Menu labeling and health literacy among the Deep South: An examination of 2016 Behavioral Risk Factor Surveillance System (BRFSS)

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According to the CDC, foods prepared in restaurants are generally more caloric, higher in fat, sodium, and sugar than foods prepared in the home (CDC, 2014). Individuals who are unable to comprehend menu labels tend to have unhealthier eating compared to individuals with higher health literacy. This study investigates the association between utilizing menu labeling to make food intake decisions and health literacy among residents in Mississippi. Using data from approximately 3,998 adults from Mississippi who participated in the 2016 Behavioral Risk Factor Surveillance System (BRFSS), the proportion of participants self-reporting using menu labeling for food intake and ease or difficulty with 'health literacy' was assessed. Following, the bivariate independent association between using menu labeling for food decisions and health literacy measures were investigated. Findings indicate that 36.1% of respondents never used menu labeling to make food decisions and 11.2% could not find menu labeling. Participants self-reporting never using menu labeling, also reported not looking for health information (45.9%) (p<; 0.0001) and 39.8% reported difficulty understanding health professionals (p = 0.0006). Never use of menu labeling was also associated with difficulty understanding written health information (p<; 0.0001). Healthy People 2030 HC/HIT-R01 is designated to increase health literacy of the population (ODPHP, 2023). Findings highlight the importance of improving health literacy to increase menu label use in food intake decisions among adults in Mississippi. Findings support development of nutrition literacy programs that will foster health knowledge in adults, to promote weight management, and food practices.