8,6%	3,4%	2,0%

all  $p < .050$

# RESULTS – Diet-Related Characteristics

## MD ADHERENCE: PREDIMED

### OVERALL MODERATE LEVEL

$M = 7.28(0.06)$

95% CI [7.16,7.39]

	Missing	Mean Acc. Perc.	SE
Q1 (olive oil as main cooking fat)	5	65%	0.01
Q2 (olive oil per day)	8	23%	0.01
Q3 (cooked vegetables)	3	22%	0.01
Q4 (raw vegetables)	2	35%	0.01
Q5 (pieces of fruit)	6	25%	0.01
Q6 (servings of red meat/hamburguer/meat products)	3	46%	0.01
Q7 (serving of butter(margarine/cream)	4	76%	0.01
Q8 (sugary/carbonated drink)	5	78%	0.01
Q9 (glasses of wine)	100	97%	0.00
Q10 (serving of legumes)	7	30%	0.01
Q11(serving of fish/seafood)	14	16%	0.01
Q12 (week consumption of commercial pastries/sweets)	13	53%	0.01
Q13 (weekly consumption of nuts)	11	34%	0.01
Q14 (preference for substitute red meat)	13	67%	0.01
Q15 (weekly consumption of saut. based dishes)	9	70%	0.01

## ENABLERS:

↑ wine consumption

↓ intake of sugary drink

↓ butter consumption

## CHALLENGES:

↓ fish/seafood intake

↓ use of vegetables

↓ use of olive oil/day

↓ fruits/day



$M = 8.55$   
(0.10)

\*\*\*  
>



$M = 6.82$   
(0.09)

=



$M = 6.57$   
(0.10)

$F(2, 1609)=117.15, p< .001$

# RESULTS – Diet-Related Characteristics

## MD ADHERENCE: PREDIMED

$F(2, 1609)=117.15, p< .001$



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(0.10)

\*\*\*  
>



$M = 6.82$   
(0.09)

=



$M = 6.57$   
(0.10)

### *Differential Challenges*

olive oil use/day  
consumption of nuts

serving of fish/seafood  
olive oil use/day  
cooked & raw vegetable intake  
serving of legumes  
Pieces of fruit

serving of fish/seafood  
olive oil use  
sugary drink consumption  
cooked vegetables intake  
substitution of red meat

# RESULTS – Food Habits On Campus

## FOOD HABITS ON CAMPUS

### OVERALL

Diversity in using food services

$M = 2.82 (0.02)$ ; 95% CI [2.79;2.86]

Canteen - most frequent

	<i>Missing</i>	<i>Mean</i>	<i>SE</i>
1.bring food from home	9	2.76	0.03
2.eat at the canteen	15	3.48	0.03
3.eat at the cafeteria	16	2.72	0.03
4.eat at neighborhood restaurants	26	2.42	0.03
5.use vending machines	17	2.33	0.03



$M = 3.76$   
(0.03)

\*\*\*  
>



$M = 3.58$   
(0.05)

>






$M = 3.08$   
(0.06)

$F(2, 1596) = 55.956, p < .001$

# RESULTS – Food Habits On Campus

## RATINGS OF FOOD OFFERED IN THE CANTEEN

	Missing	ALL Mean	SE
1.tasty (PC2)	5	3.27	0.03
2.healthy (PC1)	5	3.05	0.03
3.varied (PC1)	6	2.98	0.03
4.hygienic and safe (PC2)	5	3.40	0.03
5.nutritionally balanced (PC1)	6	3.09	0.03
6.fresh (PC2)	6	3.21	0.03
7.low in fat (PC1)	5	2.62	0.03
8.low in sugar (PC1)	6	3.33	0.03
9.low in salt (PC1)	7	3.47	0.03
10.coherent with MD principles (PC1)	6	3.07	0.04
11.adequate for dietary restrictions (PC1)	6	2.92	0.04
12.sustainable (PC1)	6	3.36	0.03
13.fair in price (PC2)	4	3.88	0.03
14.served fast (PC2)	6	3.71	0.03
15.appropriate portion size (PC 2)	8	3.46	0.03

	ALL			
<b>Food characteristics</b> (PC1)	3.10 (0.02)	2.80 (0.03)	3.57 (0.04)	2.99 (0.05)
<b>Service appraisal</b> (PC2)	3.49 (0.02)	3.66 (0.03)	3.63 (0.04)	3.15 (0.04)

Portugal → better perception of food served in the canteen

Turkey → reduced assessment for services:

- hygienic and safe
- served fast
- fairly priced
- appropriate portion size

# RESULTS – Food Habits On Campus

## MD LITERACY

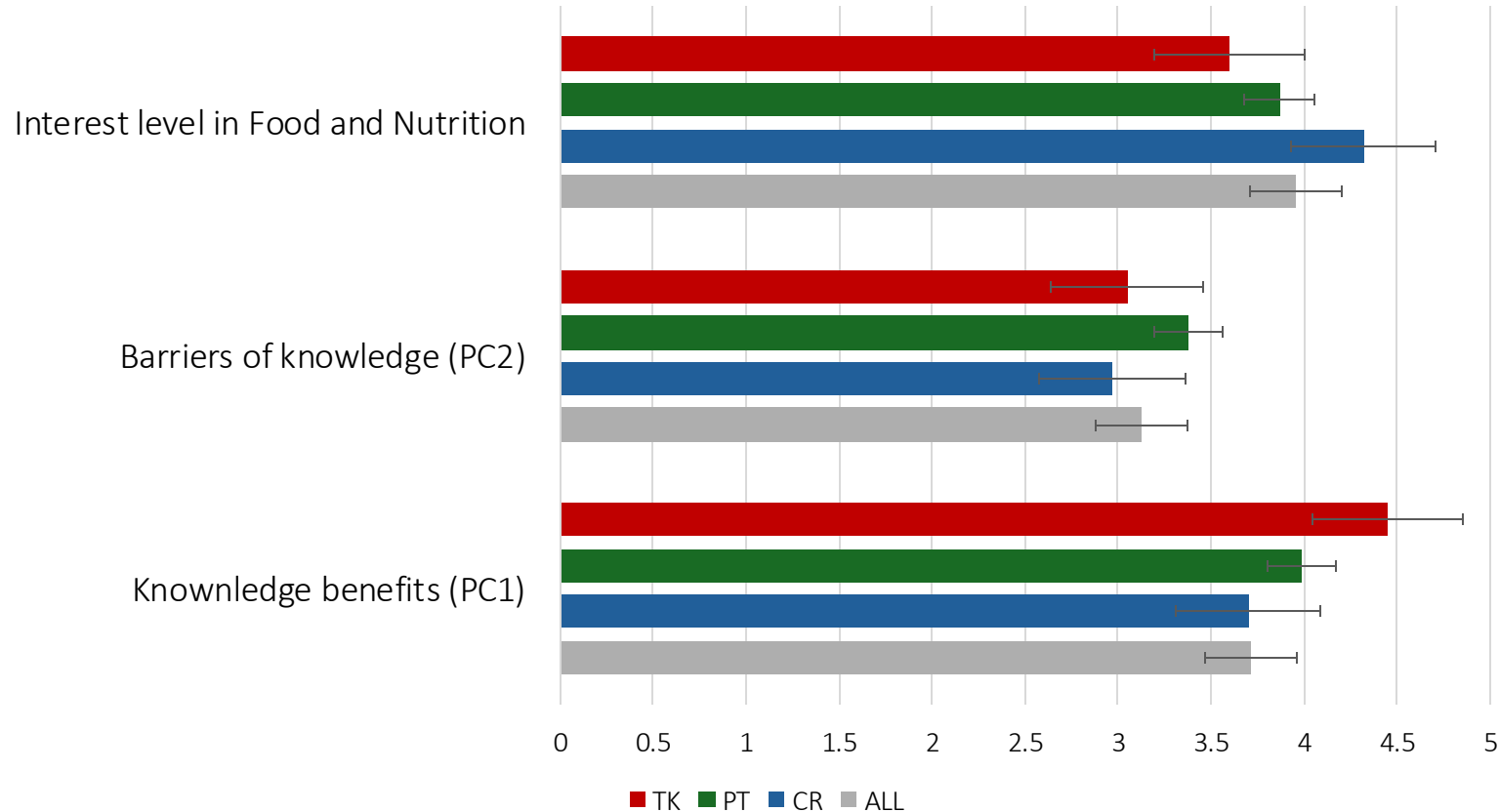
### OVERALL

Knowledge of benefits are HIGH  
Barriers of Knowledge are MODERATE  
Interest is INCREASED

	Missing	<i>M</i>	<i>SE</i>
1.I am aware of what a MD-based lifestyle is and how to implement it successfully. (PC1)	25	3.43	0.03
2.For me, MD's menu guidelines (i.e., portion size, food group substitutions, schedules, budgets) are complex to follow and understand. (PC2)	27	3.20	0.03
3I recognize the potential benefits of adopting a MD-based lifestyle for better nutrition.(PC1)	27	3.99	0.03
4.I recognize the potential benefits of adopting a MD-based lifestyle to reduce meat intake.(PC1)	28	3.61	0.03
5.I recognize the potential benefits of adopting a MD-based lifestyle in improving the social experience related to food.(PC1)	28	3.62	0.03
6.I am aware that MD helps prevent several physical and mental health problems.(PC1)	32	3.90	0.03
7.I have difficulty identifying and interpreting nutritional components and using labeling to select healthier food products. (PC2)	33	3.28	0.03
8.I often cook vegetables in a variety of ways and combine meals to reduce my protein and carb intake.(PC1)	33	3.03	0.03
9.I'm not sure it's worth it to maintain the MD lifestyle. (PC2)	34	2.99	0.03

# RESULTS – Food Habits On Campus

## MD LITERACY



↓ knowledge of benefits,  
↑ difficulty with barriers knowledge  
(reverse score)  
↑ interest in food topics.



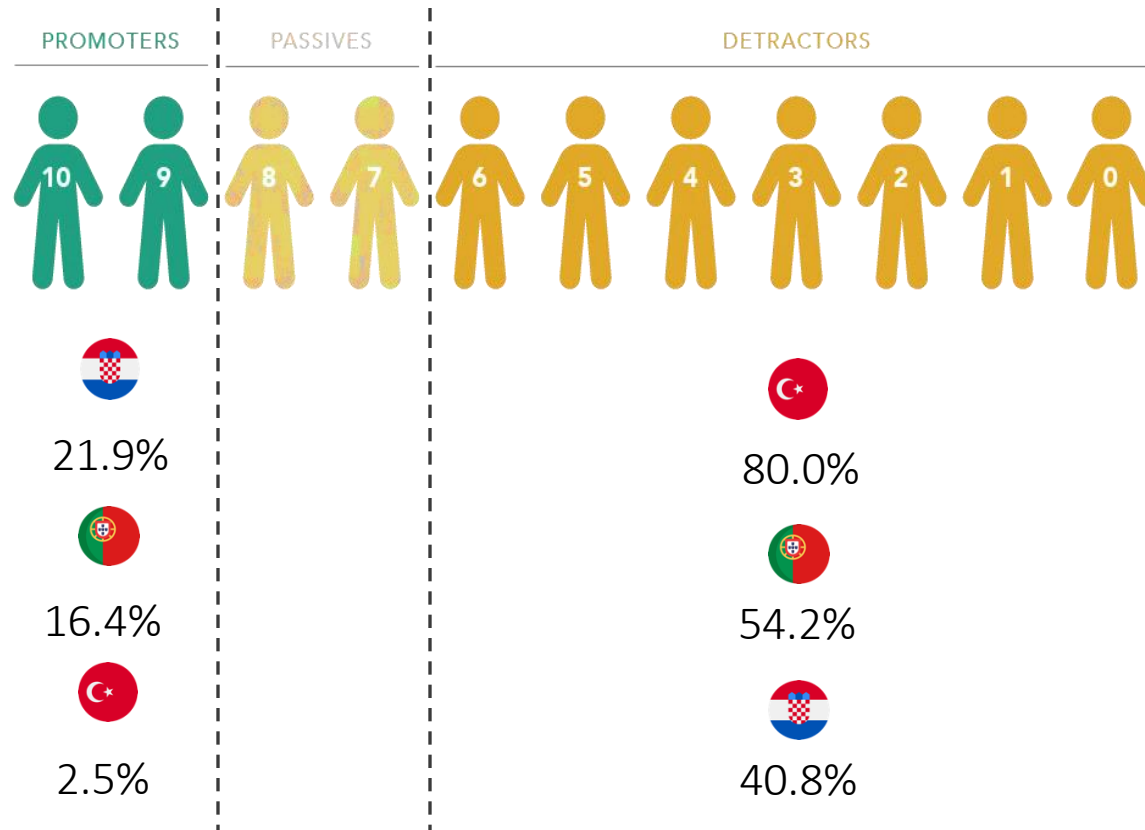
↓ value of the barriers



↑ knowledge of benefits

# RESULTS – Food Habits On Campus

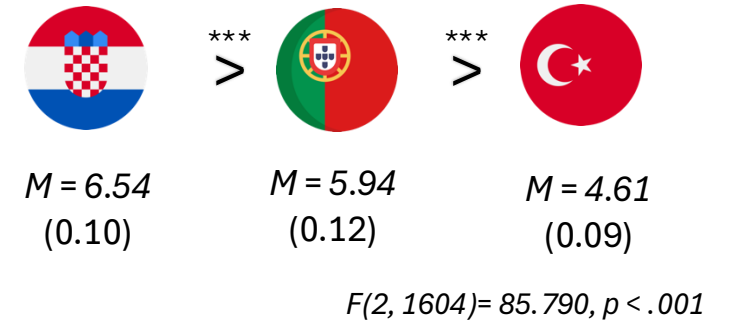
## LIKELIHOOD TO PROMOTE CAMPUS CANTEEN



## OVERALL

Canteen – DETRACTORS TREND

$M = 5.75(0.06)$ ; 95% CI[5.62; 5.88]





# RESULTS

*How student habits and canteens' perceptions relate with MD compliance and knowledge, perceived health & potential to indicate those food services?*

Factors association: The main psychological and environmental barriers to adhering to MD.

	1	2	3	4	5	6	7	8	9
1. Food habits - Eat at the Canteen	—								
2. Canteen assessment- Food appreciation	-.050	—							
3. Canteen assessment - Service appraisal	-.018	.602	—						
4. Compliance with PREDIMED (score)	-.168	-.051	.032	—					
5. NET promotion score (NPS)	-.140	.120	.133	.126	—				
6. Known Benefits	-.076	-.139	.055	.367	.127	—			
7. Known Barriers	-.111	-.040	.022	.407	.051	.281	—		
8. MD perceived adherence	-.065	-.073	.021	.128	.022	.032	.105	—	
9. Overall perceived health	-.015	-.009	.128	.118	.056	.107	.119	.020	—
10. Interest in Food and Nutrition	.003	-.165	.078	.249	.061	.375	.265	.199	.169

# RESULTS

## Changeability of perceptions according to different person-based characteristics

### Cluster-based analysis: Profiling choices

3 clusters  
N= 1541  
R<sup>2</sup>= 0.437  
Silhouette= 0.100

C1: moderate habits & canteen assess.& recommend

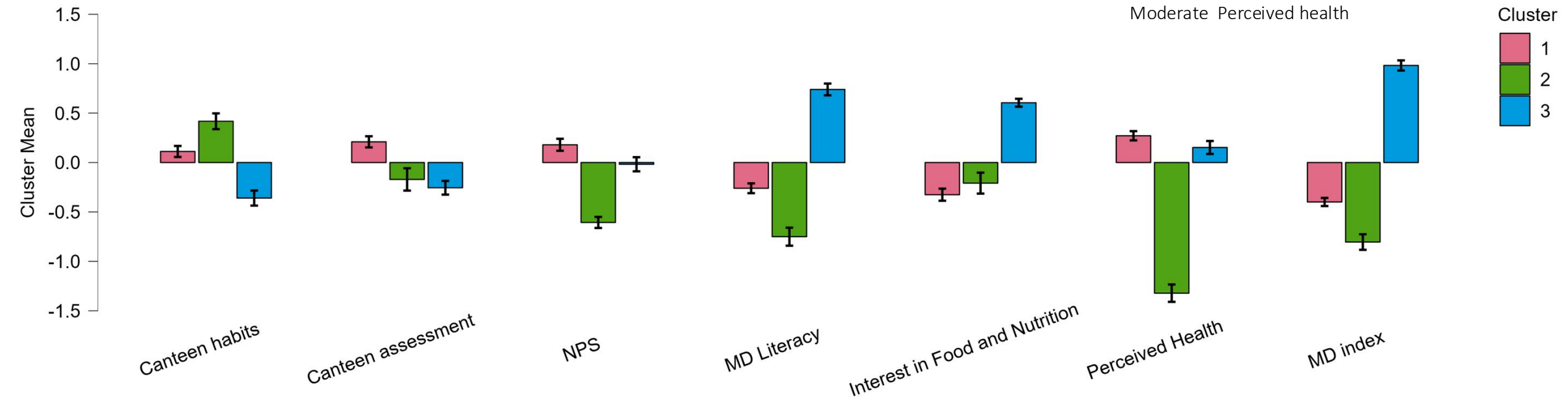
low MD know & compliance  
good perceived health

C2: high habits & low canteen assess.

low likelihood to recommend  
Low MD know & compliance  
poor Perceived Health

C3: low habits & canteen assess

High MD know & interest & compliance  
Moderate Perceived health



# Final Considerations

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MD compliance was low to moderate across the samples

The mapping of perceptions and attitudes regarding food offers in university canteens showed:

- The canteen is not the prevalent choice, with students showing a diversity of habits
- Canteen food obtained lower ratings than canteen services, particularly in Turkey
- Reduced butter and the use of wine are enabling MD adherence
- The daily use of olive oil remains a challenge.

The changeability of the factors according to person-based characteristics showed...

- The use of canteen services is negatively related with MD compliance & knowledge, canteen food appraisal, and the likelihood of recommending food canteen services.
- The main psychological barrier is the MD knowledge, low interest, and bad perception of own health
- The environmental barriers to adhering MD are the food and services themselves.
- The individual profile of perceived health, MD compliance and knowledge are likely modulating canteen perceptions, habits and likelihood to recommend.

Advancing data about modifiable factors associated with better adherence to healthy dietary habits in the university context informs the development of actions/interventions to prevent unhealthy food choices and overcome limited and unhealthy food offers in canteen campuses.

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The mapping of perceptions and attitudes regarding food offers in university canteens showed:

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- Canteen food obtained lower ratings than canteen services
- Reduced butter and sugary drink consumption and the use of wine are enabling MD adherence
- The daily use of olive oil remains a challenge for all countries

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**MEDDiET**

- MENUS 4 CAMPUS -

Thank You for Your Attention!

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Fundação  
para a Ciência  
e a Tecnologia

