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# Manager's Perspectives on the Provision of Healthy Meals in Resort Hotels

## **Abstract**

This research aimed to understand hotel managers' attitudes toward the provision of healthy meals. The study deployed a mailing survey to assess the managers' perceptions. A closed-ended questionnaire was developed evaluating the role of healthy food choices in Mediterranean resort hotels. The findings showed that (1) atmosphere in the restaurant, (2) appealing display of food, and (3) eating habits and lifestyle were more important than personal health when selecting a meal. In addition, this study suggested that the managers were not ready to promote healthy eating because their customers would have been critical of this new service concept

## **Keywords**

Joseph Chen, Food and Beverage

# Manager's Perspectives on the Provision of Healthy Meals in Resort Hotels

By Joseph S. Chen, Willy Legrand and Philip Sloan

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## INTRODUCTION

Practically every aspect of restaurant operations depends on the menu. It is generally considered to be the most important restaurant business document (Schaetzing, 1994; Waller, 1999; Ninemeier, 2000; Davis, Lockwood, & Stone, 2001; Dittmer, 2003; Miller, Hayes, & Dopson, 2005). Restaurant design, food procurement, production, cost, and labor management are all based on the menu. The menu is also a prime sales tool, but little research has discussed the considerations in developing menus that adapt to changing market expectations (e.g., healthy meals).

Indeed, healthy food has emerged as a fast-developing market sector (Hollingsworth, 2000; Willer & Yussefi, 2004). This emerging demand concerning healthy eating seems to be influenced by consumers' awareness of health issues such as obesity, which has become a major health concern worldwide. For example, in the 20 years prior to this research, the number of obese people in Europe tripled. In 2006, the World Health Organization (WHO) calculated that 130 million people were obese; approximately 10%-20% of men and 15%-25% of women. In addition, 400 million Europeans were overweight (World Health Organization [WHO], 2006). Obesity affects not only adults but also children and adolescents; it is the most common health disorder among young Europeans. In 2006, about 20% of children in Europe were overweight, and a third of these were obese. According to the WHO, there will be about 150 million obese adults and 15 million obese children and adolescents in Europe in 2010.

The per capita cost of European obesity differs from country to country, but a clear pattern has emerged. In Spain, for example, the total cost attributable to obesity was estimated to be €2.5 billion per year (WHO, 2006). In Sweden, the direct cost of obesity was estimated to be € 28 per capita per year, with much higher indirect costs of € 115 per capita per year pertaining to lost working hours, premature loss of life, lowered productivity, and lost income. Calculations of direct costs in other countries showed similar annual per capita figures of up to € 22 in Germany, and € 14 in the Netherlands. The direct annual cost of obesity per capita in the United Kingdom rose from an estimated €6 per capita per year in 1998 to € 14-19 in 2002. Both Germany and the Netherlands had indirect costs in line with the example of Spain. While additional intangible costs, such as underachievement in school, discrimination at work, psycho-social problems, and poorer quality of life were more difficult to quantify in financial terms, they must also be considered (WHO, 2006).

Facing the health challenge of obesity, the back-to-earth movement, which originated in the 1970's, was first to criticize mass food consumption. At the turn of the 21<sup>st</sup> century, many in the Western world came to desire a healthy diet, so the food industry began to take this trend seriously ("Family Chains," 2006). However, hospitality industry professionals wishing to please existing customers and attract new markets found that creating and promoting menus offering healthy options requires careful planning and often specialized knowledge (Schaetzing, 1994;

Waller, 1999; Ninemeier, 2000; Davis, Lockwood, & Stone, 2001; Dittmer, 2003; Miller, Hayes, & Dopson, 2005).

To a great extent the restaurant industry bears some responsibility for bulging waistlines because in the last twenty years of the 20<sup>th</sup> century the public had steadily increased its visits to restaurants (Brackman, 2006). Between 1984 and 1993 the number of fast food restaurants in Great Britain roughly doubled; likewise the obesity rate among adults. In 2005 the British were found to eat more fast food than any other nationality in Western Europe; they also had the highest obesity rate ("Yum! Brands," 2005). In Germany, the country of origin of hamburgers, McDonald's was considered to be one of the most profitable overseas markets, with more than a thousand restaurants. Schlosser (2002) found that the Golden Arches had become so commonplace in Germany that they seemed almost invisible.

However, there has appeared a movement toward healthier food offerings by both the hotel and restaurant industries. Large international hotel brands have taken active steps in redesigning processes and procedures leading to menu improvements, which are, arguably, more than a marketing ploy. In 2006, Marriot International announced its plan to ban trans-fat, considered unhealthy, from its menus across the U.S., Canada, and Europe (Yu, 2007). InterContinental Hotels stated that some of its hotel brands had already replaced trans-fat oils in the cooking process (Yu, 2007). There is an increasing consumer perception that sandwiches are healthier than pizzas, which, in turn, are seen as healthier than fries (Brackman, 2007). Brackman also stated that US-style submarine sandwich chains grew noticeably in Europe and North America in 2006, with the Subway brand leading the way with more than 20,000 units and annual sales in excess of € 4.4b.

Guests arriving at food service operations have a variety of expectations and beliefs in all aspects of the dining experience they are about to enjoy. Many of their views on taste, comfort, and standards of service are clear in their minds and are based often on the accumulation of other restaurant experiences stretching back over the years. This is not often the case for the guest in pursuit of a healthy meal (Raine, 2005). When devising the menu, the manager needs to understand guest motivations for wishing to eat a balanced meal. Past research has examined whether the guest wishes to lose weight or become fitter, and whether his or her motivations are more altruistic, such as concern for ecology or animal welfare (Legrand & Sloan, 2006).

Many people feel that they should have a healthier diet but do not know where to start. They also feel their healthy meal experience would be enhanced by restaurants' providing nutritional information (Legrand & Sloan, 2006). The knowledge that hotel managers have in the field of nutrition is of paramount importance in the continuing effort to persuade consumers to change their eating habits and to seek out healthy food items when eating out. Visiting a restaurant where healthy food pleases the customers' palate and where the restaurant staff is able to encourage healthy choices not only adds to the restaurant experience but also leaves customers with a lasting reminder of good eating. A study by Rouslin and Vieria (1998) showed that healthful food will be accepted by customers only if the food appeals to the senses, looks exciting, and tastes good.

In research carried out in 1998, Reicher and Dalton found that factors of time, taste, and training still sometimes pose barriers to chefs wishing to prepare healthy food. Further, in their study, more than 50% of the chefs surveyed agreed or strongly agreed that recipe modification was time consuming. Many chefs (61%) were not convinced that food would taste good if current dietary guidelines were followed. The report recommended that nutritionists and chefs work more closely together as most chefs acknowledge having responsibility for the nutrient content of the dishes prepared and for providing nutrition information to customers. Research has shown that nutritional knowledge is a very important motivator for restaurant goers who wish to eat healthily (Legrand & Sloan, 2006). In 1998, Rouslin and Vieira found that restaurant

managers and chefs were becoming more nutritionally aware and responsive to customers' demands for healthful menu items. However, their research did not indicate whether restaurateurs regarded having healthy choices as a way to attract new customers. In research carried out by the British Soil Association (2006), the ten biggest chain restaurants in the U.K. failed to offer healthy choices. The report concluded that chain restaurant meals were high in salt, sugar, and fat, and offered little fresh fruit or vegetables.

The messages consumers give about healthy food preferences can be misleading. Believing that their health will benefit, supermarket customers often prefer purchasing margarine instead of butter, or wholemeal flour instead of white flour. Often the same customers relish dining on rich, creamy sauces and ice cream in a restaurant (Levine, 1999). Fitzpatrick, Chapman, and Barr (1997) researched customer preferences for fats in restaurants with some similarly surprising results. When questioned, customers gave a clear preference for low-fat menu items. However, the majority of restaurateurs reported that although customers say they want healthier menu items, they do not consistently select such items on restaurant menus (Jones, 1999). Taste remains an important issue when ordering food. Although an increasing number of restaurant patrons display an interest in health and nutrition, they still do not consistently translate this interest into selecting healthy menu options or asking for them when they are not presented on the menu (Johnson, Raab, Champaner, & Leontos, 2002).

Consequently, the choices customers make in restaurants depend on various factors, one being their origin, according to a cross-cultural survey on perceptions of food, body, and health by the French National Dairy Council (Centre Interprofessionnel de Documentation et d'Information Laitières [CIDIL], 2002). Italians and French generally focus on the pleasure of sharing mealtimes, whereas Americans suffer from acute nutritional anxiety (CIDIL, 2002). The research found that when it comes to rating the health benefits of foods, all nations tend to agree: Fruit and vegetables head the list, followed by fish. The exceptions are in France, where fish is replaced by traditional French cheeses, and Switzerland, where it shares third place with cereals. The British and Americans are suspicious of unpasteurized dairy products; conversely, Americans tend to see vitamin A and D boosts to milk as beneficial. Despite recent food-safety scares, the French, like the Germans and the Swiss, also rate meat highly as a healthy food. Although the demand for healthy meals has escalated, and some research on consumer perceptions and motivations has been undertaken, current hospitality literature has not adequately addressed the issue from a managerial point of view. Therefore, in an attempt to address the shortcomings of current literature, this research looks at the issues from the service providers' point of view in order to see how industry is reacting to changing market conditions.

## **METHOD**

This study used a mailing survey to assess hotel managers' attitudes toward providing healthy meals. A closed-ended questionnaire evaluating the role of healthy food choices in Mediterranean resort hotels was developed by revising and expanding the study on consumer perceptions of healthy meals by Chen, Legrand, and Sloan (2006). The questionnaire administered in this study contained 10 questions. The first part of the questionnaire asked about the type of establishment in which the managers currently worked, its location, and the type of clientele the hotel attracted. The second part of the questionnaire measured the managers' attitudes toward the inclusion of healthy food items on restaurants' menus, the importance of information on healthy food given to customers, and the managers' desire to learn more about nutrition and developing nutritionally balanced menus. The questionnaire was reviewed by a panel consisting of practitioners from Bonn, Germany, and university professors, before being distributed to 46 resorts in the REWE hotel group, located in European and North African Mediterranean cities. Thirty-seven useful questionnaires were finally completed after follow-up letters and phone calls.

## FINDINGS

Regarding the profile of respondents, the majority of the mail survey was answered by general managers of resort hotels (67.6%), followed by food and beverage managers (21.5%), and executive chefs of hotel restaurants (10.8%). Regarding the guest profile of resort hotels, 72.2% of the guests were Germans, 22.2% came from other European countries, and 5.6% came from other parts of the world. This study found that choice preferences concerning (1) atmosphere in the restaurant, (2) appealing display of food, and (3) eating habits and lifestyle were more important than concern for personal health. The desire to be slim was the least important preference for food choice in resort hotels (See Tables 1 and 2). This indicated that providing healthy meals might not be the main attractor boosting customer demand from hotel managers' perspectives. Furthermore, the majority of respondents thought less than half of their patrons had considered their health when making a menu choice. To further analyze the distribution of responses, four choice preferences, including atmosphere, display of food, general health, and impressing other guests, drew the largest number of "very important" responses, while the other five references found their mode in "important" categories.

**Table 1**  
**The Means and Importance Ranking of Meal Preferences**

Preferences	Mean	Ranking
Atmosphere	1.43	1
Display of food	1.44	2
Eating habits and lifestyle	1.62	3
General health	1.65	4
Something different	1.94	5
Price	1.94	5
Impressing other guests	2.06	7
Interesting menu	2.14	8
Desire to be slim	2.83	9

Note: the variables are based on a five-point scale (1=very important, 5=not very important)

**Table 2**  
**The Distribution (%) of Frequency of Meal Preferences**

Preferences	Very Important	Important	Neutral	Not Important	Not very Important
Atmosphere	59.5	37.8	2.7	0.0	0.0
Display of food	61.1	33.3	5.6	0.0	0.0
Eating habits and lifestyle	43.2	51.4	5.4	0.0	0.0
General health	51.4	35.1	10.8	2.7	0.0
Something different	30.6	47.2	19.4	2.8	0.0
Price	31.4	57.1	2.9	2.9	5.7
Impressing other guests	39.4	30.3	15.2	15.2	0.0
Interesting menu	21.6	51.4	18.9	8.1	0.0
Desire to be slim	8.6	34.3	28.6	22.9	5.7

An ANOVA process was deployed to see whether there was any difference in relative importance among hotel managers (e.g., general managers, food and beverage managers, and executive chefs) concerning customers' food-choice preferences. The results found that there was a difference in general health ( $p < .05$ ). It appeared that executive chefs (mean = 1.25) had a stronger feeling about health issues than general managers (mean = 1.68) and food and beverage managers (mean = 1.75). One specific question with an ordinal scale asked how many of the customers thought about their personal health when making restaurant menu choices. The majority of hotel managers (=54.1%) thought less than half of their customers cared about health issues when selecting meals. However, the opinion seemed divided among the managers. The Chi-square test ( $p < .04$ ) found that there was a significant difference among the managers

concerning their review of customer's consciousness of health when making a menu selection. It appeared that from the chefs' perspective, more customers had aspired to a healthy eating style.

A variable with a five-point Likert scale (1=very important, 5=not very important) was developed to measure managers' attitudes in providing healthy meals. From the mean analysis, this study found that the managers were inclined to agree (mean =1.81) that it was important to make healthy meals available. In addition, one research question asked "Is information available to your customers on healthy meal offerings in your restaurant?" The result showed that only 46% of respondents provided such information. A correlation analysis was consequently conducted to see whether there was any connection between the importance of offering healthy meals and the availability of relevant literature to customers. The study found that there was no significant relationship. It implied that the managers were not ready to encourage healthy eating because they thought their customers would be critical. Perhaps the hotel managers hesitated to serve healthy meals (despite good market potential) because they were afraid the meals might turn some customers away; resort guests do not care about eating unhealthy meals as long as they taste good. Finally, the study survey asked the managers whether they would be interested in gaining more knowledge. The research found that most managers (=97%) intended to obtain information on healthy eating. This seemed to suggest that the managers were in some degree vigilant on the market potential of offering healthy meals.

### **LIMITATIONS AND FUTURE RESEARCH SUGGESTIONS**

It is important to discuss some limitations of the study. This study covers a small sample size that may lead to misinterpretations of resultant data. Future studies may increase their sample size to cross-validate the results of the study. While the findings from this study are generally in line with the bulk of research in the area of health food perceptions in restaurants, the managers' perceptions may not be the same as the customers' perceptions. Further research could examine potential conflicts between the perceptions of customers and managers. A further limiting factor of the study results in the fact that managers' perceptions are founded on observing customers' behavior in out-of-the-ordinary situations. While on holiday, customers may simply adopt a behavior that is not reflected at home; this may particularly be the case in regard to healthy food choices (on holidays, some customers may want to indulge, while others may want to follow strict diets). Further, the English language, although the working language within the chain of hotels, is a second language to most managers. Some questions within the survey may have been misinterpreted or misunderstood. Lastly, it is suggested that the scale measuring choice preferences could be further purified by drawing a larger sample.

From the above findings, this study concludes that hotel managers do not think personal health will be the most important criterion for meal choice. Specifically, from the point of view of managers, the atmosphere in the restaurant, appealing displays of food, and customers' eating habits and lifestyles are meal determinants more important than personal health. However, managers with different operational experience tend to consider consumer demand of healthy meals in a different manner. Moreso than hotel managers, executive chefs believe more customers aspire towards healthy eating style. Interestingly, although managers thought the market could be susceptible to change, they are not ready to promote healthy eating styles. The study findings seem largely to reflect German travellers' meal consumption patterns from hotel managers' perspectives. It is suggested that further investigation be made into the behavior of travellers from other wealthy European countries, such as the U.K. and France, to see whether the demand for healthy meals differs.

## References

- Bandura, A. (1977). *Social learning theory*. Englewood Cliffs, NJ: Prentice-Hall.
- Brackman, P. (2006). *Market snapshot: US restaurant trends*. Retrieved January 11, 2007, from <http://www.caterersearch.com/Articles/2006/07/05/307490/market-snapshot-us-restaurant-trends.html>
- Carmona, R. H. (2003). *The obesity crisis in America*. Retrieved January 14, 2007, from <http://www.surgeongeneral.gov/news/testimony/obesity07162003.html>
- Chen, J.S., Legrend, W., & Sloan, P. (2006). Factors influencing healthy meal choice in Germany. *Journal of Tourism* 54(4), 315-322.
- CIDL (Centre Interprofessionnel de Documentation et d'Information Laitières) (French National Dairy Council). (2002). *Cross-cultural survey on perceptions of food, body and health*. Retrieved January 16, 2007, from [http://findarticles.com/p/articles/mi\\_m0DQA/is\\_2002\\_August\\_29/ai\\_91138391](http://findarticles.com/p/articles/mi_m0DQA/is_2002_August_29/ai_91138391)
- Counter attack. (2006). *BBC News*. Retrieved July 16, 2008, from [http://news.bbc.co.uk/2/hi/uk\\_news/magazine/6161465.stm](http://news.bbc.co.uk/2/hi/uk_news/magazine/6161465.stm)
- Davis, B., Lockwood, A., & Stone, S. (2001). *Food and beverage management* (3<sup>rd</sup> ed.). Oxford: Butterworth-Heinemann.
- Davis, M. (2005). US slowly wakes up to obesity crisis. *BBC News*. Retrieved January 14, 2007, from <http://news.bbc.co.uk/1/hi/world/americas/4501646.stm>
- Dittmer, P.R. (2003). *Principles of food, beverage and labor cost control* (7<sup>th</sup> ed.). New York: Wiley.
- Family chains 'offer junk food.' (2006). *BBC News*. Retrieved January 16, 2007, from <http://news.bbc.co.uk/1/hi/health/6158615.stm>
- Fitzpatrick, M.P., Chapman, G.E., & Barr, S.J. (1997). Lower-fat menu items in restaurants satisfy customers. *Journal of the American Dietetic Association*, 97, 510-514.
- Hollingsworth, P. (2000). Marketing trends fuelling healthful foods success. *Food Technology*, 54(10), 53-58.
- Johnson, L.J., Raab, C., Champaner, E., & Leontos, C. (2002). Chefs' perception of the importance of nutrition in menu planning. *Pakistan Journal of Nutrition*, 1(2), 85-88.
- Jones, W. (1999). New wealth from health. *Restaurant Hospitality*, 83, 98-102.
- Legrand, W. & Sloan, P. (2006). Customer's preferences to healthy meals. *Advances in Hospitality and Leisure*, 2, 265-273.
- Levine, B. (1999). Cornell's National Nutrition Information Center, *National consumer survey confirms: Americans flip-flop on food choices when nutrition studies conflict*. Retrieved July 16, 2008, from [http://www.margarine.org/pr\\_002.html](http://www.margarine.org/pr_002.html)
- Miller, J.E., Hayes, D.K., & Dopson, L.R. (2005). *Food and beverage cost control*. (3<sup>rd</sup> ed.). New York: Wiley & Sons.
- New York City passes trans fat ban. (2006). *MSNBC*. Retrieved April 22, 2007, from <http://www.msnbc.msn.com/id/16051436/>
- Ninemeier, J. D. (2000). *Management of food and beverage operations* (3<sup>rd</sup> ed.). Lansing: Educational Institute of the American Hotel & Motel Association (AHMA).
- Raine, K.D. (2005). Determinants of healthy eating in Canada. *Canadian Journal of Public Health*, 96(3), 8-14.
- Reicher, G., & Dalton, S. (1998). Chefs' attitudes toward healthful food preparation are more positive than their food science and knowledge practices. *Journal of the American Dietetic Association*, 98, 165-169.
- Rouslin, J., & Viera, S. (1998). Recipe for success: Culinary and nutrition education. *Topics in Clinical Nutrition*, 13, 20-26.



- Schaetzing, E.E. (1994). *Personaleinsatz, training, food and beverage administration* (2<sup>nd</sup> ed.) Frankfurt am Main: Dt. Fachverlag.
- Schlosser, E. (2002). *Fast food nation*. New York: Penguin.
- Soil Association. (2006). *Setting the standard*. Retrieved January 16, 2007, from [http://www.soilassociation.org/web/sa/saweb.nsf/801d51eff7f195cf802571960033fa0a/\\$FILE/setting\\_the\\_standard.pdf](http://www.soilassociation.org/web/sa/saweb.nsf/801d51eff7f195cf802571960033fa0a/$FILE/setting_the_standard.pdf)
- United States Department of Agriculture. (2006). *Inside the pyramid*. Retrieved November 2, 2006, from <http://www.mypyramid.gov/pyramid/index.html>
- Waller, K. (1999). *Improving food and beverage performance*. Oxford: Butterworth-Heinemann.
- Willer, H., & Yussefi, M. (2004). *The world of organic agriculture: statistics and emerging trends* 6<sup>th</sup> ed.). Bonn: IFOAM.
- World Health Organization, (2006). *The World Health Organisation European Ministerial Conference on Counteracting Obesity, Turkey on 15-17 November 2006*. Retrieved April 22, 2007, from <http://www.euro.who.int/obesity/conference2006>
- Yu, R. (2007). Marriott says trans fats will check out. Retrieved April 22, 2007, From [http://www.usatoday.com/money/biztravel/2007-02-01-marriott-Usat\\_x.htm](http://www.usatoday.com/money/biztravel/2007-02-01-marriott-Usat_x.htm)
- Yum! Brands fast food's yummy secret. (2005). *Economist*. Retrieved July 17, 2008, from <http://www.economist.com/business/displayStory.cfm>

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