Eat Smart! Ontario’s Healthy Restaurant Program:
Focus Groups With Non-participating Restaurant Operators

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Abstract

Eat Smart! Ontario’s Healthy Restaurant Program is a standard provincial health promotion program. Public health units give an award of excellence to restaurants that meet nutrition, food safety, and non-smoking seating standards. The purpose of this study was to determine why some restaurant operators have not applied to participate in the program, and how to get them to apply. Four focus group interviews were conducted with 35 operators who didn’t apply to participate. The analysis of responses yielded various themes. The participants’ perceived barriers to participation were misunderstandings about how to qualify for the program, lack of time, concern about different non-smoking bylaw requirements, and potential loss of revenue. Their perceived facilitators to participation were convenience of applying to participate, franchise executives’ approval to participate, a 100% non-smoking bylaw, flexibility in the assessment of restaurants, the opportunity for positive advertising, alternative payment for food handler training, and customer demand. Program staff can use the findings to develop and use strategies to encourage participation. (Can J Diet Pract Res 2004; 65:6-9)

INTRODUCTION

Eat Smart! Ontario’s Healthy Restaurant Program is a standard provincial health promotion program implemented in May 1999. Restaurant operators must meet designated standards in nutrition, food safety, and non-smoking seating to have their establishments qualify as Eat Smart! restaurants (1). In 1999, the program was in an early stage of development and continued to evolve. The current study was done to determine why some operators have not applied to participate in the program, and how to get them to apply. Specifically, the objective was to identify their perceived barriers and perceived facilitators to participation, so that strategies could be developed and used to encourage participation.

METHOD

Participants

Thirty-five restaurant operators who did not apply to participate in Eat Smart! were recruited to participate in one of four focus-group sessions. There were five, eight, ten, and 12 participants in the sessions. Participants were from four different regions in which the program was operating. The regions were selected to provide a mixture of urban and rural locations.

Interview guide

A structured interview guide was developed. This guide consisted of open-ended questions to address perceived barriers and perceived facilitators to participating in the program (Table 1). To determine whether the questions had face validity, were clear, and elicited good discussion, they were pilot tested among Eat Smart! provincial steering committee members who were restaurant operators. The results of the pilot test were used to revise the questions.

Procedure

The authors obtained ethical approval from Toronto Public Health. Local health units provided assistance in recruiting...
Table 1
Interview guide questions

1. What benefits, if any, do you think there might be for restaurant operators to apply to join the Eat Smart! program?

2. In your opinion, why aren’t more restaurant operators applying to join the program?

3. Some restaurant operators have said that it’s difficult to meet the program standards and that is the reason that they’re not participating. What can we do to help restaurant operators meet these standards?

4. In your opinion, what might entice you and other restaurant operators to apply to join the program?

participants. At each of the four local health units, a staff member who implements Eat Smart! identified potential participants from their health unit restaurant listing. Potential participants were selected to represent a variety of establishments, including quick-service, family-style, fine-dining, chain/franchise, and independent restaurants. One week before the fall 2000 focus-group session, the staff member phoned potential participants to request their participation. Eight to 12 restaurant operators were recruited in each region.

To encourage attendance, $75 compensation was offered to potential participants. The staff member sent a personalized letter of invitation to participants. The staff member telephoned them 24 hours before the session to confirm attendance.

Informed consent was obtained from the participants immediately before the sessions. Four 90-minute sessions were conducted. This number of sessions is common (2). Although our preference was to continue to conduct sessions until theoretical saturation was achieved (i.e., no new information emerged), the current number of sessions reflects resource constraints.

One moderator who was knowledgeable about general principles of conducting focus groups (3-5) facilitated the sessions. A staff member from the host health unit took notes, and each session was audiotaped. The audiotapes were transcribed and verbatim comments were imported into The Ethnograph (version 5.8, Qualis Research Associates, Salt Lake City, UT, 1998), a computer application that facilitates the management of qualitative data. For each question, the transcripts were reviewed, segments of text were coded, and underlying themes were inductively developed.

RESULTS AND DISCUSSION
Perceived barriers to participation
The analysis of responses yielded four themes about perceived barriers to participation: misunderstandings about how to qualify for the program, lack of time, concern about different non-smoking bylaw requirements, and potential loss of revenue.

Misunderstandings about how to qualify for the program: There were misunderstandings about how to qualify for the program, which made some participants less interested in applying. First, they stated that they would not reveal the recipe ingredients of meals to customers to meet the nutrition standard. For example, they would not share the secret recipe for their in-house sauces or dressings. The moderator clarified that this standard requires information about whether certain ingredients are used in specific meals, such as whether milk or cream is in the sauces, so that customers can make healthier choices. Second, participants incorrectly said that restaurants must offer a low-calorie dessert, as opposed to a lower-fat dessert. Third, they incorrectly said that menus must be modified continually to highlight current and new Eat Smart! items. Fourth, they incorrectly stated that in order to qualify for the program, restaurants must serve meals that accommodate patrons with diabetes or food allergies. Fifth, a participant’s misunderstanding that “if you belong to Eat Smart!, then your establishment is inspected more often and better by the health inspectors” was echoed by others.

Lack of time: Time was identified as a barrier to program participation. Study participants mentioned their busy schedules, and pointed out that they didn’t have much time to spend on the program, including paperwork. For example, a participant said: “Even though it may do good for me, I just don’t see that I have the time. Maybe the health inspector should be doing all of this. They go into the establishment, they see that you meet the criteria you’re looking for, everything looks great, and here’s your sticker. Make it simple. I don’t have the time to sit down and do paperwork.”

Currently, it is quick and easy for restaurant operators to complete the process of joining the program. They have several options to apply for the program. They can phone the local health unit to inquire about applying for the program. Also, they can indicate their interest in applying for the program when a public health inspector (PHI) comes to inspect their restaurant. Further, they can go to the Eat Smart! Web site and apply online.

Concern about different non-smoking bylaw requirements: Some participants were worried about the possibility of the non-smoking seating standard changing over time. For example, a participant said:

“I just want assurance that they’re not going to become more controlled later on. Now, I’ve got 50% non-smoking. I meet all these requirements. Do I have to be 75% when you jump up [to] that level? If I don’t go to that 75% and the Eat Smart! decal is removed from my door, now I’ve got negative publicity.”

Study participants were interested in Eat Smart! participation if a bylaw requiring all restaurants to be smoke-free is in place in the near future. They preferred this level playing field among restaurant operators. Provision of non-smoking seating has always been a problem when neighbouring communities have non-smoking bylaws with different requirements. Until communities require 100% non-smoking in all restaurants, operators will be expected to increase the non-smoking area to meet Eat Smart! requirements. Attracting operators to participate in the program may be more challenging in communities with weaker non-smoking bylaws.

Potential loss of revenue: Some participants were concerned that disclosure of poor inspection results could yield negative publicity and a possible loss of business. They sometimes had difficulty understanding the public health inspectors’ reports,
and therefore felt that the public could easily misinterpret these reports. They commented that this situation could lead people to form unwarranted negative impressions of the restaurants and not eat there. However, the Eat Smart! requirement for disclosure of inspection reports upon request reveals only excellent reports, because a track record of safe food handling is a prerequisite for program participation.

Some operators perceived that “heart smart” meals aren’t big-selling items in restaurants. They suggested that many customers go to a restaurant to have an enjoyable meal and to indulge themselves, rather than to eat healthy foods. They expressed concern that Eat Smart! promotional material in their restaurants would deter customers from ordering an indulgent meal. Some participants emphasized that good business is giving customers what they want, including high-calorie meals and desserts. For example, a participant said, “We’re here to make money. We’ll sell them whatever they want. There’s no money in water and a bowl of lettuce with diet dressing.”

Some study participants believed that they would lose business if their non-smoking seating area increased and smokers went to other restaurants. (Smokers sometimes are perceived to generate higher bills because of increased food and alcohol consumption.)

Some participants were concerned about the possible financial cost associated with making special orders, which can be time-consuming. For example, they said that accommodating customer requests for smaller portions, at reduced prices, would be difficult because it would slow things down in the kitchen. However, they could accommodate requests to serve a half meal and put the remaining portion in a container for customers to take home. They also were concerned about the cost of certifying food handlers in an environment that has high staff turnover.

Perceived facilitators to participation

The analysis of responses yielded seven themes about perceived facilitators to participation: convenience of applying to participate, franchise executives’ approval to participate, a 100% non-smoking bylaw, flexibility in the assessment of restaurants, the opportunity for positive advertising, alternative payment for food handler training, and customer demand.

Convenience of applying to participate: Some participants mentioned that they received Eat Smart! promotional material, but immediately discarded it or lost it “in the shuffle.” They therefore lacked specific knowledge about Eat Smart!, including how to apply to join the program. They said that they would be more likely to apply to join if someone from Eat Smart! came to their restaurants and described the program. Because of their busy schedules, they would be more likely to act on information shared in a personal and interactive manner than on distributed information. Several participants said that they would have applied to join the program if someone from Eat Smart! had asked them to.

Franchise executives’ approval to participate: Some participants who belonged to a franchise suggested that head office executives be contacted and informed about the program. They said that they needed approval from head office to participate and to change the menu to meet program standards. Some discussions with such executives have already occurred to encourage province-wide participation of their restaurants. A problem arises when each location must be individually inspected and may or may not qualify, depending upon the inspection report for the site. The program also is not yet operating in all communities, so some locations cannot participate until the local health unit implements the program.

A 100% non-smoking bylaw: Some participants believed that restaurant operators could meet program standards more easily if the percentage of non-smoking seating required by Eat Smart! were the same as that required by the local no-smoking bylaw, or if a 100% no-smoking regional bylaw were in place. However, Eat Smart! was designed to recognize operators who achieve an exceptional standard in health promotion and health protection for their customers and staff. Operators warrant recognition if they don’t wait for legislation and are more proactive than others in their community in providing increased non-smoking seating.

Flexibility in the assessment of restaurants: Some participants emphasized that Eat Smart! coordinators should show some flexibility in assessing whether restaurant operators meet the program standards, and make exceptions, if necessary. Eat Smart! program planners do make exceptions for the nutrition standard. For example, a variety of food choices can be offered to meet the standard, and all types of establishments can qualify as Eat Smart! restaurants, regardless of menu style. However, there is no room for flexibility in the food safety and non-smoking seating standards. While they can choose between meals on a menu, customers have no control over safe food handling or sanitation practices, or environmental tobacco smoke in restaurants. Some critics suggest that the program standards should be more rigorous to reflect an achievement of excellence. Compromising these standards could jeopardize the health of restaurant customers and staff. Eat Smart! will continue to increase its standards and to reward operators who provide safe, nutritious food in a health-promoting environment.

Opportunity for positive advertising: Many study participants suggested that local health unit staff should continue to emphasize to restaurant operators that program participation is positive advertising. These study participants perceived that the Eat Smart! award conveys to clientele that operators are proud of their establishment and care about their customers, which is also good for business. They suggested that Eat Smart! restaurants attract customers, particularly those who are health conscious. They expected that people would patronize Eat Smart! restaurants more frequently to eat meals that are as healthy as home-cooked food. They also mentioned that tourists might perceive Eat Smart! restaurants as desirable places to eat. This is a typical comment: “I’m sure there’s a much larger market out there that’s eating smarter or watching where they dine. That [Eat Smart!] would definitely attract a much bigger market than we have right now.”
The following is another representative comment:

"It’s good for tourists to have that sticker because your locals know where to go and where to eat and you get your repeat customers all the time. If tourists see that sticker, they’re more likely to go in your restaurant than somewhere else."

Some participants suggested that restaurant operators would apply to join the program if there were no fee or a minimal fee to join because the program provides positive advertising:

"Let’s forget about the cost for a minute and say how much exposure my restaurant will get if I join this program. How many people per day would see my restaurant on the list of above average restaurants in the City of Toronto? How much would it cost me to advertise to get to these people and catch their attention? So maybe it’s better this way."

At the time of the study, there was no fee to participate in the program, and there are no plans to introduce a fee in the future.

**Alternative payment for food handler training:** Some participants were concerned about the cost associated with certifying food handlers, but felt that the food handlers’ practices would save money in the long run. They suggested that the restaurant owner, as opposed to the employees, pay for food handler training, or that the owner receive subsidization for sending employees to training sessions. They also raised the possibility of minimizing disruption and costs by providing training to a number of employees on-site, at the restaurants.

**Customer demand:** Many participants said that they would be more likely to apply to join the program if customers sought out restaurants with the Eat Smart! logo. That would be necessary for operators of Eat Smart! restaurants to benefit fully from the program. For example, a participant commented, “Aren’t you putting the cart before the horse, going after us instead of going after them [customers]? They put the demand on us and we change.”

**CONCLUSION**

The study revealed various reasons that some restaurant operators have not applied to participate in the Eat Smart! program. Their misunderstandings about how to qualify led them to believe that their restaurants might not meet the standards to become Eat Smart! establishments, or to be apprehensive about what would subsequently be required of them if they did become Eat Smart! operators. They also were concerned about the resource implications of participating. They had limited time to spend on application paperwork. They were concerned about the potential loss of revenue because some poor inspection results could be disclosed, more nutritious but cheaper meals might be required, and smokers could go to non-participating restaurants.

The study participants identified various strategies to encourage participation. They suggested that applying to participate needs to be even more convenient for operators, including operators of chain restaurants. They wanted more flexibility in the assessment of whether operators meet the program standards, particularly the non-smoking seating standard. They felt that local health unit staff should continue to promote the Eat Smart! award as a form of positive advertising for restaurants. They suggested that operators would be more likely to participate if customers were more likely to seek out Eat Smart! restaurants.

**RELEVANCE TO PRACTICE**

The operators’ discussion of why they had not applied to participate in the program and what would get them to apply provided information that local health unit staff can use to develop and implement strategies to encourage participation among restaurant operators. When providing program information, health unit staff could clarify any misunderstandings about how to qualify, and address concerns that might deter participation. If feasible, public health dietitians and nutritionists offering on-site or telephone consultations to operators could address the concerns about menu requirements. These dietitians and nutritionists also could highlight that the program is free and provides positive advertising for participating restaurants. Consulting dietitians could help increase the demand for healthier choices in restaurants by dedicating a portion of client counselling time to tips for selecting and requesting these foods. In turn, this approach could increase the profile of the Eat Smart! program.

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**References**


**Note:** Due to limited space, this article does not focus on additional questions about awareness of the program.