

# Acceptability of policies to change dietary and physical-activity related behaviours: a systematic review of tools and outcomes

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## Background

- Importance of policies targeting dietary behaviour and physical activity to prevent NCDs
- **Acceptability** is crucial for policies to be effective
- Knowledge gap in regard to acceptability of policies targeting unhealthy diets and physical inactivity and lack of **tools to measure acceptability** in the field

### Aims:

1. the identification of **tools used for assessing and evaluating acceptability** of policies targeting physical activity and dietary behaviour over the course of policy implementation.
2. the examination of **acceptability towards policies** in relation to **dietary** and **physical activity** behaviours and the role of characteristics of the **target behaviour**, the **type of policy** and the **respondents on levels of acceptability**.

## Methods

- **Systematic search:** Web of Science, Science Direct, Google Scholar, PubMed
- **Inclusion criteria:** studies measuring acceptability of policies targeting diet/physical activity; population composed of any individuals involved in the decision-making process (i.e. policy-makers or stakeholders) or any individuals potentially affected by a policy targeting PA/diet (i.e. the public); English language.
- **Review Protocol** registered to **PROSPERO**:   
([https://www.crd.york.ac.uk/prospERO/display\\_record.php?RecordID=232326](https://www.crd.york.ac.uk/prospERO/display_record.php?RecordID=232326))

### Working definitions of acceptability:

- (1) the level of support or attitude toward the implementation of that policy (Reynolds et al., 2020).
- (2) the perception among implementation stakeholders that a given treatment, service, practice, or innovation is palatable, agreeable, or satisfactory (Proctor et. al, 2011).

## Results

Screening of titles and abstracts (n = 7.780)

Full texts (n = 162)

**48 included articles** (n = 32 on dietary behaviour, n = 11 on physical activity, n = 5 on both)

Main findings (**levels of acceptability**) across various study characteristics:

- **Tools to measure acceptability:** online surveys (n = 24), interviews (n = 10), focus groups (n = 10), retrospective textual analysis (n = 3), and a taste-test experiment (n = 1)
- **Characteristics of policies:** less intrusive policies such as food labels and policies in a later stage of the implementation process received higher levels of acceptability.
- **Characteristics of target group:** women, older participants, and respondents who rated policies as appropriate and effective showed the highest levels of acceptability

Note: only three (out of 48) studies applied a theoretical foundation for acceptability and few of the included tools reported psychometric information

## Conclusions

- **Highly intrusive policies** are **less accepted**, but acceptability **may increase over time** of policy implementation
  - Acceptability is rated **higher** when the policy is perceived to be highly **appropriate** and **effective**
  - **Economic policies** are more acceptable to groups with lower socioeconomic status when **combined with a subsidy**
  - **Women** are **more likely** than men to report public **health policies as acceptable**, irrespective of behaviour or policy type
- Studies using **validated tools** and a **theoretical foundation** are needed, to further examine opportunities to increase acceptability