Providing Incentives to Influence Consumer Food Choices in a Remote Aboriginal Community Store

Results from the Healthy Choice Rewards Feasibility Study

Trialling a New Approach to Help Aboriginal & Torres Strait Islander People in Remote Areas Eat More Fruit & Vegetables

Dietary risks, including low fruit and vegetable intake, are reported to be the leading cause of burden of disease in Australia. Aboriginal and Torres Strait Islander people living in remote Australia are reported to consume 62.5% less fruit and 48% less vegetables than other Australians. In the context of increasing health care costs and government budget cuts threatening progress in the prevention of chronic disease, it is important to investigate cost-effective measures to address health disadvantage for Aboriginal and Torres Strait Islander people living in remote communities. International studies have shown that when people are offered a monetary reward for buying healthy foods, they are encouraged to choose more healthy foods and less unhealthy foods. The Healthy Choice Rewards study was designed to test the feasibility of a monetary incentive in the form of store vouchers, to promote fruit and vegetable purchasing in a remote Aboriginal community context. The project was led by Apunipima Cape York Health Council in partnership with Menzies School of Health Research, Island and Cape Retail Enterprises and James Cook University. The project was completed in 2015 as part of implementing a key objective of the Cape York Food and Nutrition Strategy – to ensure equitable food affordability, availability and access comparable to urban Australia.

KEY FINDINGS

- **Community members liked the idea of being rewarded for buying fruit and vegetables.**
- **Healthy eating is especially important for kids... We don’t want to see our kids wither away, we want them to have a healthy choice!**
- **It’s expensive here, there is hardly enough money to buy food.**
- **The reward offer only reached particular segments of the community because shopping behaviours varied.**
- **Women with children were most likely to benefit from the offer.**

DATA ANALYSIS

Sales data were collected from the store’s electronic grocery management system for the duration of the project period and the same time period in the previous year. A pre-post analysis of store sales data was completed by Menzies School of Health Research. Customers and store staff were invited to participate in semi-structured interviews measuring satisfaction with the reward offer. A thematic analysis of interview data was completed by Apunipima.

SUGGESTED NEXT STEPS

1. A larger multi-site controlled study is recommended to fully explore the impact of a monetary incentive to encourage fruit and vegetable purchases, specifically for women with children.
2. Increased investment in remote retailing remains critical to the success of these types of interventions, and should include:
   - Infrastructure upgrades such as closed door refrigeration displays to preserve quality and extend shelf life of fresh produce
   - Increased use of merchandising techniques to promote healthy foods, such as those employed by big-businesses in urban supermarkets
   - Store Nutritionists to help guide store managers on what food products and drinks to stock and assist with promoting sale of healthy foods, such as those employed by big-businesses in urban supermarkets
   - Ways to celebrate, promote and encourage these stores who are showing initiative and commitment to improving access to healthy food, particularly those already operating with low profit margins on fruit and vegetables and cross-subsidisation strategies to make healthy choices cheaper.

OPPORTUNITIES

- Community members suggested the offer may be more effective under the following conditions:
  - Tail the reward system specifically for women with children
  - Use electronic store loyalty cards instead of paper-based vouchers
  - Increase flexibility of redemption parameters
  - Offer higher incentives
  - Strengthen promotion through increased community involvement

CHALLENGES

- Community members reported facing many challenges to healthy eating, including:
  - Little available money for food
  - High food costs
  - Issues with quality and regular availability of fresh produce
  - Lack of health hardware
  - Communities increasing dependency on takeaways
  - Children now preferring the taste of sweet processed foods from the store rather than traditional sweet bush foods.
- Food retailing in remote areas is challenging on a range of levels. Project staff observed the many difficulties remote retailers experience to consistently maintain fresh produce displays and support health promotion efforts.

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