Eating Habits to Support Weight Management in Australian Dieters: Results Summary

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Introduction

Two thirds of the Australian adult population are considered overweight or obese, which impacts their health and wellbeing. Achieving weight loss can be a difficult and long-term journey, and thus, a degree of self-regulation in relation to eating behaviour is required to be successful. Self-regulation refers to intentionally using mechanisms to influence behaviour, emotion, or cognition. In the context of eating, higher levels of eating-self regulation are likely to be associated with greater weight loss success. Another key influence on weight loss success includes habits or actions that are performed automatically on a regular basis (e.g., daily or weekly) within similar contexts and in response to the same cues. There are different types of cues that drive habits, which can be categorised as external or internal. External cues refer to cues in the environment, such as time, location, activity, or a social situation. Internal cues refer to emotional states or sensations experienced by a person. Both types of cues have been shown to be influential in predicting habitual responses such as eating certain foods. Strong unhealthy habits (e.g., eating when not hungry) that become ingrained into routines can be difficult to change and may make it challenging to successfully manage weight.

Insights into strategies that people find helpful for making or breaking habits related to eating and weight management were gleaned from members of the CSIRO Total Wellbeing Diet (TWD) Online. The current survey aimed to examine TWD member's beliefs about eating habits, top healthy and unhealthy eating habits, and key tips for breaking or making new eating habits. It also examined stages of change for weight management, tempting foods, habit strength, emotional eating and eating self-regulation skills. Nutrition and behavioural scientists at CSIRO will use these insights to develop a new tool to help Australians break their unhealthy eating habits and form new healthier eating habits to help successfully manage their weight.

The objectives of the current project were three-fold:
1. Identify the stage of change for weight loss in a sample of Australians undergoing an online weight loss program.
2. Determine the psychological profile of the sample (e.g., self-regulation, habit strength, emotional eating).
3. Examine the strategies used for developing healthier eating habits and breaking unhealthy eating habits.

Method

A survey was developed using a mix of pre-existing validated scales, commonly used questions, and some questions specifically developed for this study. The survey protocol was approved by the CSIRO Health and Medical Human Research Ethics Committee (2024_022_LR). The survey was emailed to a database of approximately 79,000 past or present members of the CSIRO TWD Online. An explanation of the study was provided in the email along with an invitation to participate and a link to the online survey. The survey took about 10-15 minutes to complete depending on the individual's speed.

Digital Wellness provided the CSIRO research team with a de-identified data file. Survey data were analysed at a group level using general descriptive statistics (e.g., frequencies, means and percentages). Some subgroup analysis was conducted to understand whether responses varied by characteristics such as stage of change for weight loss or demographic variables. The survey also contained open ended questions about eating habits, which were analysed to identify key themes using standard thematic analysis methodology.

Key Findings

Sample Characteristics

- **Survey participation**: A total of 2,691 members opted to commence the survey representing 3.4% of those who were invited to complete it. Of the commenced responses, a total of 848 were excluded due to missing data leaving 1843 responses for analysis (see Table 1 for sample characteristics).
- **Stage of change for weight loss**: For this analysis, "Successful" refers to people who felt they were successfully managing their weight, while "Still Active" were people who had tried and were still trying. "Planning to start again" were people who had tried and were planning to start again but not yet active, and "Early stages/disengaged" were people who had recently started doing something, had decided to do something but not started, decided there was no need to do anything or undecided. About half the sample (49.16%, n=906/1843) were still active in managing their weight, while nearly a quarter (23.60%, n=435/1843) felt successful, 15.40% (n=284/1843) were planning to start, and 11.82% (n=218/1843) were disengaged/early stages of managing their weight.
- **Gender distribution**: Most participants (86%, n=1579/1843) in this sample were female.
- **Age groups**: Overall, 78% (n=1562/1843) of the sample were aged between 31 and 70 years old.
- **Weight and BMI**: The average weight of participants in was 86kg and BMI was 31.2 kg/m^2. Over a third (36.7%) were overweight and nearly half (49.8%) were obese. Almost all participants had seriously tried to lose weight at least once (98%), which is expected given the sample were current or past members of TWD. It was most common that people had tried 1-5 times (42.8%) or 6-10 times (22.7%).
- **Location**: Participants were primarily located in the Eastern states of Australia with the majority living in NSW (29.7%), Victoria (24.7%) and Queensland (17.3%).

Table 1: Sample characteristics by stage of change for weight loss.

| | | Stage of change for weight loss | | | | | | | | | |
| | | Disengaged or early stages n=218 | | Planning to start again n=284 | | Still active n=906 | | Successful n=435 | | Total n=1843 | |
		N/mean	%/SD	N/mean	%/SD	N/mean	%/SD	N/mean	%/SD	N/mean	%/SD
Gender	Male	25	11.5%	29	10.2%	104	11.5%	98	22.5%	256	13.9%
	Female	192	88.1%	253	89.1%	798	88.1%	336	77.2%	1579	85.7%
	Other/missing	1	0.5%	2	0.7%	4	0.4%	1	0.2%	8	0.4%
Mean age (years)		58	11	58	11	59	12	62	10	60	11
Age group	18-30 years	3	1.4%	5	1.8%	19	2.1%	2	0.5%	29	1.6%
	31-50 years	62	28.4%	60	21.1%	196	21.6%	60	13.8%	378	20.5%
	51-70 years	131	60.1%	191	67.3%	567	62.6%	295	67.8%	1184	64.2%
	71 years+	22	10.1%	28	9.9%	123	13.6%	78	17.9%	251	13.6%
	invalid or missing	0	0.0%	0	0.0%	1	0.1%	0	0.0%	1	0.1%
BMI (kg/m^2)		32.5	8.0	33.18	6.2	31.7	6.2	28.41	5.3	31.24	6.4
Weight status	Normal weight	19	8.7%	10	3.5%	76	8.4%	118	27.1%	223	12.1%
	Overweight	73	33.5%	82	28.9%	341	37.6%	181	41.6%	677	36.7%
	Obese	123	56.4%	184	64.8%	479	52.9%	132	30.3%	918	49.8%
	Class 1 Obese	68	31.2%	89	31.3%	260	28.7%	85	19.5%	502	27.2%
	Class 2 Obese	34	15.6%	56	19.7%	140	15.5%	26	6.0%	256	13.9%
	Class 3 Obese	21	9.6%	39	13.7%	79	8.7%	21	4.8%	160	8.7%
	missing or invalid	3	1.4%	8	2.8%	10	1.1%	4	0.9%	25	1.4%
State	ACT	8	3.7%	15	5.3%	33	3.6%	14	3.2%	70	3.8%
	NSW	78	35.8%	90	31.7%	252	27.8%	127	29.2%	547	29.7%
	NT	1	0.5%	1	0.4%	8	0.9%	3	0.7%	13	0.7%
	QLD	30	13.8%	48	16.9%	173	19.1%	68	15.6%	319	17.3%
	SA	19	8.7%	33	11.6%	92	10.2%	39	9.0%	183	9.9%
	TAS	4	1.8%	8	2.8%	25	2.8%	22	5.1%	59	3.2%
	VIC	50	22.9%	67	23.6%	229	25.3%	110	25.3%	456	24.7%
	WA	27	12.4%	21	7.4%	84	9.3%	47	10.8%	179	9.7%
	Not applicable	1	0.5%	1	0.4%	10	1.1%	5	1.1%	17	0.9%
Serious weight loss attempts in lifetime	Never	3	1.4%	2	0.7%	11	1.2%	20	4.6%	36	2.0%
	1-5 times	104	47.7%	101	35.6%	360	39.7%	223	51.3%	788	42.8%
	6-10 times	44	20.2%	70	24.6%	211	23.3%	94	21.6%	419	22.7%
	11-15 times	19	8.7%	27	9.5%	77	8.5%	33	7.6%	156	8.5%
	16-25 times	16	7.3%	27	9.5%	75	8.3%	23	5.3%	141	7.7%
	More than 25 times	32	14.7%	57	20.1%	172	19.0%	42	9.7%	303	16.4%

Top Tempting Foods

Tempting foods can make it challenging for managing weight. The list of foods presented in the survey was based on an analysis of commonly consumed foods from the Australian National Nutrition and Physical Activity Survey.

- **Top 5 tempting foods:** Most people (72.5%) found chocolate was the most tempting food followed by cheese (60.9%), bread rolls (52.1%), cakes and muffins (50.8%), and potato chips (50.4%; see Table 2).
- **Top foods by demographics:** Males were more tempted by beer (43% vs 6%), processed meats (34.8% vs. 20.2%), nuts (52.3% vs. 38.5%), and soft drinks (19.1% vs. 9.8%) relative to females. Females were slightly more tempted by savoury biscuits (35.3% vs 31.6%), cakes and muffins (51.2% vs 48.4%), and potato chips (50.7% and 48.4%) relative to males, but these differences were much smaller.
- **Top tempting foods by stage of change for weight loss:** People who were planning to start again were more tempted by sweet biscuits (60.2% vs. 39.5%), cakes and muffins (60.6% 44.1%), and bread or rolls (60.6% vs 44.8%) relative to those who felt successful.

Table 2: Number and % of respondents who considered the following foods 'tempting' by stage of change for weight loss.

| | Stage of Change for Weight Loss | | | | | | | | | |
| | Disengaged or early stages n=218 | | Planning to start again n=284 | | Still active n=906 | | Successful n=435 | | Total N=1843 | |
Tempting Food	N	%	N	%	N	%	N	%	N	%
Chocolate	152	69.7%	233	82.0%	654	72.2%	298	68.5%	1337	72.5%
Cheese	131	60.1%	205	72.2%	532	58.7%	254	58.4%	1122	60.9%
Bread or rolls	99	45.4%	172	60.6%	476	52.5%	195	44.8%	960	52.1%
Cakes, muffins, scones	117	53.7%	172	60.6%	461	50.9%	192	44.1%	937	50.8%
Potato chips	112	51.4%	157	55.3%	464	51.2%	184	42.3%	928	50.4%
Sweet biscuits	123	56.4%	171	60.2%	455	50.2%	172	39.5%	902	48.9%
Wine	87	39.9%	130	45.8%	412	45.5%	210	48.3%	851	46.2%
Ice-cream	104	47.7%	134	47.2%	377	41.6%	170	39.1%	780	42.3%
Nuts	99	45.4%	120	42.3%	362	40.0%	178	40.9%	747	40.5%
Savoury biscuits	85	39.0%	123	43.3%	299	33.0%	134	30.8%	641	34.8%
Pastries	71	32.6%	114	40.1%	299	33.0%	124	28.5%	608	33.0%
Confectionery	71	32.6%	115	40.5%	300	33.1%	115	26.4%	601	32.6%
Processed meats	61	28.0%	73	25.7%	197	21.7%	79	18.2%	410	22.2%
Dessert yoghurts	25	11.5%	59	20.8%	135	14.9%	56	12.9%	275	14.9%
Beer	25	11.5%	30	10.6%	93	10.3%	57	13.1%	205	11.1%
Soft drinks	21	9.6%	47	16.5%	91	10.0%	36	8.3%	205	11.1%
Muesli bars	31	14.2%	37	13.0%	82	9.1%	44	10.1%	184	10.0%
Other foods, not listed	20	9.2%	21	7.4%	61	6.7%	35	8.0%	133	7.2%
Fruit juice	16	7.3%	21	7.4%	50	5.5%	35	8.0%	126	6.8%
Cider	11	5.0%	23	8.1%	35	3.9%	30	6.9%	99	5.4%
None of the above	1	0.5%	0	0.0%	1	0.1%	4	0.9%	6	0.3%
Not applicable	1	0.5%	0	0.0%	0	0.0%	0	0.0%	1	0.1%

Habit Strength

Habit strength refers to how ingrained a habit is in a person's daily life. Participants reflected on the strength of their habits in relation to eating tempting foods. Total mean scores on this scale ranged from 1-5 with higher scores reflecting stronger habits. Stronger habits (4-5/5) for eating tempting foods are harder to break, which can make it more challenging for managing weight relative to moderately strong (3/5) or weaker (1-2/5) habits.

- **Total score by stage of change for weight loss:** In this sample, people who were planning to start managing their weight again (3.25/5) had moderately strong habits for eating tempting foods, while those who felt they were successfully managing their weight (2.21/5), still active in managing their weight (2.74/5), or disengaged/early stages (2.86/5) had weaker habits (see Table 3). Therefore, in this

sample, people who are planning to start managing their weight but haven't started yet had stronger habits than people successfully managing their weight, and stronger habits are harder to break.

- **Individual items for overall sample:** Over a third (36.7%) of survey participants agreed or strongly agreed *eating tempting foods was something they did automatically* and 31.3% agreed or strongly agreed *eating tempting foods was something they did without thinking*.

- **Individual items by stage of change for weight loss:** Over two thirds (61.6%) of survey participants who were planning to start managing their weight again agreed/strongly agreed *eating tempting foods is something they did automatically* relative to 37.5% of those still active and 15.7% successfully managing their weight. Half (51%) of the sample who were planning to start again agreed/strongly agreed *eating tempting foods is something they do without thinking* relative to one third (32.8%) of those still active and 14.3% successfully managing their weight.

- **In summary,** those who are planning to start managing their weight, but haven't started yet were less aware of their habit for eating tempting foods compared to those successfully managing their weight.

Table 3: Habit strength mean total scores and responses to individual items by stage of change for weight loss.

Eating tempting foods is something...	Response	Stage of Change for Weight Loss									
		Disengaged or early stages n=218		Planning to start again n=284		Still active n=906		Successful n=435		Total N=1843	
		N	%	N	%	N	%	N	%	N	%
I do automatically	Strongly disagree	13	6.0%	6	2.1%	66	7.3%	66	15.2%	151	8.2%
	Disagree	69	31.7%	51	18.0%	322	35.5%	224	51.5%	666	36.1%
	Neither disagree nor agree	44	20.2%	52	18.3%	178	19.6%	77	17.7%	351	19.0%
	Agree	73	33.5%	142	50.0%	301	33.2%	62	14.3%	578	31.4%
	Strongly agree	19	8.7%	33	11.6%	39	4.3%	6	1.4%	97	5.3%
I do without having to consciously remember	Strongly disagree	20	9.2%	11	3.9%	99	10.9%	85	19.5%	215	11.7%
	Disagree	74	33.9%	66	23.2%	347	38.3%	218	50.1%	705	38.3%
	Neither disagree nor agree	36	16.5%	67	23.6%	190	21.0%	64	14.7%	357	19.4%
	Agree	74	33.9%	113	39.8%	244	26.9%	65	14.9%	496	26.9%
	Strongly agree	14	6.4%	27	9.5%	26	2.9%	3	0.7%	70	3.8%
I do without thinking	Strongly disagree	30	13.8%	10	3.5%	109	12.0%	105	24.1%	254	13.8%
	Disagree	77	35.3%	88	31.0%	368	40.6%	224	51.5%	757	41.1%
	Neither disagree nor agree	37	17.0%	41	14.4%	132	14.6%	44	10.1%	254	13.8%
	Agree	58	26.6%	116	40.8%	253	27.9%	60	13.8%	487	26.4%
	Strongly agree	16	7.3%	29	10.2%	44	4.9%	2	0.5%	91	4.9%
I start doing before I realise I am doing it	Strongly disagree	34	15.6%	25	8.8%	134	14.8%	124	28.5%	317	17.2%
	Disagree	87	39.9%	97	34.2%	383	42.3%	215	49.4%	782	42.4%
	Neither disagree nor agree	32	14.7%	47	16.5%	130	14.3%	43	9.9%	252	13.7%
	Agree	55	25.2%	90	31.7%	224	24.7%	49	11.3%	418	22.7%
	Strongly agree	10	4.6%	25	8.8%	35	3.9%	4	0.9%	74	4.0%
Habit strength total score	Mean (SD)	2.86	(1.0)	3.25	(0.94)	2.74	(0.96)	2.21	(0.82)	2.71	(0.98)

Eating Self-Regulation

Eating self-regulation refers to how much control people have for eating tempting foods. Eating is a good example of a health behaviour that involves many components of self-regulation, including goal setting, monitoring progress toward goals, and protecting goals when faced with tempting situations. Participants were asked to reflect upon their 'eating intentions', which means how they aim to eat (e.g., intending to avoid eating tempting foods or eating healthy foods). Total mean scores on this scale ranged from 1-5 with higher scores reflecting stronger eating self-regulation skills. Stronger eating self-regulation skills (>3.6/5) makes it easier for people to eat in line with intentions relative to having moderate (2.8–3.6/5) or weak (<2.8/5) skills.

- **Total score by stage of change for weight loss** People who were successfully managing their weight (3.61/5) had strong eating self-regulation skills, while those who were still active (3.12/5), planning to start again (2.81/5), or in the early stages/disengaged (3.0/5) had moderate self-regulation (see Table 4).

- **Individual items for overall sample:** Over a third (37.2%) of the survey participants reported they often/always *give up on their eating intentions* indicating a lack of ability to control eating behaviours that get in the way of weight management. Four in ten (40.9%) people reported that they often/always *make changes if they are not eating in the way they intend* indicating an ability to adjust eating when needed to achieve intentions.
- **Individual items by stage of change for weight loss:** Seven out of 10 (70.1%) people who were planning to start managing their weight again reported to often/always *give up on their eating intentions* relative to four out of 10 (39.1%) of those who were still actively managing their weight and less than one in 10 (7.6%) successfully managing their weight. About two thirds (63.9%) of people who were successfully managing their weight often/always *make changes if they are not eating in the way they intend* relative to 38.6% of those who planning to start again and 22.9% of those who were still active.
- **In summary,** those successfully managing their weight were more likely to notice whether their eating behaviour was getting out of line with their intentions and adjust as needed compared with those who were planning to start or actively trying to manage their weight.

Table 4: Eating self-regulation mean total scores and responses to individual items by stage of change for weight loss.

| | | Stage of change for weight loss | | | | | | | | | |
| | | Disengaged or early stages n=218 | | Planning to start again n=284 | | Still active n=906 | | Successful n=435 | | Total N=1843 | |
	Response	N	%	N	%	N	%	N	%	N	%
I give up too easily on my eating intentions	Never	2	0.9%	2	0.7%	3	0.3%	9	2.1%	16	0.9%
	Rarely	12	5.5%	4	1.4%	75	8.3%	122	28.0%	213	11.6%
	Sometimes	106	48.6%	79	27.8%	474	52.3%	271	62.3%	930	50.5%
	Often	73	33.5%	159	56.0%	315	34.8%	31	7.1%	578	31.4%
	Always	25	11.5%	40	14.1%	39	4.3%	2	0.5%	106	5.8%
I easily get distracted from the way I intend to eat	Never	2	0.9%	1	0.4%	7	0.8%	13	3.0%	23	1.2%
	Rarely	27	12.4%	11	3.9%	125	13.8%	167	38.4%	330	17.9%
	Sometimes	99	45.4%	98	34.5%	470	51.9%	227	52.2%	894	48.5%
	Often	72	33.0%	152	53.5%	277	30.6%	28	6.4%	529	28.7%
	Always	18	8.3%	22	7.7%	27	3.0%	0	0.0%	67	3.6%
I find it hard to remember what I have eaten throughout the day	Never	50	22.9%	51	18.0%	205	22.6%	156	35.9%	462	25.1%
	Rarely	89	40.8%	118	41.5%	428	47.2%	208	47.8%	843	45.7%
	Sometimes	63	28.9%	76	26.8%	178	19.6%	54	12.4%	371	20.1%
	Often	14	6.4%	35	12.3%	77	8.5%	14	3.2%	140	7.6%
	Always	2	0.9%	4	1.4%	18	2.0%	3	0.7%	27	1.5%
I am good at resisting tempting food	Never	12	5.5%	11	3.9%	14	1.5%	0	0.0%	37	2.0%
	Rarely	44	20.2%	67	23.6%	150	16.6%	17	3.9%	278	15.1%
	Sometimes	126	57.8%	178	62.7%	537	59.3%	160	36.8%	1001	54.3%
	Often	34	15.6%	27	9.5%	203	22.4%	238	54.7%	502	27.2%
	Always	2	0.9%	1	0.4%	2	0.2%	20	4.6%	25	1.4%
If I am not eating in the way I intend to I make changes	Never	4	1.8%	1	0.4%	6	0.7%	3	0.7%	14	0.8%
	Rarely	31	14.2%	42	14.8%	65	7.2%	37	8.5%	175	9.5%
	Sometimes	122	56.0%	176	62.0%	485	53.5%	117	26.9%	900	48.8%
	Often	52	23.9%	62	21.8%	310	34.2%	227	52.2%	651	35.3%
	Always	9	4.1%	3	1.1%	40	4.4%	51	11.7%	103	5.6%
Total score	Mean (SD)	2.99	(0.56)	2.81	(0.47)	3.12	(0.51)	3.61	(0.45)	3.17	(0.56)

Eating to Cope

People sometimes eat for reasons other than hunger, which is linked with challenges managing weight. A key reason is emotion-focused coping, namely, consuming tempting foods as a way to cope with negative emotions or problems. We asked people how often they consumed tempting foods to cope with emotions.

- **Total scores by stage of change for weight loss:** Survey participants who were planning to start managing their weight again had eating to cope scores in the top 5% (95th percentile rank; 3.4/5) while those who were still active were in the top 10% (90th percentile rank; 3.1/5) and those who felt successful were in the top 20% (80th percentile rank; 2.6/5; see Table 5). Scores at the 80th percentile (scores ≥2.6) reflect eating tempting foods (i.e., calorie-dense, unhealthy foods) to cope well above the

population mean. Therefore, people who are successfully managing their weight are less likely to eat tempting foods as a way of coping with negative emotions or problems compared to those planning to start or actively trying to manage their weight.

- **Individual items for overall sample:** About one in five (22.8%) survey participants ate tempting foods to *cheer up when in a bad mood* half or most of the time, and about the same proportion (19.6%) ate tempting foods to *lower their stress* half or most of the time.
- **Individual items by demographics:** One in four (24%) of females ate tempting foods to *cheer up when in a bad mood* half or most of the time relative to one in six (15.6%) males. One in five (20.4%) females ate tempting foods to *lower their stress* half or most of the time compared to one in seven (14.4%) males.
- **Individual items by stage of change for weight loss:** One third (32.8%) of the survey participants who were planning to start managing their weight again ate tempting foods *to cheer up when in a bad mood* half or most of the time relative to 23.9% of those who were still actively managing their weight and 14% of those successfully managing their weight. About one in four (27.5%) of the survey participants who were planning to start again ate tempting foods to *lower their stress half* or most of the time relative to 18.6% of those who were still active and 15.9% of those who were successfully managing their weight.
- **In summary,** those successfully managing their weight were less likely to eat tempting foods to cheer up or lower their stress.

Table 5: Eating to cope mean total scores and responses to individual items by stage of change for weight loss.

I consume tempting foods...	Response	Disengaged or early stages n=218		Planning to start again n=284		Still active n=906		Successful n=435		Total N=1843	
		N	%	N	%	N	%	N	%	N	%
To forget my worries	Never	33	15.1%	34	12.0%	150	16.6%	105	24.1%	322	17.5%
	Almost never	41	18.8%	53	18.7%	200	22.1%	127	29.2%	421	22.8%
	Some of the time	76	34.9%	99	34.9%	321	35.4%	136	31.3%	632	34.3%
	Half of the time	18	8.3%	33	11.6%	82	9.1%	21	4.8%	154	8.4%
	Most of the time	31	14.2%	33	11.6%	91	10.0%	35	8.0%	190	10.3%
	Almost always	16	7.3%	22	7.7%	47	5.2%	10	2.3%	95	5.2%
	Always	3	1.4%	10	3.5%	15	1.7%	1	0.2%	29	1.6%
Because it helps me when I feel depressed or nervous	Never	26	11.9%	29	10.2%	138	15.2%	109	25.1%	302	16.4%
	Almost never	46	21.1%	43	15.1%	176	19.4%	95	21.8%	360	19.5%
	Some of the time	60	27.5%	94	33.1%	294	32.5%	148	34.0%	596	32.3%
	Half of the time	26	11.9%	28	9.9%	87	9.6%	18	4.1%	159	8.6%
	Most of the time	29	13.3%	50	17.6%	120	13.2%	44	10.1%	243	13.2%
	Almost always	22	10.1%	26	9.2%	65	7.2%	15	3.4%	128	6.9%
	Always	9	4.1%	14	4.9%	26	2.9%	6	1.4%	55	3.0%
To cheer up when I am in a bad mood	Never	31	14.2%	29	10.2%	109	12.0%	97	22.3%	266	14.4%
	Almost never	41	18.8%	42	14.8%	163	18.0%	112	25.7%	358	19.4%
	Some of the time	73	33.5%	86	30.3%	329	36.3%	143	32.9%	631	34.2%
	Half of the time	25	11.5%	36	12.7%	100	11.0%	30	6.9%	191	10.4%
	Most of the time	24	11.0%	57	20.1%	117	12.9%	31	7.1%	229	12.4%
	Almost always	17	7.8%	16	5.6%	63	7.0%	18	4.1%	114	6.2%
	Always	7	3.2%	18	6.3%	25	2.8%	4	0.9%	54	2.9%
Because it helps to lower my stress	Never	29	13.3%	30	10.6%	133	14.7%	103	23.7%	295	16.0%
	Almost never	42	19.3%	48	16.9%	215	23.7%	122	28.0%	427	23.2%
	Some of the time	75	34.4%	92	32.4%	300	33.1%	124	28.5%	591	32.1%
	Half of the time	21	9.6%	34	12.0%	73	8.1%	30	6.9%	158	8.6%
	Most of the time	25	11.5%	44	15.5%	95	10.5%	39	9.0%	203	11.0%
	Almost always	16	7.3%	25	8.8%	65	7.2%	12	2.8%	118	6.4%
	Always	10	4.6%	11	3.9%	25	2.8%	5	1.1%	51	2.8%
To forget about my problems	Never	39	17.9%	55	19.4%	210	23.2%	142	32.6%	446	24.2%
	Almost never	63	28.9%	67	23.6%	266	29.4%	132	30.3%	528	28.6%
	Some of the time	71	32.6%	85	29.9%	228	25.2%	96	22.1%	480	26.0%
	Half of the time	16	7.3%	20	7.0%	60	6.6%	20	4.6%	116	6.3%
	Most of the time	11	5.0%	28	9.9%	70	7.7%	33	7.6%	142	7.7%
	Almost always	12	5.5%	11	3.9%	55	6.1%	10	2.3%	88	4.8%
	Always	6	2.8%	18	6.3%	17	1.9%	2	0.5%	43	2.3%
Total score	Mean (SD)	3.17	(1.39)	3.39	(1.42)	3.05	(1.35)	2.56	(1.2)	3.0	(1.36)

Emotional Eating

We examined how specific types of emotions affect *how much* people eat. Emotions were categorised as positive emotions (happiness), negative low arousing emotions (sadness) and negative high arousing emotions (anger and anxiety). Mean scores were used to evaluate if someone eats less than usual (lower scores = < 3), the same amount as usual (moderate scores = 3) or more than usual (higher scores = > 3).

- **Eating in response to sadness and happiness for overall sample:** Amongst all survey participants, people ate less than usual (2.6; scores < 3) when happy, particularly females (2.5), and ate more than usual when sad (3.5; scores > 3) particularly for those planning to start again (3.7). Overall, people ate the same amount as usual when angry or anxious (=3), but it differed by stage of change (see Table 6).

- **Eating in response to anger by stage of change for weight loss:** When feeling angry (e.g., furious, upset, irritated, jealous), people who were planning to start managing their weight again ate more than usual (3.1), while those in the early stages or still actively managing their weight ate the same amount as usual (3) and those who were successfully managing their weight ate less than usual (2.9).

- **Eating in response to anxiety by stage of change for weight loss:** When feeling anxious (e.g., worried, tense, uneasy or nervous), people who were planning to start again ate more than usual (3.1), while those in the early stages or still active (3.0) ate the same amount as usual and those who were successfully managing their weight ate less than usual (2.8).

- **In summary,** everyone ate less food than usual when experiencing positive emotions (happiness) and low arousal negative emotions (sadness), but the amount of food eaten in response to high arousal negative emotions (anger, anxiety) differed by stage of change for weight loss. People successfully managing their weight tended to eat less when feeling angry or anxious, while those planning to start again tended to eat more, and those in the early stages/disengaged or still active ate the same amount.

Table 6: Emotional eating scores for each emotional eating category by gender and stage of change for weight loss.

| | Emotional Eating Category | | | | | | | | | | | |
| | Happiness score | | | Sadness score | | | Anger score | | | Anxious score | | |
	N	M	SD	N	M	SD	N	M	SD	N	M	SD
Gender												
Male	256	2.8	0.53	256	3.4	0.57	256	2.9	0.65	256	3.0	0.7
Female	1579	2.5	0.62	1579	3.6	0.61	1579	3.0	0.73	1579	3.0	0.82
Other/missing	8	2.7	0.48	8	3.5	0.7	8	2.9	1.04	8	2.9	0.67
Stage of change for weight loss												
Disengaged/early stages	218	2.6	0.56	218	3.6	0.56	218	3.0	0.68	218	3.0	0.82
Planning to start again	284	2.5	0.58	284	3.7	0.62	284	3.1	0.79	284	3.1	0.85
Still active	906	2.5	0.62	906	3.5	0.64	906	3.0	0.73	906	3.0	0.81
Successful	435	2.6	0.63	435	3.4	0.53	435	2.9	0.65	435	2.8	0.73
Total Score	1843	2.6	0.61	1843	3.5	0.61	1843	3.0	0.72	1843	3.0	0.81

We also examined responses to individual emotions (i.e., all 20 different emotions with five per category):

- **Overall:** Nearly half (46.1%) of the sample ate less/much less than usual when feeling happy, while three quarters of the sample ate more/much more than usual when feeling bored (75.8%), and over half ate more/much more than usual when feeling depressed (55.3%), and, finally, over a third ate more/much more than usual when feeling anxious (33.2%) or upset (38.4%; see Table 7).

- **Eating in response to happiness by stage of change:** When feeling happy (e.g., optimistic) most participants in the early stages of weight management (49.6%) or still actively managing their weight (49.5%) *ate less/much less than usual*, while most of those who were planning to start again (51.4%) or successfully managing their weight (60.7%) *ate just as much as usual*.

- **Eating in response to sadness by stage of change:** When feeling sad (e.g., lonely), most participants who were planning to start again (62.7%), and about half of those still active (54.7%), or in the early stages (53.7%) *ate more or much more than usual*, while 46.9% of those who felt successful *ate just as much as usual*.

- **Eating in response to anger by stage of change:** When feeling angry (e.g., upset), about half of the participants who were planning to start again (46.8%), and one in four who were still active (39.8%), or

in the early stages (39.0%) *ate more/much more than usual*. Similarly, one in four (41.1%) of those who felt successful *ate just as much as usual*.

- **Eating in response to anxiety by stage of change:** When feeling anxious (e.g., worried), most 44.4% of participants who were planning to start managing their weight again, 39.8% of those still active (39.8%), and 37.6% of those in the early stages *ate more/much more than usual*, while 44.4% of those who were successfully managing their weight *ate just as much as usual*.

- **In summary,** those successfully managing their weight tended to eat the same amount of food as usual regardless of how they were feeling, which indicates that their food intake was less influenced by their emotions. In contrast, those in the early stages, planning to start again, or still actively managing their weight tended to overeat when feeling sad, angry, or anxious and tended to undereat when feeling happy, which indicates that their food intake was influenced by their emotions, and this could make it more challenging to manage weight.

Table 7: Eating in response to individual emotions by stage of change for weight loss.

		Disengaged or early stages		Planning to start again		Still active		Successful		Total	
		N	%	N	%	N	%	N	%	N	%
HAPPY											
When I feel optimistic	I eat much less	18	8.3%	33	11.6%	115	12.7%	55	12.6%	221	12.0%
	I eat less than usual	90	41.3%	101	35.6%	333	36.8%	105	24.1%	629	34.1%
	I eat just as much	106	48.6%	146	51.4%	431	47.6%	264	60.7%	947	51.4%
	I eat more than usual	3	1.4%	1	0.4%	27	3.0%	10	2.3%	41	2.2%
	I eat much more than usual	1	0.5%	3	1.1%	0	0.0%	1	0.2%	5	0.3%
When I am happy	I eat much less	13	6.0%	19	6.7%	86	9.5%	40	9.2%	158	8.6%
	I eat less than usual	67	30.7%	94	33.1%	278	30.7%	95	21.8%	534	29.0%
	I eat just as much	132	60.6%	165	58.1%	496	54.7%	280	64.4%	1073	58.2%
	I eat more than usual	5	2.3%	5	1.8%	46	5.1%	20	4.6%	76	4.1%
	I eat much more than usual	1	0.5%	1	0.4%	0	0.0%	0	0.0%	2	0.1%
When I am cheerful	I eat much less	10	4.6%	18	6.3%	77	8.5%	37	8.5%	142	7.7%
	I eat less than usual	62	28.4%	93	32.7%	266	29.4%	90	20.7%	511	27.7%
	I eat just as much	139	63.8%	170	59.9%	523	57.7%	295	67.8%	1127	61.2%
	I eat more than usual	6	2.8%	2	0.7%	40	4.4%	13	3.0%	61	3.3%
	I eat much more than usual	1	0.5%	1	0.4%	0	0.0%	0	0.0%	2	0.1%
When I am proud	I eat much less	12	5.5%	24	8.5%	84	9.3%	40	9.2%	160	8.7%
	I eat less than usual	58	26.6%	83	29.2%	250	27.6%	85	19.5%	476	25.8%
	I eat just as much	142	65.1%	172	60.6%	536	59.2%	292	67.1%	1142	62.0%
	I eat more than usual	5	2.3%	3	1.1%	35	3.9%	18	4.1%	61	3.3%
	I eat much more than usual	1	0.5%	2	0.7%	1	0.1%	0	0.0%	4	0.2%
When I feel confident	I eat much less	13	6.0%	22	7.7%	93	10.3%	38	8.7%	166	9.0%
	I eat less than usual	67	30.7%	90	31.7%	306	33.8%	111	25.5%	574	31.1%
	I eat just as much	133	61.0%	169	59.5%	492	54.3%	279	64.1%	1073	58.2%
	I eat more than usual	4	1.8%	2	0.7%	15	1.7%	7	1.6%	28	1.5%
	I eat much more than usual	1	0.5%	1	0.4%	0	0.0%	0	0.0%	2	0.1%
SAD											
When I feel lonely	I eat much less	1	0.5%	2	0.7%	13	1.4%	4	0.9%	20	1.1%
	I eat less than usual	11	5.0%	13	4.6%	54	6.0%	28	6.4%	106	5.8%
	I eat just as much	89	40.8%	91	32.0%	343	37.9%	204	46.9%	727	39.4%
	I eat more than usual	107	49.1%	144	50.7%	443	48.9%	191	43.9%	885	48.0%
	I eat much more than usual	10	4.6%	34	12.0%	53	5.8%	8	1.8%	105	5.7%
When I am depressed	I eat much less	7	3.2%	4	1.4%	22	2.4%	11	2.5%	44	2.4%
	I eat less than usual	13	6.0%	19	6.7%	66	7.3%	42	9.7%	140	7.6%
	I eat just as much	69	31.7%	88	31.0%	303	33.4%	181	41.6%	641	34.8%
	I eat more than usual	103	47.2%	128	45.1%	427	47.1%	189	43.4%	847	46.0%
	I eat much more than usual	26	11.9%	45	15.8%	88	9.7%	12	2.8%	171	9.3%
When I am sad	I eat much less	7	3.2%	5	1.8%	34	3.8%	10	2.3%	56	3.0%
	I eat less than usual	27	12.4%	26	9.2%	112	12.4%	69	15.9%	234	12.7%
	I eat just as much	67	30.7%	92	32.4%	309	34.1%	185	42.5%	653	35.4%
	I eat more than usual	97	44.5%	126	44.4%	383	42.3%	157	36.1%	763	41.4%
	I eat much more than usual	20	9.2%	35	12.3%	68	7.5%	14	3.2%	137	7.4%
When I am bored	I eat much less	1	0.5%	1	0.4%	8	0.9%	1	0.2%	11	0.6%
	I eat less than usual	0	0.0%	1	0.4%	21	2.3%	12	2.8%	34	1.8%
	I eat just as much	45	20.6%	40	14.1%	193	21.3%	123	28.3%	401	21.8%
	I eat more than usual	121	55.5%	175	61.6%	503	55.5%	253	58.2%	1052	57.1%
	I eat much more than usual	51	23.4%	67	23.6%	181	20.0%	46	10.6%	345	18.7%
When I am frustrated	I eat much less	4	1.8%	2	0.7%	18	2.0%	9	2.1%	33	1.8%
	I eat less than usual	12	5.5%	22	7.7%	79	8.7%	44	10.1%	157	8.5%
	I eat just as much	117	53.7%	135	47.5%	445	49.1%	245	56.3%	942	51.1%
	I eat more than usual	71	32.6%	94	33.1%	295	32.6%	126	29.0%	586	31.8%
	I eat much more than usual	14	6.4%	31	10.9%	69	7.6%	11	2.5%	125	6.8%
ANGER											
When I am furious	I eat much less	14	6.4%	26	9.2%	74	8.2%	43	9.9%	157	8.5%
	I eat less than usual	59	27.1%	60	21.1%	219	24.2%	103	23.7%	441	23.9%
	I eat just as much	102	46.8%	130	45.8%	420	46.4%	217	49.9%	869	47.2%
	I eat more than usual	34	15.6%	48	16.9%	142	15.7%	64	14.7%	288	15.6%
	I eat much more than usual	9	4.1%	20	7.0%	51	5.6%	8	1.8%	88	4.8%
When I am angry	I eat much less	12	5.5%	26	9.2%	78	8.6%	39	9.0%	155	8.4%
	I eat less than usual	62	28.4%	58	20.4%	215	23.7%	109	25.1%	444	24.1%
	I eat just as much	105	48.2%	129	45.4%	408	45.0%	208	47.8%	850	46.1%
	I eat more than usual	30	13.8%	53	18.7%	156	17.2%	71	16.3%	310	16.8%
	I eat much more than usual	9	4.1%	18	6.3%	49	5.4%	8	1.8%	84	4.6%
When I am irritated	I eat much less	5	2.3%	15	5.3%	40	4.4%	18	4.1%	78	4.2%
	I eat less than usual	45	20.6%	38	13.4%	166	18.3%	83	19.1%	332	18.0%
	I eat just as much	114	52.3%	145	51.1%	475	52.4%	248	57.0%	982	53.3%
	I eat more than usual	47	21.6%	68	23.9%	191	21.1%	82	18.9%	388	21.1%
	I eat much more than usual	7	3.2%	18	6.3%	34	3.8%	4	0.9%	63	3.4%

When I am upset	I eat much less	11	5.0%	13	4.6%	59	6.5%	25	5.7%	108	5.9%
	I eat less than usual	49	22.5%	49	17.3%	181	20.0%	103	23.7%	382	20.7%
	I eat just as much	73	33.5%	89	31.3%	305	33.7%	179	41.1%	646	35.1%
	I eat more than usual	72	33.0%	110	38.7%	302	33.3%	120	27.6%	604	32.8%
	I eat much more than usual	13	6.0%	23	8.1%	59	6.5%	8	1.8%	103	5.6%
When I am jealous	I eat much less	10	4.6%	17	6.0%	50	5.5%	19	4.4%	96	5.2%
	I eat less than usual	28	12.8%	27	9.5%	110	12.1%	52	12.0%	217	11.8%
	I eat just as much	156	71.6%	193	68.0%	652	72.0%	326	74.9%	1327	72.0%
	I eat more than usual	18	8.3%	37	13.0%	78	8.6%	37	8.5%	170	9.2%
	I eat much more than usual	6	2.8%	10	3.5%	16	1.8%	1	0.2%	33	1.8%
ANXIOUS											
When I am tense	I eat much less	8	3.7%	13	4.6%	39	4.3%	15	3.4%	75	4.1%
	I eat less than usual	51	23.4%	60	21.1%	179	19.8%	106	24.4%	396	21.5%
	I eat just as much	96	44.0%	110	38.7%	419	46.2%	212	48.7%	837	45.4%
	I eat more than usual	52	23.9%	83	29.2%	238	26.3%	98	22.5%	471	25.6%
	I eat much more than usual	11	5.0%	18	6.3%	31	3.4%	4	0.9%	64	3.5%
When I am anxious	I eat much less	10	4.6%	14	4.9%	60	6.6%	30	6.9%	114	6.2%
	I eat less than usual	57	26.1%	60	21.1%	199	22.0%	112	25.7%	428	23.2%
	I eat just as much	73	33.5%	94	33.1%	343	37.9%	178	40.9%	688	37.3%
	I eat more than usual	67	30.7%	84	29.6%	253	27.9%	109	25.1%	513	27.8%
	I eat much more than usual	11	5.0%	32	11.3%	51	5.6%	6	1.4%	100	5.4%
When I am worried	I eat much less	9	4.1%	10	3.5%	54	6.0%	31	7.1%	104	5.6%
	I eat less than usual	51	23.4%	56	19.7%	204	22.5%	108	24.8%	419	22.7%
	I eat just as much	76	34.9%	92	32.4%	346	38.2%	193	44.4%	707	38.4%
	I eat more than usual	65	29.8%	98	34.5%	259	28.6%	93	21.4%	515	27.9%
	I eat much more than usual	17	7.8%	28	9.9%	43	4.7%	10	2.3%	98	5.3%
When I am nervous	I eat much less	12	5.5%	16	5.6%	62	6.8%	38	8.7%	128	6.9%
	I eat less than usual	73	33.5%	67	23.6%	263	29.0%	126	29.0%	529	28.7%
	I eat just as much	80	36.7%	114	40.1%	374	41.3%	190	43.7%	758	41.1%
	I eat more than usual	42	19.3%	71	25.0%	176	19.4%	77	17.7%	366	19.9%
	I eat much more than usual	11	5.0%	16	5.6%	31	3.4%	4	0.9%	62	3.4%
When I feel uneasy	I eat much less	12	5.5%	14	4.9%	53	5.8%	33	7.6%	112	6.1%
	I eat less than usual	67	30.7%	65	22.9%	269	29.7%	123	28.3%	524	28.4%
	I eat just as much	98	45.0%	117	41.2%	386	42.6%	206	47.4%	807	43.8%
	I eat more than usual	32	14.7%	74	26.1%	173	19.1%	70	16.1%	349	18.9%
	I eat much more than usual	9	4.1%	14	4.9%	25	2.8%	3	0.7%	51	2.8%

Top Healthy Eating Habits

Survey participants provided their top healthy eating habits. Analysing the themes from this question suggested the top tips provided by survey participants were similar between the whole sample and those who felt they were successfully managing their weight. The top 5 tips were (listed in order of frequency mentioned):

1. Meal planning and preparation
   a. Meal preparation: Preparing meals ahead of time, including batch cooking or prepping ingredients to make healthy eating easier.
   b. Meal Planning: Planning meals ahead of time to ensure balanced and healthy eating, including making shopping lists or meal plans for the week.
   c. Cooking at home: Use fresh ingredients to ensure healthier choices and control over what is consumed.
   d. Regular Meals: Eating meals at consistent times throughout the day.
   e. Breakfast Habits: Consuming a healthy and substantial breakfast regularly.
2. Meal composition and choices
   a. Vegetable Consumption: Eating vegetables regularly, incorporating a variety of vegetables into meals.
   b. Fruit Consumption: Eating fruit regularly, aiming for multiple servings of fruit daily.
   c. Whole Foods: Choosing unprocessed or minimally processed foods in their natural state.
   d. Balanced Meals: Ensuring meals include a balance of different food groups such as protein, vegetables, and whole grains.
3. Portion control
   a. Managing potions: Regulating the amount of food consumed in one sitting or being mindful of controlling portion sizes, including strategies such as measuring food.
   b. Avoiding overeating: Using strategies to avoid overeating including stopping when full or not eating out of boredom.
4. Snacking habits
   a. Healthy Snacks: Choosing nutritious snacks, such as fruits, vegetables, nuts, or other nutritious options.
   b. Controlled Snacking: Limiting the frequency, quantity and portion size of snacks to maintain a healthy diet.
5. Mindful eating
   a. Intuitive Eating: Eating based on hunger and fullness cues rather than external dietary rules or cues.
   b. Avoiding Junk Food: Making a conscious effort to limit or eliminate the consumption of highly processed, unhealthy foods, junk foods, or sugary treats.
   c. Conscious Choices: Being mindful about food choices, including thinking about what and when to eat.
   d. Tracking Intake: Using a food diary or app to monitor what is consumed.

Note: There were other themes identified that related to dietary restrictions or special diets (e.g., low-carb, low-sugar, low-fat, vegetarian/vegan, CSIRO TWD diet), intermittent fasting, and hydration. We have chosen to focus on more general tips for the population.

Top Tips for Making Healthy Eating Habits

Survey participants also provided the following tips for making healthy eating habits. The top 5 tips were (listed in order of frequency mentioned):

1. Tracking and Monitoring
   a. Writing it down: Keeping a written log of food intake, physical activity, or other health-related behaviours to track progress and identify patterns.
   b. Tracking or logging food intake: Monitoring the types and amounts of food consumed each day to ensure adherence to dietary goals using planners or digital/mobile apps to document daily food consumption and plan future meals.
   c. Monitoring progress: Regularly checking and recording progress toward health goals, such as weight loss or increased fitness levels.
2. Support and Accountability
   a. Support from family and friends: Relying on encouragement and assistance from family and friends to help stay accountable to health goals.
   b. Support networks: Joining groups or communities that provide mutual support.
   c. Talking with others: Discussing goals and progress with others to stay motivated.
   d. Role models: Seeking inspiration from individuals who exemplify healthy habits.
   e. Emotional and psychological support: Seeking professional help for emotional and psychological aspects of healthy living.
3. Environment and Accessibility
   a. Stocking healthy foods: Keeping a supply of nutritious foods at home to support healthy eating.
   b. Accessibility of healthy options: Making healthy foods easy to access and consume.
   c. Home environment: Creating a home environment that supports healthy habits and behaviours.
   d. Make healthy food more accessible in the house than unhealthy food: Ensuring that healthy options are more visible and easily accessible than unhealthy ones.
4. Motivation and Mindset
   a. Motivation: The internal drive or desire to pursue and maintain healthy habits.
   b. Willpower: The ability to exert self-control to resist temptations and adhere to healthy behaviours.
   c. Positive thinking: Maintaining an optimistic outlook to support the pursuit of health goals.
   d. Self-talk and affirmations: Using positive language and affirmations to reinforce commitment to healthy behaviours.
   e. Viewing food as an investment: Seeing healthy eating as an investment in long-term health and well-being.
   f. Health-focused mindset: Prioritizing health in daily decisions and behaviours.
   g. Positive attitude towards food: Maintaining a positive perspective on healthy eating and viewing it as enjoyable.
5. Positive Reinforcement
   a. Positive reminders: Using reminders to reinforce positive behaviours and health goals.
   b. Feeling good about choices: Focusing on the positive feelings associated with making healthy choices.
   c. Rewards and recognition: Rewarding oneself for achieving health goals to stay motivated.
   d. Use positive results as motivation: Leveraging positive outcomes to reinforce commitment to health goals.
   e. Celebrate small wins: Recognizing and celebrating small achievements to stay motivated.

Top Unhealthy Eating Habits

Survey participants also provided insights into their unhealthy eating habits. The most common unhealthy habits were (listed in order of frequency mentioned):

1. Alcohol and Sugar Consumption
    a. Wine: Drinking wine regularly, often with meals or in the evening often leading to excessive caloric intake.
    b. General Alcohol: Drinking other forms of alcohol regularly such as beer, spirits, or cocktails.
    c. Sugary beverages: Drinking beverages high in sugar such as sodas, iced coffee, and sweetened tea.
    d. Sweet treats: Consuming chocolate, sweets, desserts and other sugary treats often in large quantities.
2. Snacking
    a. Unhealthy: Eating snacks that are high in sugar, fat, or salt and provide little nutritional value.
    b. Late Night Snacking: Eating snacks late in the evening or at night, often before bed.
    c. Mindless Snacking: Eating snacks without paying attention, often while doing other activities like watching TV.
3. Overeating or Skipping Meals
    a. Portion Control: Issues with controlling portion sizes.
    b. Mindless Eating: Eating without being mindful, often out of habit or boredom.
    c. Binge Eating: Consuming large quantities of food in a short period.
    d. Skipping Main Meals: Not eating regular meals, leading to potential overeating later or poor nutritional intake.
4. Convenience Foods
    a. Takeaway/Processed Foods: Consuming takeout or fast food frequently due to time constraints or lack of preparation.
    b. Easy/Quick Foods: Relying on processed, ready-made foods that are easy and quick to prepare.
5. Emotional Eating
    a. Stress Eating: Eating as a coping mechanism due to stress or anxiety.
    b. Boredom Eating: Eating out of boredom rather than hunger.
    c. Comfort Eating: Eating to seek comfort during times of sadness or emotional distress.

Top Tips for Breaking Unhealthy Eating Habits

Survey participants also provided the following tips to break unhealthy eating habits. The top 5 tips were (listed in order of frequency mentioned):

1. Removing Temptations
   a. Unhealthy foods at home: Not buying or avoiding keeping unhealthy foods in the home to reduce temptation.
   b. Avoiding junk food: Steering clear of junk food and unhealthy snacks.
   c. Removing temptations: Eliminating access to foods or situations that may lead to unhealthy eating.
2. Small Steps
   a. Gradual Change: Implementing changes slowly over time.
   b. Manageable Goals: Setting small, achievable targets.
   c. One Step at a Time: Taking incremental actions to improve habits.
3. Consistency
   a. Routine: Establishing a regular pattern of behaviour.
   b. Regular Effort: Making continuous and sustained efforts to maintain healthy habits.
   c. Persistence: Continuing efforts despite difficulties or setbacks.
4. Distraction
   a. Alternative Activities: Doing something different to avoid thinking about food.
   b. Keeping Busy: Staying occupied to prevent boredom eating.
   c. Hobbies: Engaging in personal interests to distract from cravings.
5. Awareness
   a. Mindful Eating: Paying attention to the eating experience and signals of hunger and fullness.
   b. Reflecting on Habits: Thinking about and analysing eating patterns.
   c. Conscious Choices: Making deliberate decisions about what and when to eat.

Considerations and Conclusions

This report presents the findings from a survey of a sample of the CSIRO Total Wellbeing Diet (TWD) Online members. Data was provided by members who responded to an email and volunteered to complete an online survey about habits, self-regulation, emotional eating, stages of change for weight loss, top healthy and unhealthy habits, and strategies for making healthy or breaking unhealthy eating habits. As with many health-related surveys, females were more likely to participate than men and made up most of the sample. Given the nature of the sample and reliance on self-reported information, there is likely to be bias in the responses and these findings should be interpreted with caution. Participants who completed the survey were likely to be more health conscious, and possibly more likely to have experienced health benefits from the program than the general population. Nevertheless, nearly 2000 people completed the survey, which is considered adequate to gain an understanding of the psychological influences on weight management in a sample of members from the CSIRO TWD Online.

Overall, the knowledge gained about eating habits in members of an online dietary program have made a valuable contribution to the scientific literature and helped us to better understand not only what, but why people eat what they eat and how they manage their weight. The results of this project may help to inform the evolution of the CSIRO TWD Online and other lifestyle and behaviour change programs in the future as well as a psychological survey tool. This online survey tool will be freely available to the community and will be the first of its kind to support Australians to become more aware of their eating habits as well as providing tailored strategies for building better eating habits. The insights will also inform ways that programs such as the CSIRO TWD online can be personalised based on psychological influences on weight management to improve members' likelihood of successful weight loss.