THE FOOD AND MOOD PROJECT SURVEY

A SUMMARY OF THE FINDINGS

An exploration of dietary and nutritional self-help strategies used to improve emotional and mental health.

‘It is worth breaking through the ‘comfort zones’ to experience a greater well-being.’

Food and Mood survey participant

“Let food be your medicine and medicine be your food’

Hippocrates

Note: % means percentage, and n means the number of people that percentage represents. The statistics presented in this summary are based on the number of people who answered each question. A complete record of the findings is available in The Food and Mood Project Self-help Report (see details at the end of this Summary)
WHY WAS THIS SURVEY NEEDED?

Treatment for emotional and mental health problems mainly involves the use of medication and/or psychotherapy. Despite evidence suggesting that dietary and nutritional interventions can provide symptom relief and benefits to health, these approaches remain ‘alternative’ or ‘complementary’ and are not often used within mainstream medicine.

WHAT DID THE SURVEY AIM TO ACHIEVE?

The aim of this survey was to find out what dietary and nutritional self-help strategies some people are using, whether or not they felt this approach was of any benefit to their emotional and mental health, and to learn something of the overall experience of using this form of self-help.

HOW WAS THE SURVEY CONDUCTED?

The survey used a non-random sample of adults living independently in the community, taken from the Food and Mood Project database. A postal questionnaire survey collected quantitative and qualitative data that was then analysed.

WHO TOOK PART?

200 people of the 436 contacted returned a completed questionnaire. This was a very good response rate of 46%.

The people who took part in the survey were mainly women living in London or SE England, aged between 26-55 years. This profile is typical of people who tend to use complementary therapies. Most people who took part were in some kind of (full or part-time) paid employment. However, nearly one-third (32%, n = 64) was unemployed for a variety of reasons.

WHAT DID THE SURVEY SHOW?

88% (n = 165) of the survey participants, confirmed they had been using dietary and nutritional self-help strategies specifically to improve their emotional and mental health.

The type of self-help strategies the survey participants had used related to:

1) specific dietary strategies, that consisted of:
   a) cutting down or avoiding potential food ‘stressors’
   b) eating more potential food ‘supporters’
   c) making changes to eating habits
2) general dietary strategies (concerned with the overall approach or attitude to adopt)
3) nutritional supplements
Also provided by the survey participants were:

- a list of benefits experienced as a result of using these strategies
- brief accounts of the experience of the change process
- self-help recommendations to others wishing to use this form of self-help

Over one third (36% of people using this form of self-help, n = 59) said they were ‘very certain’ that the benefits they experienced were associated with the dietary or nutritional supplement changes they had made.

‘[I am] totally sure it was dietary related – nothing else externally changed that much – day to day – but I notice how I feel when I lapse with wheat, sugar, dairy – awful.’ Food and Mood Survey Participant

Cutting down or avoiding potential food ‘stressors’

The strategies found to be helpful were:

- Cutting down on sugar (80%, n = 132)
- Cutting down on caffeine (79%, n = 131)
- Cutting down on alcohol (55%, n = 91)
- Cutting down on chocolate (53%, n = 88)
- Cutting down on wheat-containing foods (48%, n = 79)
- Cutting down on additives (47%, n = 77)
- Cutting down on dairy (44%, n = 72)
- Cutting down on saturated fats (39%, n = 64)

  - The two self-help strategies most frequently found to be beneficial (i.e. ‘helpful’ or ‘very helpful’ to emotional or mental health) were cutting down on sugar (80%, n = 132) and cutting down on caffeine (79%, n = 131).

Increasing potential food ‘supporters’

The strategies found to be helpful were:

- Drinking more water (80%, n = 132)
- Eating more vegetables (78%, n = 129)
- Eating more fruit (72%, n = 119)
- Eating more oil rich fish (52%, n = 86)
- Eating more nuts and seeds (51%, n = 85)
- Eating more ‘brown’ (wholegrain) food (50%, n = 82)
- Eating more fibre (48%, n = 80)
- Eating more protein (41%, n = 67)
- Eating more organic food (36%, n = 59)

  - The most frequently reported beneficial self-help strategy in this section was drinking more water. This was found to be ‘helpful’ or ‘very helpful’ by 132 people (80%). Eating more vegetables (78%) and eating more fruit (72%) were also frequently reported as beneficial.
Making changes to eating habits

The strategies found to be helpful were:

- Eating regular meals and snacks (67%, n = 110)
- Being prepared – carrying snacks (56%, n = 93)
- Eating breakfast (55%, n = 90)
- Planning meals in advance (42%, n = 69)

- Eating regular meals and snacks was found to be ‘helpful’ or very helpful’ for improving emotional or mental health by 110 (67%) of the survey participants actively using dietary and nutritional self-help.

General dietary strategies

General dietary strategies found to be ‘helpful’ or ‘very helpful’ were:

- ‘Elimination and challenge’ (64%, n = 106)
- Using a ‘rotation diet’ (49%, n = 81)
- Keeping a ‘food and mood’ diary (33%, n = 54)
- Adopting an ‘experimental’ approach (28%, n = 47)
- Recording weight changes (as a sign of food intolerance) (16%, n = 26)

- Cutting out a suspect problem food and then reintroducing it to see its effect - ‘elimination and challenge’ - was the general self-help strategy found to be ‘helpful’ or ‘very helpful’ by 106 people (64% of those actively using dietary and nutritional self-help).

Nutritional supplements

154 people (93%) had used nutritional supplements (e.g. vitamins, minerals, herbs, essential fats/oils, amino acids) specifically to help their emotional or mental health. Most people had used more than one type of supplement.

- Essential fatty acid (EFA) supplements were listed the most frequently (75 mentions) as a supplement that ‘definitely helped’ emotional or mental health. This represented 22% of the total response to this question.

- Taken together as a group the herbal supplements (including St John’s wort, Kava and other supplements such as gingko and ginseng) were also mentioned on 75 occasions (22% of the response) as being definitely helpful.
IMPROVEMENTS TO EMOTIONAL AND MENTAL HEALTH

The percentage/number of people in the survey actively using dietary or nutritional self-help who reported a ‘large improvement’ to the following health concerns (or that the ‘symptom had gone’) were as follows:

- Mood swings (26%, n = 42)
- Anxiety/panic attacks (26%, n = 42)
- Cravings/ food ‘addictions’ (24%, n = 40)
- Depression (including postnatal) (24%, n = 39)
- Irritable/aggressive feelings (22%, n = 36)
- Concentration/memory difficulties (19%, n = 31)
- Premenstrual syndrome (17%, n = 28)
- Obsessive/compulsive feelings (11%, n = 18)
- Hyperactive/manic feelings (9%, n = 15)
- Eating disorder (6%, n = 10)
- Psychotic ‘episodes’ (4%, n = 6)

- The greatest apparent improvement was reported to anxiety or panic attacks and mood swings, with 42 people (26%) saying these categories of symptoms had undergone a large improvement or had disappeared altogether.

EASY AND DIFFICULT CHANGES

- The two strategies that were mentioned on most occasions – both as an ‘easy change’ and as a ‘difficult change’ to make - were cutting down caffeine and cutting down sugar.
- Cutting down on sugar was found to be a difficult change by more people (n=39) than those who found it an easy change to make (n=13).
- The number of people who found that cutting down on caffeine was difficult (n=24) was almost equal in number to those who found this change to be easy (n=29).

Reasons why a change was easy to make

The largest category (54 mentions or 33% of the response to this question) for answers that said the reason for a change being easy to make was because ‘the effect of making the change was positive and quick’.

Two strategies were mentioned more often than any others; these were cutting down on caffeine and cutting down on wheat. Examples of typical responses in this category are as follows:

‘not eating bread because the effect was obvious within a couple of days’
‘reducing caffeine/coffee because very obvious anxiety rise when drank it, which is unpleasant’.

Food and Mood Survey participants
Reasons why a change was difficult to make

The largest category of reasons why a change was difficult to make related to **taste preferences** (76 mentions or 48%) and what, in almost half of the responses in this group, were described as **cravings and addictions**.

A typical response in this category was:

‘cutting out sugar because I’m totally addicted! I struggle constantly because there are too many temptations – bakeries and sweet shops when out, or petrol stations, my mother’s cooking!’

Food and Mood survey participant

SURVEY PARTICIPANTS’ RECOMMENDATIONS

The survey participants were asked for their recommendations to other people considering undertaking a similar self-help process.

Several themes emerged, all concerned with **the process** of exploring food and mood. The three main themes were:

1. **Getting motivated**

‘Try it! It is such a simple and harmless way to explore and it beats taking drugs as a first choice from the doctor’.
‘There is a definite link with food and mood, but I do lapse and when I do I feel noticeably different. Once you find out your triggers you can feel so much better.’

Food and Mood survey participants

2. **Practical approaches**

‘Try something just for one week e.g. no sugar/no caffeine. It is such an eye-opener.’
‘Go slowly, change one thing at a time and monitor the effects. Tell yourself: ‘if this does work I’ll know quickly – if it doesn’t I’ll try something else.”

Food and Mood survey participants

3. **Helpful attitudes**

‘Be honest with yourself- I always believed I was a healthy eater but the reality was different. My reality now matches and I follow it, the result is a new me.’
‘Don’t give up. Whatever you find out will help long term – things will not happen overnight and there is only you that can appreciate your condition.’

Food and Mood survey participants
WHAT CONCLUSIONS HAVE BEEN DRAWN?

These survey findings show that a dietary or nutritional self-help approach was being used by most of the survey participants and specific self-help strategies were found to be beneficial by up to 80% of these people.

With over one-third of survey participants ‘very certain’ that the benefits they experienced were the result of this approach, further research into the use of dietary and nutritional self-help for improving emotional and mental health would appear justified.

This survey was undertaken by The Food and Mood Project, a self-funding educational and consultancy service founded by Amanda Geary in 1998 with a Millennium Award from Mind, the UK mental health charity. This research was part funded by a grant from the Cyril Corden Trust.

More information about this survey is available from:

The Food and Mood Self-help Report

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