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CONSUMER FOOD INSIGHTS

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INTRODUCTION

Consumer Food Insights (CFI) is a monthly survey of more than 1,200 American adults from across the country. Since January 2022, the Center for Food Demand Analysis and Sustainability (CFDAS) at Purdue University has used this survey to track trends and changes in consumer food demand and food sustainability behaviors.¹ Visit purdue.ag/CFDAS or contact cfdas@purdue.edu for more details.

In this edition, we aim to assess how individuals evaluate their current diets, identify areas for improvement and understand what influences their food choices. The questions also examine information needs, trust in nutrition sources and preferences for how and where health-related food information is presented. Perceived need for diet improvement is used as the main crosstab variable.²

KEY INSIGHTS FROM JULY

- Most American consumers report high diet satisfaction, with 83% reporting they are "very happy" or "rather happy" with their diets.
- The Purdue American Diet Quality Index is 62.4 in July 2025, meaning average diet quality is just barely above "unhealthy."
- Consumers are generally aware of their diet quality and how to eat better; few are currently making changes (25%).
- Cost (48%) and taste (42%) are the most commonly cited barriers to healthier eating.
- When asked what information they use when buying groceries, consumers pay the most attention to price, ingredients lists and sales.
- Responses indicate a preference for nutrition information on the front of food packaging.
- Consumer food inflation expectations (4.0%) and estimates (5.1%) increased this month as food inflation continues to slowly rise (3.0%).



*+/- in upper right corner tracks the unit change in the statistic from the previous month or quarter, depending on data collection frequency

FOOD SATISFACTION

Are Americans satisfied with their diets?

Respondents score their own diet on a 0-10 scale, with the top of that scale (10) representing their ideal diet.³ Scores are categorized as thriving (7-10), struggling (5-6) or suffering (0-4). Two-thirds score their diet as a 7-10 on this scale (thriving), 21% score their diet as 5-6 (struggling) and 14% score their diet 0-4 (suffering) (**Figure 1**). Diet well-being has remained steady since the inception of the CFI, and the majority of consumers (83%) report being happy with their diets (**Figure 2**).

Figure 3 summarizes perceived diet well-being broken down by estimated diet quality. As one might predict, diet satisfaction is positively correlated with overall diet quality. Those who frequently eat foods deemed part of a healthy diet by the Dietary Guidelines for Americans (DGA) are doing much better with regard to achieving what they believe is their ideal diet, with 83% considered "thriving" on the diet well-being index. Conversely, 56% of those who have what is considered an unhealthy diet rate their diet high on the well-being index (7-10), with the remaining 44% rating their diets lower on the scale. Yet, this tells us that over half of those who are not closely following a DGA recommended diet are generally satisfied with what they eat.

Figure 1. Diet well-being index, Jan. 2022 - Jul. 2025

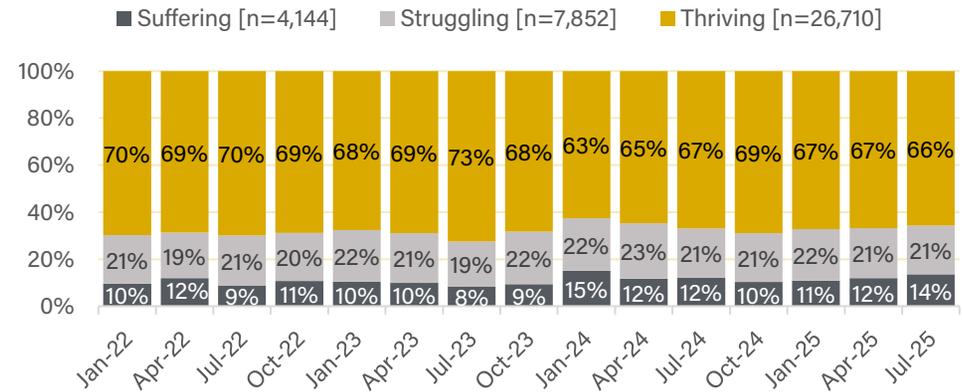
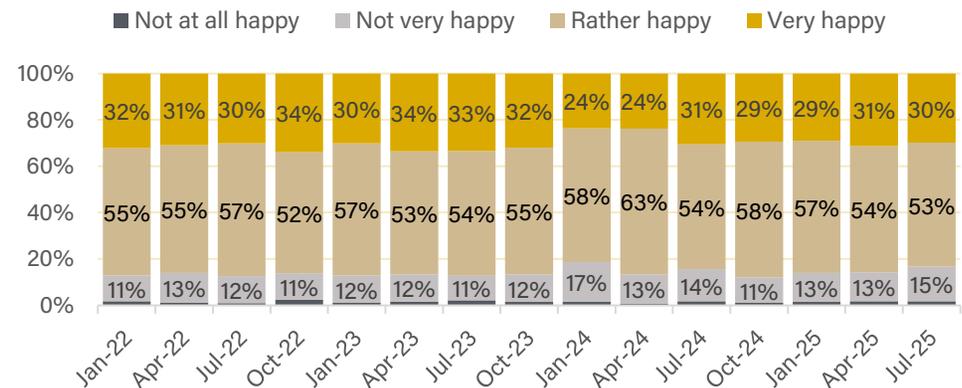
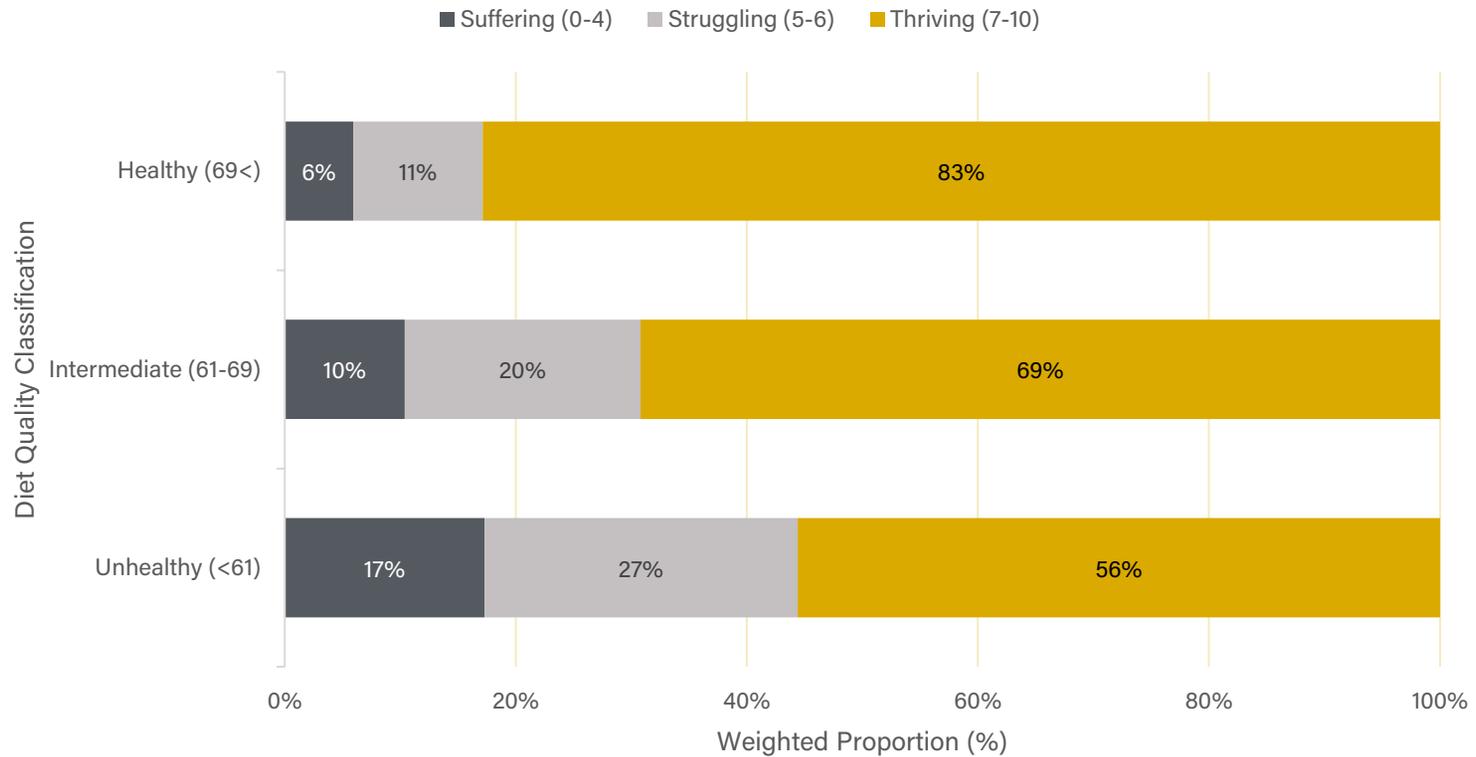


Figure 2. Rate of consumer diet happiness, Jan. 2022 - Jul. 2025



FOOD SATISFACTION

Figure 3. Diet well-being index by diet quality classification, Feb. 2024 -Jul. 2025



DIET QUALITY

What is the quality of the American adult diet?

Utilizing a nine-item questionnaire known as the Mini-EAT Tool⁴, we estimate consumers' self-reported diet quality in the last 30 days.

Figure 4 summarizes Mini-EAT scores since February 2024. Diets are classified as unhealthy (<61), intermediate (61-69) and healthy (69<). American adults score an average of 62.4 on this scale, which puts them in the intermediate classification. This average remains unchanged from last month. In July, 18%, 35% and 46% are classified as "healthy", "intermediate", and "unhealthy", respectively.

Figure 5 illustrates how people's views of their diet compare to their estimated diet quality, based on Mini-EAT scores. Individuals who agree with the statement "I don't think my diet needs any improvement at this time" have a slightly higher average Mini-EAT score (64.1) compared to those who disagree or are neutral (both at 61.5). This suggests that people who are confident in their dietary habits may indeed be making somewhat healthier choices. However, the difference is modest, and even among those who are satisfied with their diets, the average score indicates room for improvement. In other words, while self-assessed diet satisfaction aligns somewhat with better diet quality, it does not necessarily equate to an optimal or truly healthy diet.

Figure 4. Purdue's American Diet Quality Index (PADQI), Feb. 2024 - Jul. 2025

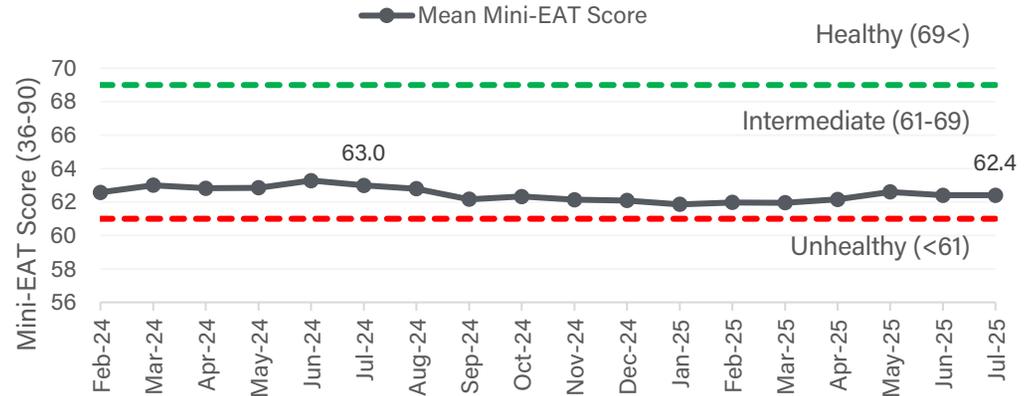
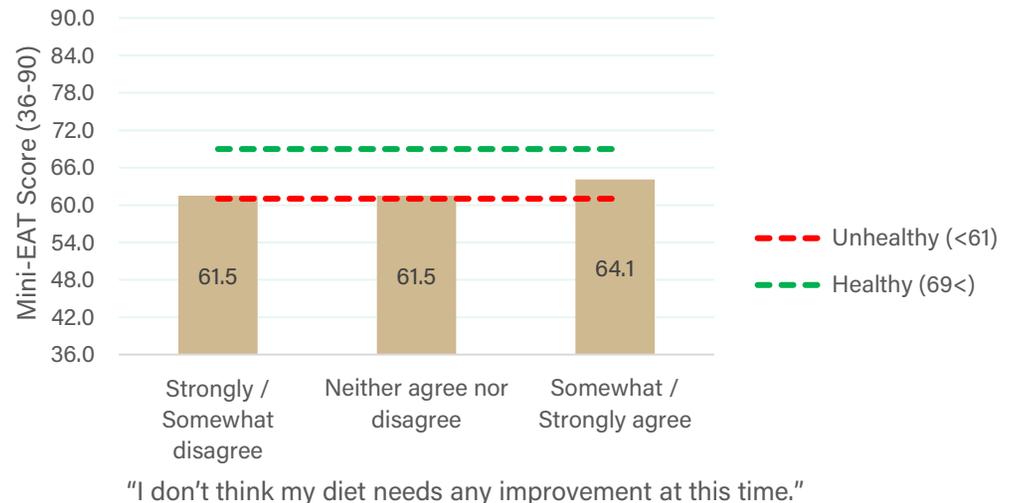


Figure 5. Weighted average Mini-EAT diet quality score by agreement with the statement: "I don't think my diet needs any improvement at this time," Jul. 2025



HEALTHY EATING DECISIONS

Do consumers think they need to make diet improvements?

In general, consumers whose diet well-being is high (thriving), as rated by the consumers themselves, are less likely to agree they need to make diet improvements (36%) compared to those who say rate their diets low on the diet well-being index (74%) (**Figure 6**). A follow-up question asked whether those who disagreed or were neutral to the statement about not needing to improve their diets had intentionally made any changes to their diets in the past month. We observe a correlation between the share of those changing their diets and the level of agreement with the statement. Over one-third of those who strongly believe they need to improve their diet are doing so (**Figure 7**).

Figure 8 summarizes beliefs about how to improve one's diet among those who feel improvement is needed. Unsurprisingly, adjusting intake of specific foods was a common theme. Many consumers believe they should maintain their current approach to evaluating nutritional information (43–46%). Interestingly, a sizable share of consumers seem less sure about the utilization of apps and tools to support dietary changes (39%).

Figure 6. "Please indicate your level of agreement or disagreement with the following statement regarding your current diet. 'I don't think my diet needs any improvement at this time.'" by diet well-being, Jul. 2025

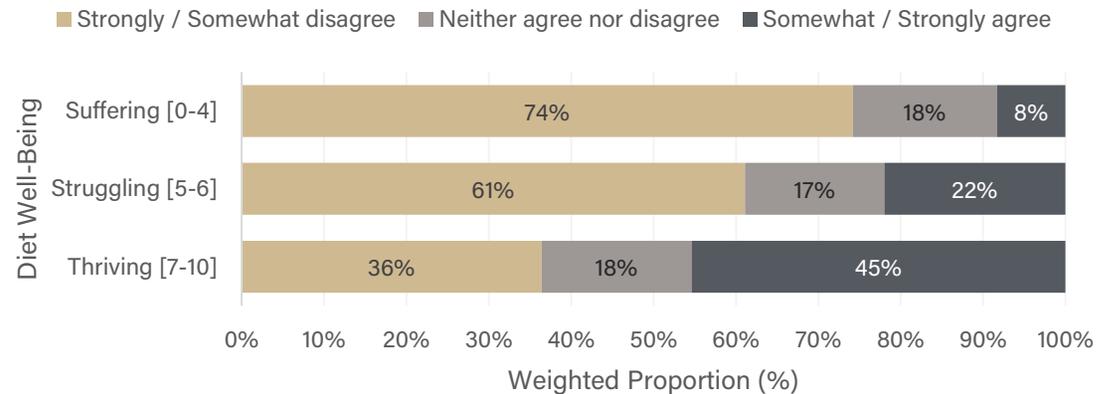
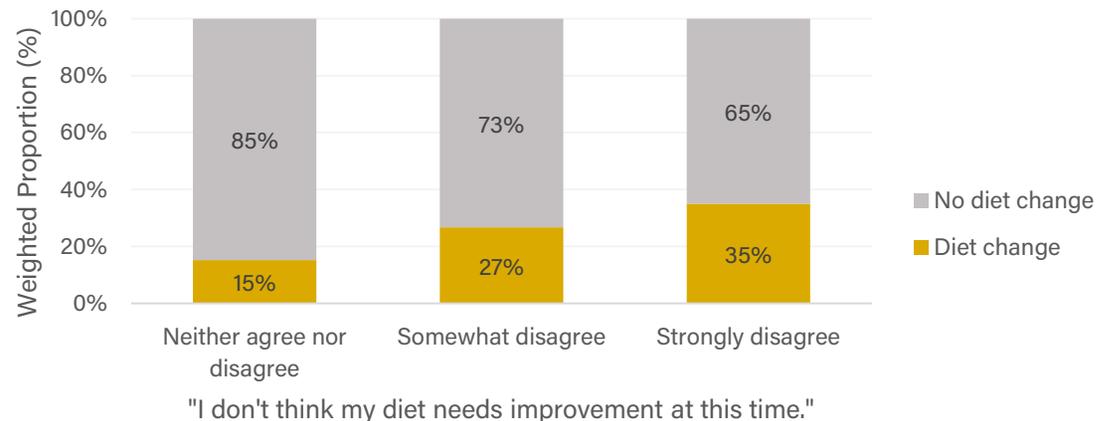
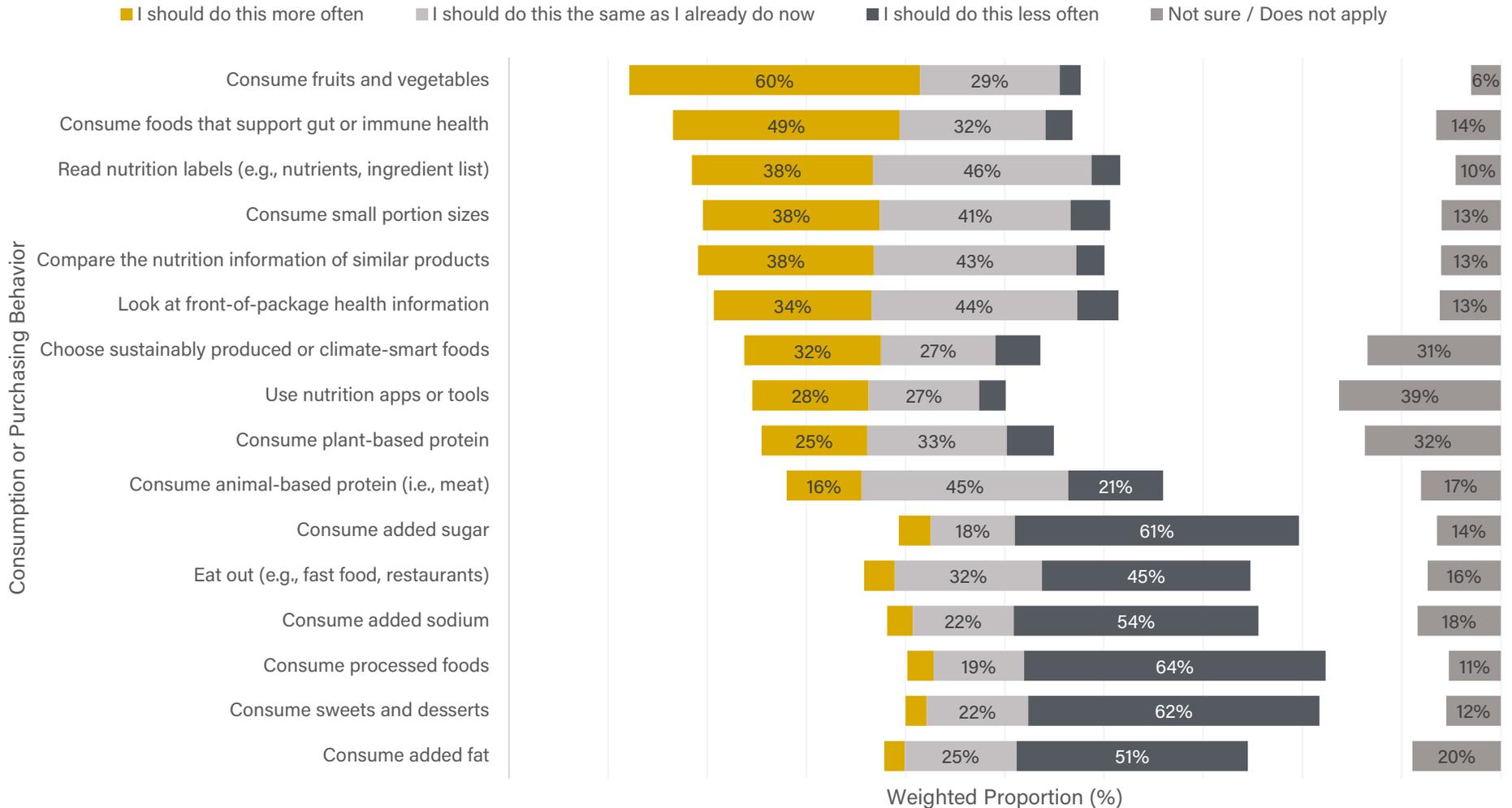


Figure 7. "In the past 30 days, have you intentionally changed your diet for health-related reasons?" by level of agreement with "I don't think my diet needs any improvement at this time," Jul. 2025



HEALTHY EATING DECISIONS

Figure 8. "For each of the following, tell us if doing it more, less, or the same would be best for improving your diet.", Jul. 2025



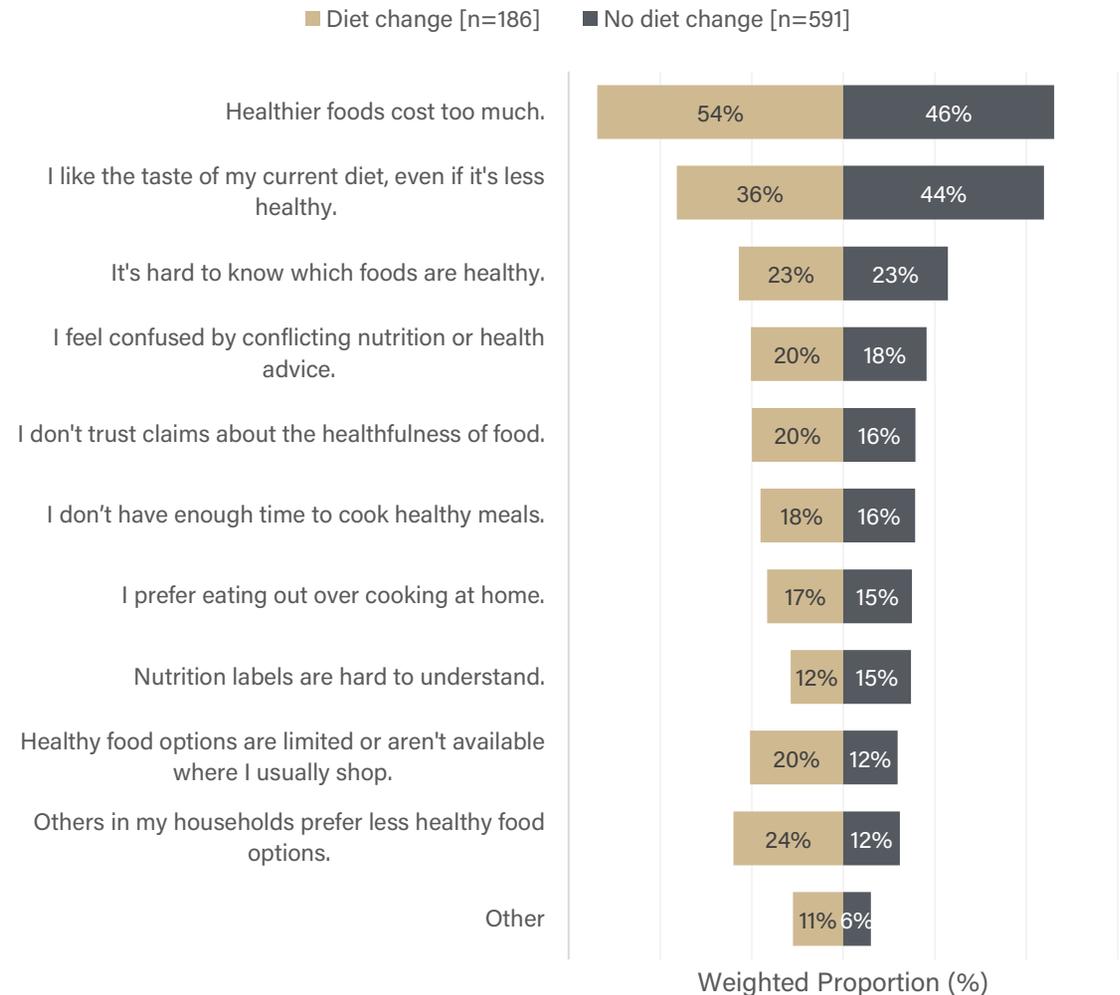
HEALTHY EATING DECISIONS

What barriers prevent consumers from eating healthier?

According to consumers, the most common barrier to eating healthier foods is cost. Despite mixed evidence supporting this belief, it highlights a key hurdle in consumer perception. Taste was the second most commonly selected barrier. These results are in line with what the CFI has highlighted over the past three years — taste and price tend to take priority over nutrition.

Figure 9 highlights the top three perceived barriers to healthy eating among those who are and aren't intentionally changing their diets. Overall, differences between the two groups are modest. A slightly higher share of those making changes cite cost as a barrier (54%) compared to 46% of non-changers. Conversely, taste is more commonly cited by non-changers (44%) than by those making changes (36%). It is important to note that both differences between groups are near the threshold of statistical significance.

Figure 9. "What do you believe makes it hard for you to eat healthier foods? Please select the top 3 barriers to eating healthier foods" by intentional diet changes in the past 30 days, Jul. 2025



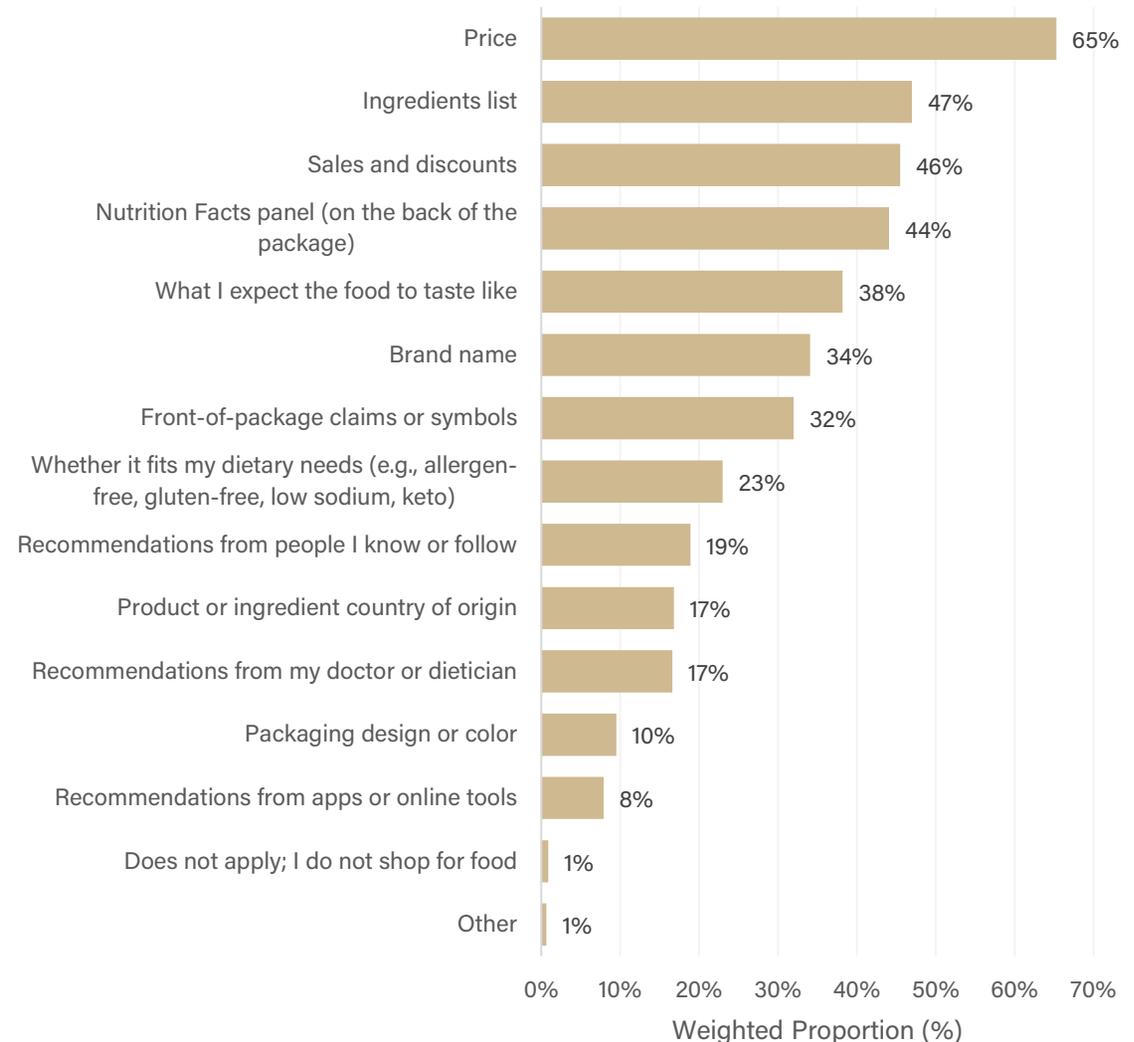
HEALTHY EATING DECISIONS

What information do consumers use in their food purchasing decisions?

In line with our previous findings, price is the top piece of information consumers pay attention to when grocery shopping (65%), followed by the ingredients list (47%) and sales and discounts (46%) (Figure 10). Economic factors remain key attributes in consumer food purchasing decisions. Producers looking to capitalize on product innovations or generate interest for their healthy food products may benefit from offering promotions or sales. While nutritional information is something many people look at when shopping, the price tag will ultimately drive the decision for most consumers.

Respondents were asked to identify the single *most important* piece of information from those they previously indicated paying attention to while grocery shopping. Among those who included price in their initial list, 42% selected it as the most important factor—more than any other attribute. These findings reinforce the ongoing narrative that affordability remains a dominant driver of food purchasing decisions.

Figure 10. "What information do you primarily pay attention to when deciding what food to buy when grocery shopping? (Select all that apply)," Jul. 2025



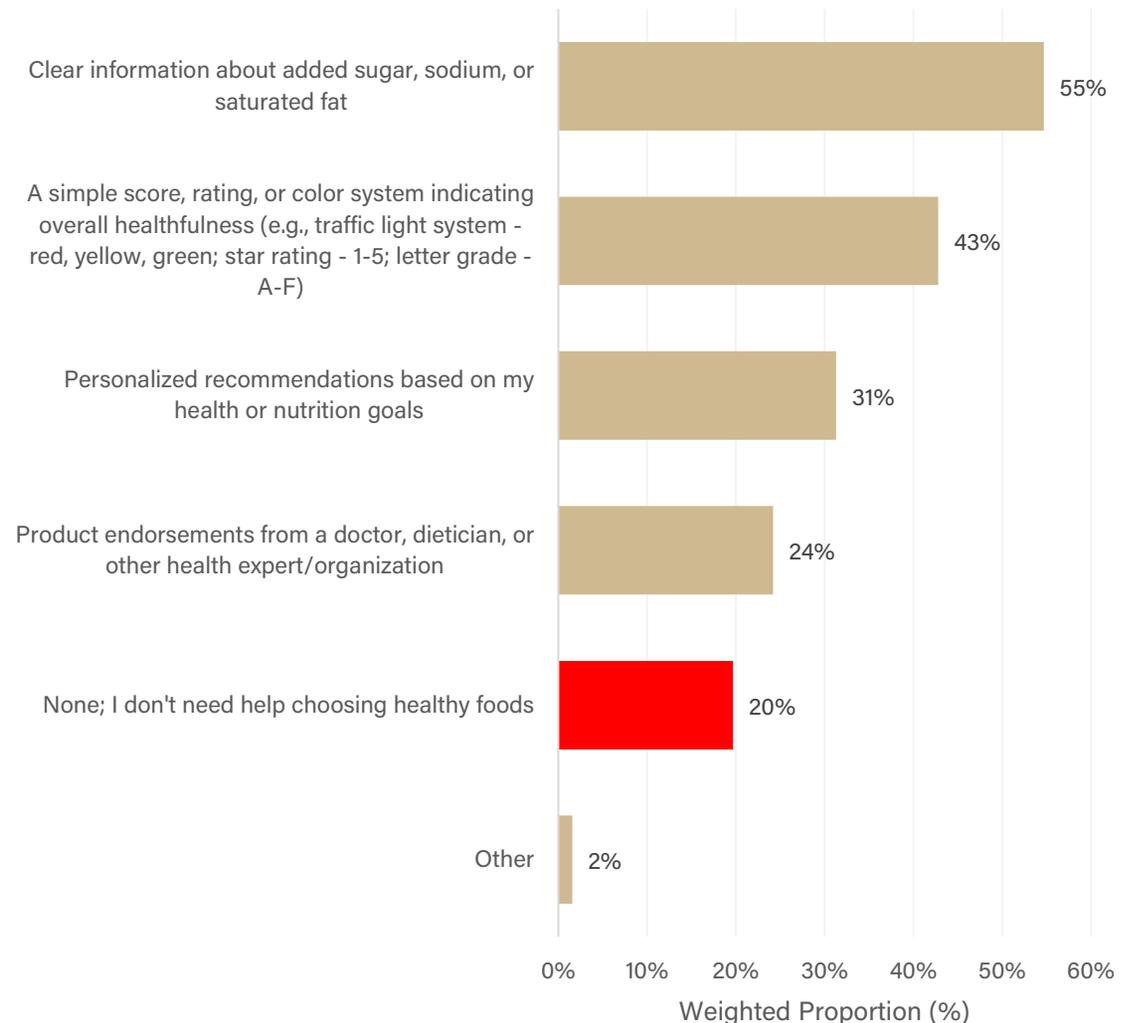
HEALTHY EATING DECISIONS

What nutrition and health information would help consumers make healthy food choices?

We asked consumers which types of information would make it easier for them to choose foods that support their health (**Figure 11**). Most selected clear labeling of added sugar, salt, and fat (55%) as helpful. A simple score, rating, or color system was also popular (43%). Fewer chose personalized recommendations (31%) or product endorsements (24%), though these may still appeal to specific audiences. Notably, 20% said they don't need help choosing healthy foods.

Respondents were asked to select what they think would be the most helpful piece of information from among the response options they had previously selected. A simple health scoring system was most commonly selected (64%) followed closely by clearer info about added sugar, sodium and fat (58%). With consumers focused on weighing price and taste, simple, clear and easily interpretable health information is key in catching the attention of consumers at the grocery store.

Figure 11. "Which of the following types of information would make it easier for you to choose foods that support your health? (Select all that apply)," Jul. 2025



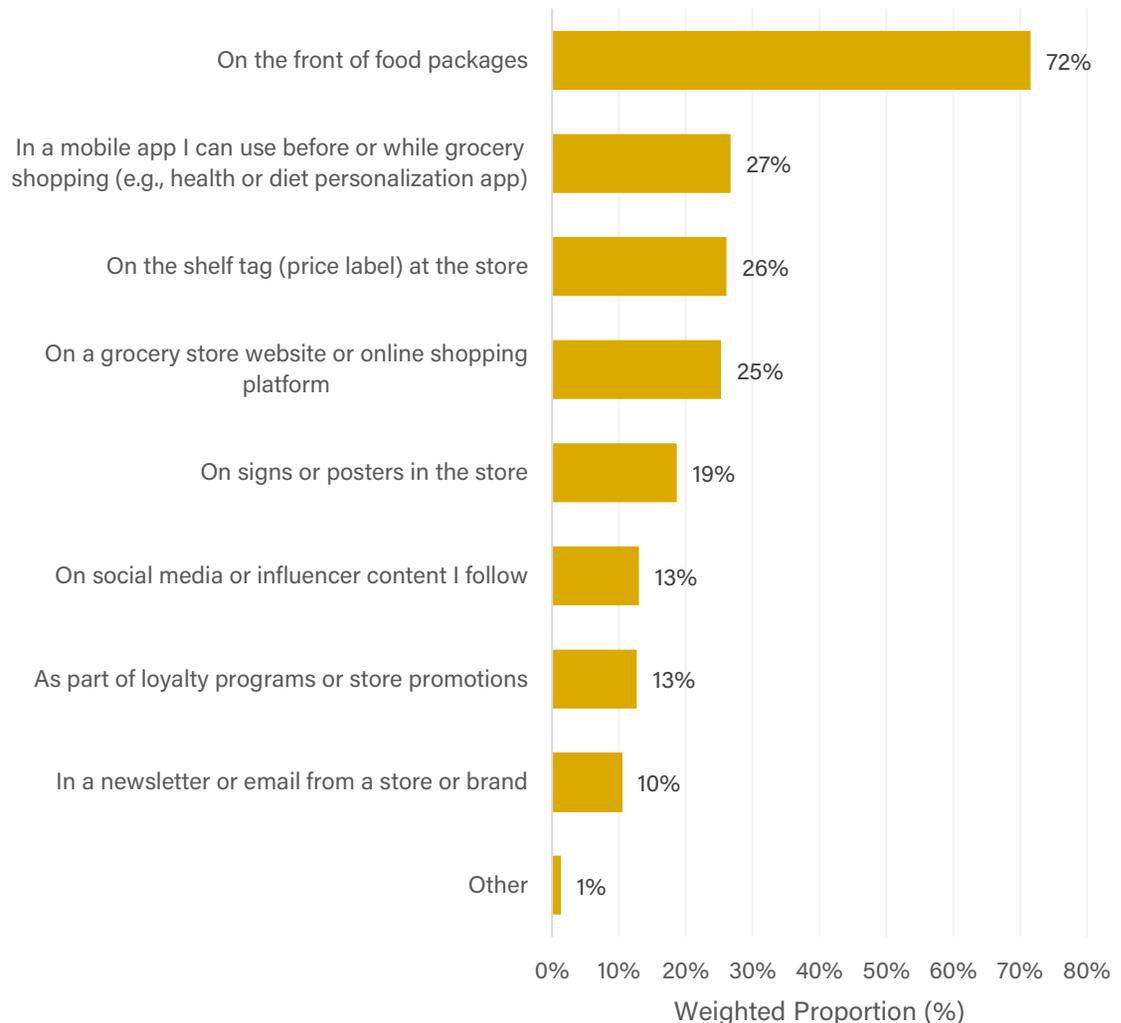
HEALTHY EATING DECISIONS

Where would consumers prefer to see health and nutrition information about food?

We further asked consumers where exactly they would like to see nutrition and health information about the foods they purchase (**Figure 12**). Overall, consumers overwhelmingly selected the front of the package (72%) as the preferred location for nutrition and health information, indicating a desire for accessible health details at the point of purchase. A quarter of respondents also selected a mobile app, shelf tag and grocery store website as other locations where they would like to see nutritional information. While less important than package labels, this highlights the importance of maintaining an accessible online presence.

This further supports the case for at-a-glance nutrition information (e.g., simple nutrition score or nutrient info) on the front of food packaging. Similar labeling, which features simplified information about and interpretations of added sugar, sodium and fat content in food, is currently being proposed by the FDA.⁵

Figure 12. "Where would you like to see information on nutrition and health when choosing food products? (Select all that apply)," Jul. 2025



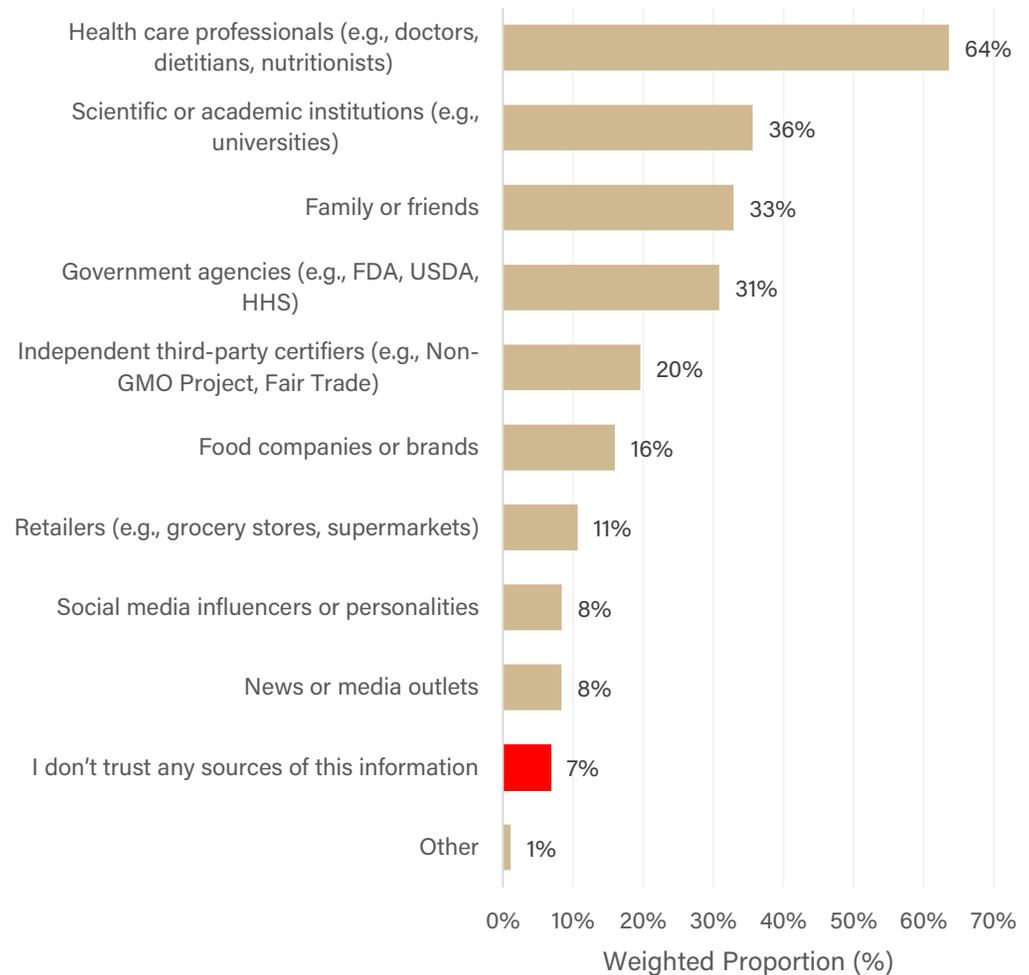
HEALTHY EATING DECISIONS

Who do consumers trust when it comes to forming ideas about what foods are healthy?

Similar to our monthly consumer trust index, most consumers (64%) look to health care professionals, including doctors, nutritionists and dietitians, for health and nutrition info (**Figure 13**). Scientific institutions, family and friends and government agencies were selected in the top three sources among a third of respondents. Fewer consumers look to food companies, retailers, social media or news outlets when forming their opinions on healthy food.

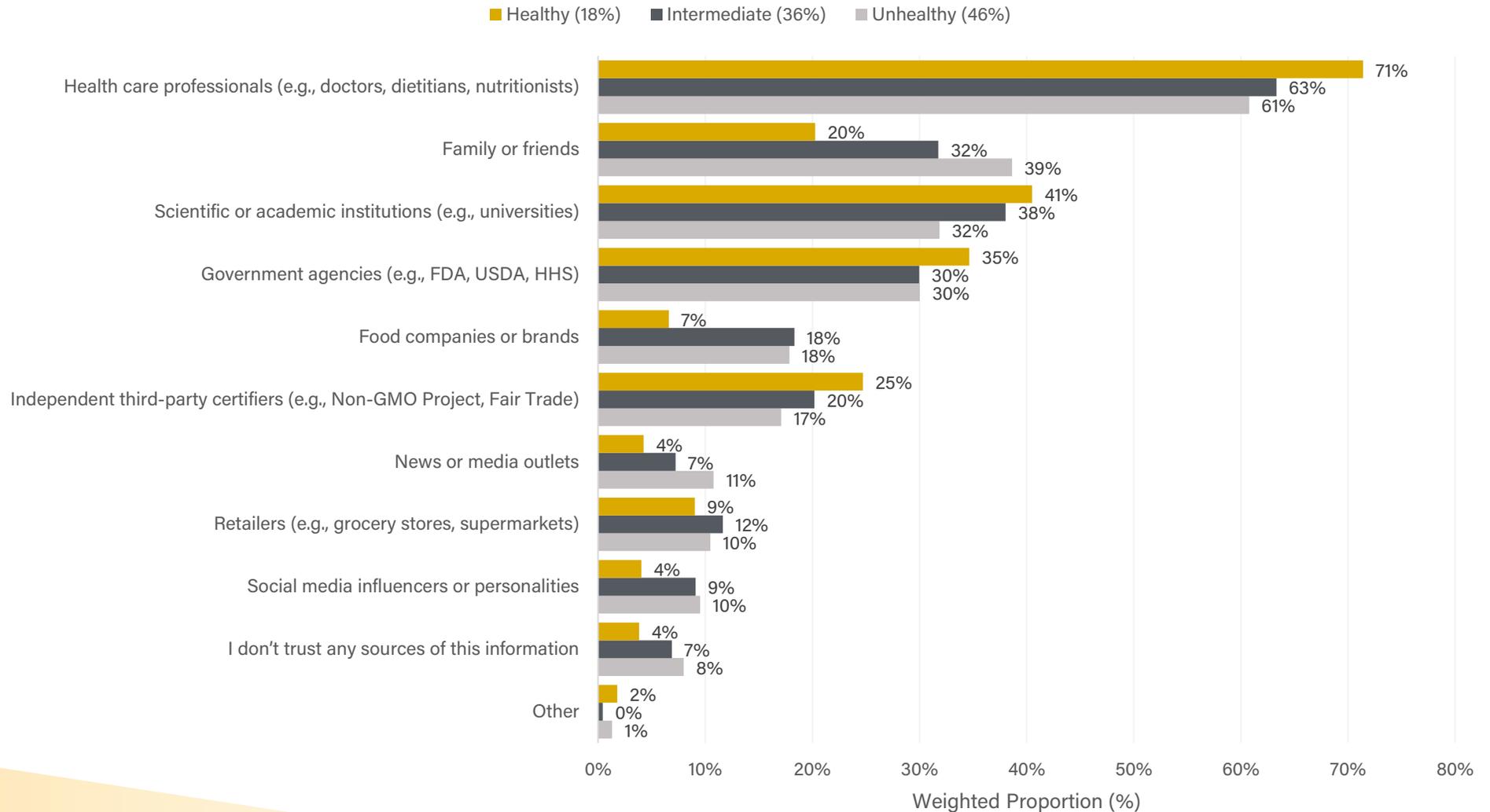
Figure 14 breaks down the top trusted sources of healthy eating information by estimated diet classification. While overall response patterns are similar, key differences emerge. Respondents with healthier diets were more likely to include health care professionals among their top three trusted sources, whereas those with less healthy diets more often selected family and friends. Notably, only 16% of respondents identified food companies or brands as a trusted source. This presents an opportunity for producers to build credibility and strengthen consumer trust by aligning their messaging with health-focused values and transparent communication.

Figure 13. "When it comes to forming your ideas about what foods are healthy to eat, which of the following sources do you trust the most? (Select up to 3) These can be sources you rely on before, during, or after grocery shopping.", Jul. 2025



HEALTHY EATING DECISIONS

Figure 14. "When it comes to forming your ideas about what foods are healthy to eat, which of the following sources do you trust the most? (Select up to 3)" by diet classification, Jul. 2025



FOOD SECURITY

Which Americans are having trouble buying food for their families?

Based on a set of six standard questions about food purchased and eaten in the past 30 days, we estimate national food insecurity to be 14.7% in June, unchanged from the previous two months (Figure 15).⁶

Figure 16 summarizes food insecurity rates by agreement about whether one's diet needs to be improved. We see that those who are content with their diets — in other words, those who agree that their diet does not need improvement — are less likely to be food insecure (9.8%) compared to those who are either neutral to the statement (19.1%) or believe their diet needs improvement (16.4%). Interestingly, those who are neutral to the statement have a high average food insecurity rate, possibly reflecting uncertainty in understanding what constitutes a "healthy" diet. These findings show that food insecurity rates vary by individuals' perceptions of their dietary adequacy.

Figure 15. Rate of household food insecurity in the last 30 days, Jan. 2022 - Jul. 2025

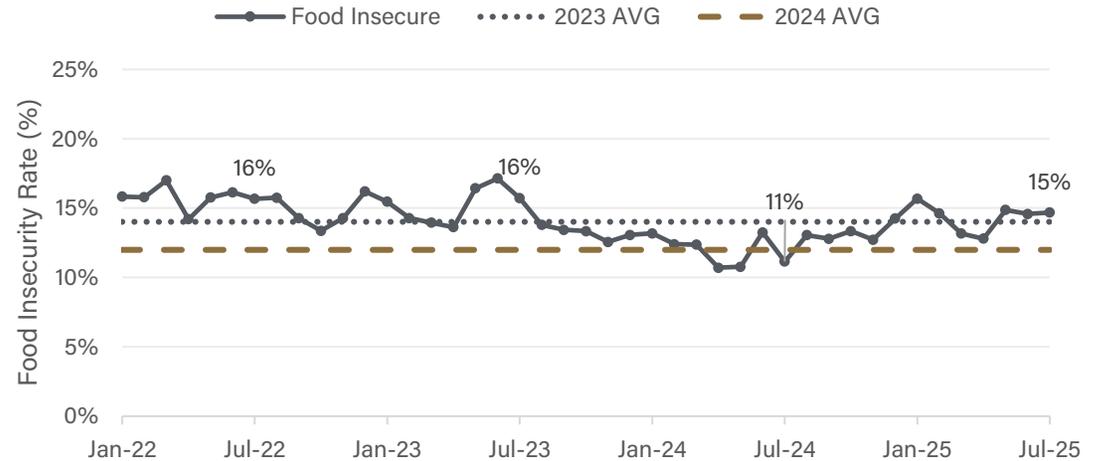
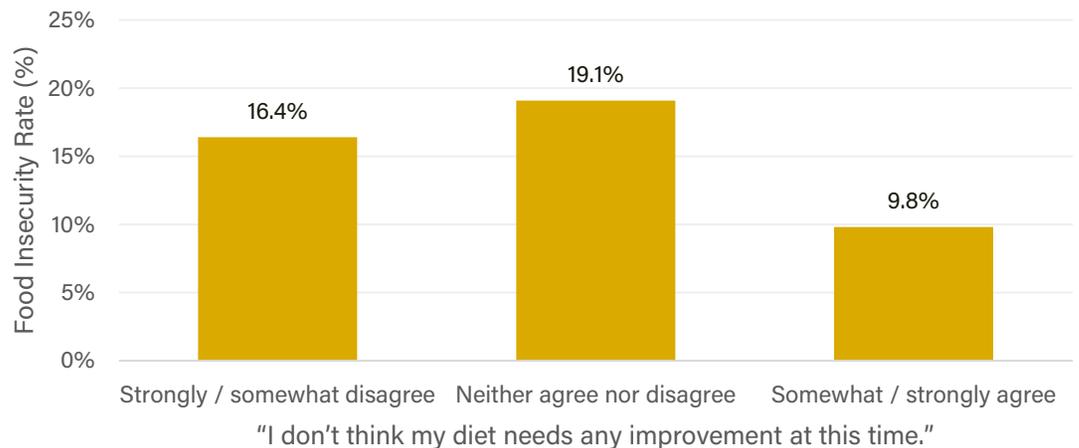


Figure 16. Rate of household food insecurity in the last 30 days by agreement with the statement: "I don't think my diet needs any improvement at this time," Jul. 2025



FOOD EXPENDITURES

How much are American households spending on food?

Each month, consumers report their household's weekly spending on food from the last 30 days (**Figure 17**). On average, consumers reported spending about \$129/week on groceries (food at home—FAH) and \$72/week on restaurants and other carryout (food away from home—FAFH) in July.⁷

At the time of writing, the most recent Consumer Price Index (CPI) estimate placed food inflation at 3.0%, marking a slight increase from the previous month (**Figure 18**). As food inflation edges upward, consumers appear to be adjusting their expectations accordingly. Forward-looking estimates rose to 4.0% in July, up 0.2 percentage-points from June. Additionally, consumers now estimate that food prices are 5.1% higher than they were a year ago — a 0.5 percentage-point jump from June's estimate. Over the past two years, these estimates have consistently exceeded the BLS estimated food inflation rate, yet they remain a valuable indicator of consumer sentiment and perceived economic pressure related to food costs.

Figure 17. Weekly household food expenditures, Jan. 2022 - Jul. 2025

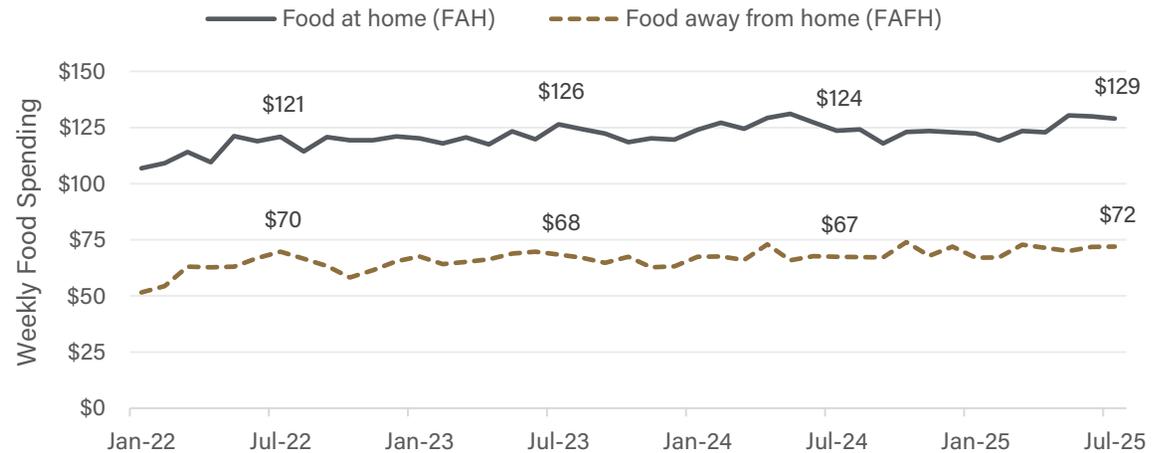
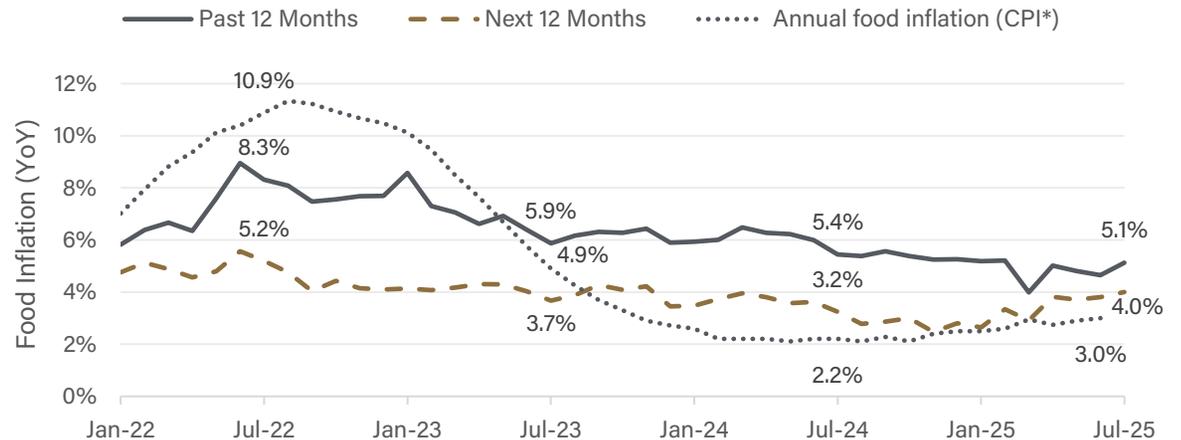


Figure 18. Consumer estimates of food inflation compared to gov. estimate, Jan. 2022 - Jul. 2025



*The Consumer Price Index (CPI) is a measure of inflation computed by the U.S. Bureau of Labor Statistics.

CONSUMER BEHAVIORS

How are Americans navigating their food environment?

Consumers are asked to report the frequency at which they chose certain foods, checked labels and performed at-home food behaviors (**Figure 19**).

Food choices commonly associated with sustainability or marketed as "healthier" are more common among those who believe their diet does not need improvement. Similarly, this group of consumers reports checking food labels more often for things like origin, recalls, production methods and natural labels. There is little difference in nutrition or use-by label checking between groups. Confidence in the healthfulness of one's diet appears to correlate more with intentional and informed food behaviors. However, the differences are modest, indicating that even those who feel their diet could improve are still engaging in many of the same behaviors—just slightly less often.

Figure 19. Frequency of consumer shopping and eating habits by level of agreement with "I don't think my diet needs any improvement at this time," Jul. 2025

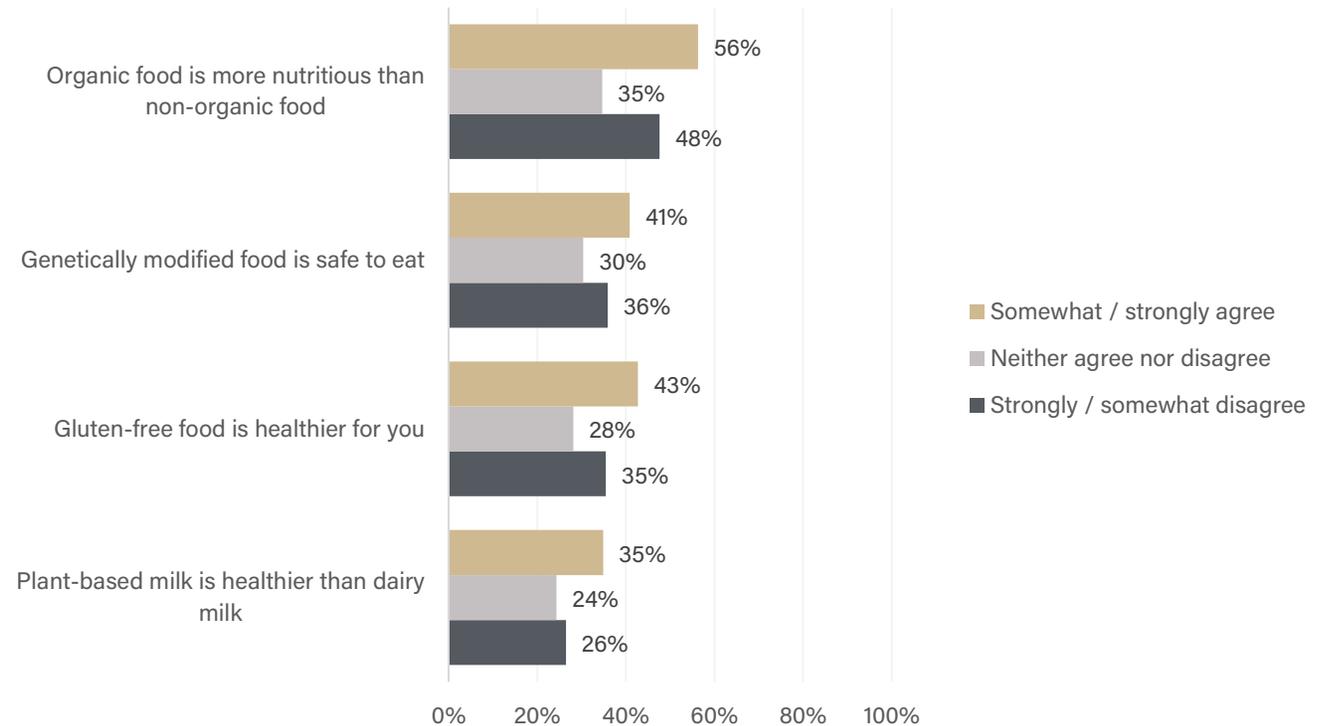
	Disagree	Neutral	Agree	Mean Score
Chose generic foods over brand-name foods	3.3	3.2	3.3	
Chose local foods over non-local foods	2.9	3.1	3.3	
Chose wild-caught fish over farm-raised fish	2.6	2.9	3.1	
Chose grass-fed beef over conventional beef	2.6	2.9	3.1	
Chose cage-free eggs over conventional eggs	2.7	2.8	3.0	
Chose organic foods over non-organic foods	2.5	2.7	3.0	
Chose plant-based proteins over animal proteins	2.1	2.4	2.6	
Checked the use-by/sell-by date at the store	4.1	3.8	4.0	5 Always
Checked the nutrition label before buying new foods	3.4	3.2	3.6	4 Often
Checked for natural or clean labels	2.8	3.0	3.3	3 Sometimes
Checked where my food originated	2.5	2.8	3.1	2 Rarely
Checked for food recalls	2.7	2.9	3.2	1 Never
Checked for GMO ingredients	2.5	2.7	3.0	
Checked how my food was produced	2.5	2.7	3.0	
Took steps to reduce food waste at home	3.8	3.5	3.8	
Recycled food packaging	3.4	3.3	3.7	
Threw away food past the use-by date	3.1	3.2	3.3	
Composted food scraps	2.2	2.4	2.6	
Ate fruits and vegetables without washing them	2.1	2.2	2.2	
Ate rare or undercooked meat	1.6	1.9	2.0	
Ate raw dough or batter	1.6	1.9	2.0	

CONSUMER BELIEFS

What do Americans believe about their food and food system?

Figure 20 summarizes consumer agreement with various statements about the food system disaggregated by perceived need for diet improvement. Similar with perceptions of their own diet needs, those who neither agree nor disagree that they do not need to make diet improvements tend to also be neutral toward statements regarding the healthfulness of foods. Interestingly, we observe few differences between those who think their diets need to improve and those who are content with their diets.

Figure 20. Share of consumers who "somewhat agree" or "strongly agree" with claims about food by level of agreement with "I don't think my diet needs any improvement at this time," Jul. 2025



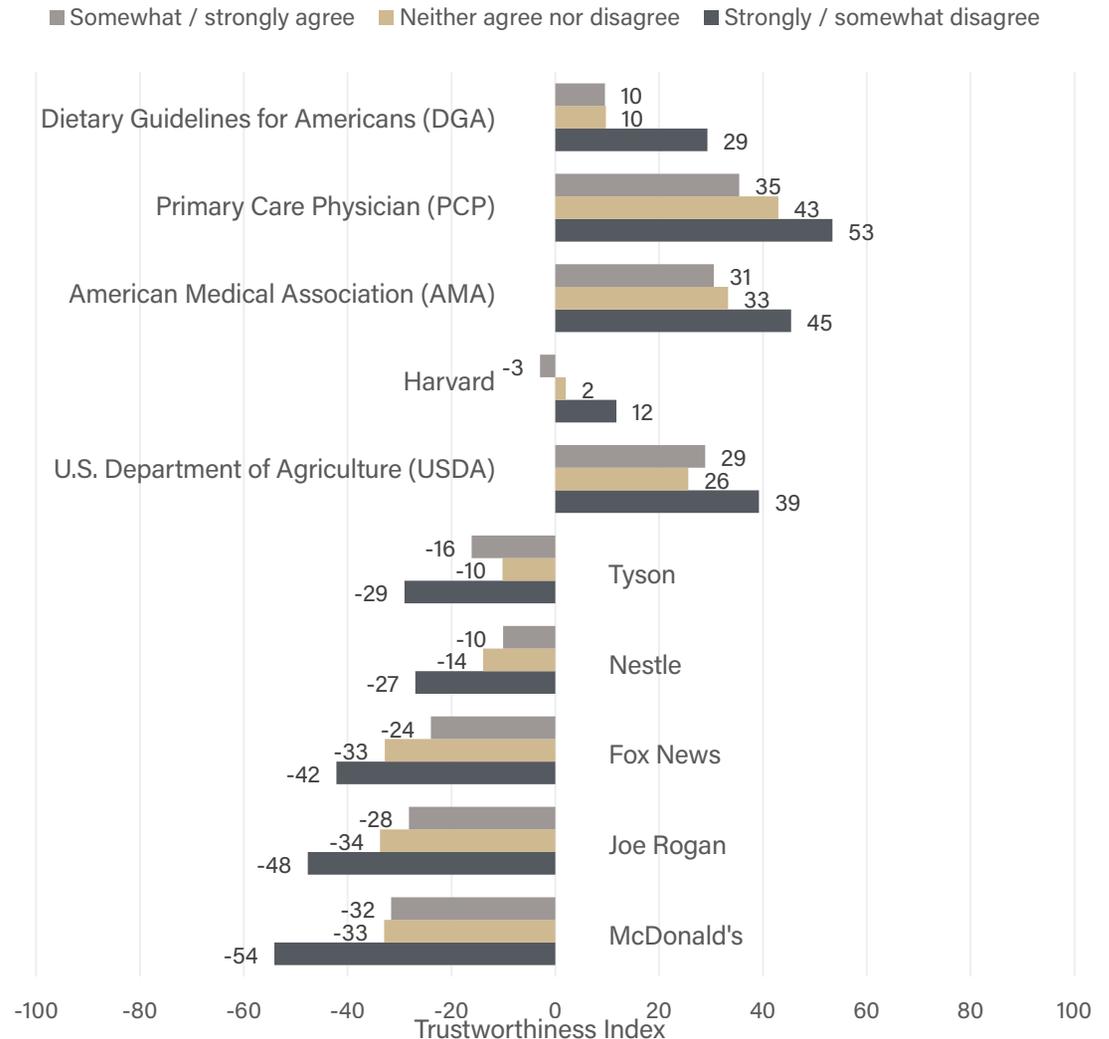
CONSUMER TRUST

Who do Americans trust on topics of food?

Respondents select their most-trusted and least-trusted sources of information about healthy and sustainable food from a list that includes a variety of information sources, such as news networks, government agencies, food companies, personal networks and higher education institutions. Responses are scored and converted to a Trust Index from -100 (least trusted) to 100 (most trusted).⁸

Figure 21 summarizes the trust scores by perceived need for diet improvement. The results display the entities with the largest score differences between the "disagree" and "agree" groups. The data reveal a clear pattern: individuals who perceive a need to improve their diet tend to distrust food industry entities more than those who are content with their current diet. Conversely, health care and government-related sources garner higher trust from those who believe their diet needs improvement. This suggests a greater reliance on institutional and expert guidance among individuals motivated to make dietary changes. These findings underscore the importance of credible, expert-backed communication in shaping dietary behavior and improving public health.

Figure 21. Trust index of food-related information sources by level of agreement with "I don't think my diet needs any improvement at this time," Jul. 2025



ENDNOTES

1 Data were collected from an online opt-in panel maintained by the company Dynata over a four-day period from July 21-24, 2025. The eligible population included U.S. adults ages 18+. A weighting method called iterative proportional fitting (or raking) was applied to ensure a demographically balanced sample by age, sex, race, census region, income, and SNAP participation. Population proportions reflect the most recent complete year of ACS census data (2023). Every respondent from the previous month was recontacted and asked to take the survey again. About 39% of June's sample participated this month, thus the rest of the sample was filled in with a new pool of respondents. Data collection for every survey begins on the third Monday of each month, unless otherwise dictated by holidays or extenuating circumstances. This report is released on the second Wednesday of the following month.

2 Question: *"Please indicate your level of agreement or disagreement with the following statement regarding your current diet. 'I don't think my diet needs any improvement at this time.'"*

Sample size Jul. 2025: Disagree (n=547); Neither agree nor disagree (n=219); Agree (n=429)

Sample size Jan. 2022 - Jul. 2025: (n=53,384)

3 This scale is based on the [Cantril Scale](#) used in Gallup's World Poll to assess well-being and happiness around the world. Thus, we use the same validated conceptual labels—thriving, struggling, and suffering—to group responses.

4 Lara-Breitinger KM et al. *Validation of a Brief Dietary Questionnaire for Use in Clinical Practice: Mini-EAT (Eating Assessment Tool)*. J Am Heart Assoc. 2023 Jan 3;12(1):e025064. doi: 10.1161/JAHA.121.025064. Epub 2022 Dec 30. PMID: 36583423; PMCID: PMC9973598.

5 U.S. Food and Drug Administration. (2025, May 2025). *Front-of-Package Nutrition Labeling*. [Press release]. <https://www.fda.gov/food/nutrition-food-labeling-and-critical-foods/front-package-nutrition-labeling>

6 High or marginal food security (i.e., food secure): 0-1 reported indications of food-access problems; little indication of change in diet or food intake. Respondents who reported an income above 185% of the federal poverty line were also screened as having high food

ENDNOTES

security. This determination was made according to research by [Ahn et al. \(2020\)](#), which shows that using a modified income-based screening procedure for internet surveys better approximates government estimates of food insecurity. Low food security (i.e., food insecure): 2-4 reported indications of reduced quality, variety, or desirability of diet; little indication of reduced food intake. Very low food security (i.e., food insecure): 5-6 reported indications of disrupted eating patterns, changes in diet, and reduced food intake.

7 Food at home (FAH) refers to food sales meant for home or off-site consumption and the value of donations and non-market acquisitions, which is acquired from outlets such as grocery stores, convenience stores, direct sales, etc. Food away from home (FAFH) refers to food sales meant for immediate consumption, federal food programs, and food furnished as an ancillary activity, which is acquired from outlets such as restaurants, bars, schools, etc.

8 Trust questions were not fielded in the Consumer Food Insights survey from October 2022 - December 2022. Starting June 2025, respondents were allowed to select up to 5 options for "most" and "least" trusted.