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HEALTHY EATING INTENTION: IDENTIFYING FACTOR ANALYSIS BASED ON GENERATION, GENDER, AND MARITAL STATUS

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Abstract: *The increasing prevalence of obesity and inadequate nutrition among young individuals in Malaysia can be attributed to their eating habit and a general lack of food consciousness in contemporary society. In 2019, half of the adult population in Malaysia was classified as overweight or obese. The quantity had increased by 3.4% to reach 53.5% in 2023. Beknown to all, diabetes, cardiovascular disease, and hypertension are linked to an insufficient diet and the only way to obtain excellent health and vitality is through appropriate nutrition and regular physical exercise. However, a recent local report in May 2024 revealed that proper nutrition intake among Malaysian adults was noticeably low. Thus, observing the trend of Malaysians' intention towards healthy eating is crucial especially among younger generations in order to generate a healthy society. A total of 547 participants were contacted via a WhatsApp group, where they were given a hyperlink to access the online questionnaire. In addition to observing the trend of Malaysians' intention towards healthy eating, the primary objective of the present study was to validate the variables associated with healthy eating*

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intention. This was achieved through the utilisation of principal components analysis with varimax rotations. The findings revealed several key factors, including healthy eating intention, knowledge, satisfaction, and attitude. These factors were later used to assess if there is a significant difference between the two samples in the categorical variables, specifically generation, gender, and marital status. The results indicate substantial differences in healthy eating intention scores between the Millennials and Generation Z as well as for married and single individuals. Additionally, an important difference was observed in the attitude scale scores between men and women. The policy makers might employ the findings to build strategies for educating the public about proper nutrition and encouraging the adoption of healthy eating habit.

Keywords: *Attitude, Categorical Variables (Generations, Gender and Marital Status), Healthy Eating Intention, Knowledge, Satisfaction*

Introduction

Nowadays, healthy eating has become crucial especially to younger generations. According to the National Health and Morbidity Survey 2023, 31.3% of Malaysians were overweight and 22.2% were obese, making up over half (53.5%) of the population (Ministry of Health Malaysia, 2023). Prior data from the same survey in 2019 indicated that 30.4% of adults were overweight and 19.7% were obese, accounting for 50.1% of the adult population (Ministry of Health Malaysia, 2019). This demonstrates the rising trend in overweight and obesity rates continues. Making matters worse, it was found that only 4.9% of adults consumed the recommended daily servings of fruit and vegetables while 29.9% of adults were physically inactive (Harun & Nizam, 2024). Indeed, this matter has become a public health crisis.

Furthermore, Malaysia topped the Southeast Asian country chart for overall obesity costs due to its proportion of nominal gross domestic product (GDP) came in at 0.80%, estimated to be between US$4 and US$7 billion in monetary figure (New Straits Times Leader, 2024). This economic impact of obesity reminds us of the wisdom of the ancient adage: prevention is better than cure. Therefore, intervention strategies imposed among younger individuals are necessary because obesity has reached at an unhealthy level. As lifestyle diseases such as hypertension, diabetes, and cardiovascular issues rise, public health initiatives increasingly emphasise the importance of maintaining a balanced diet especially among younger population. Younger population in this study refers to the generation definition made by Dimock (2019) of Pew Research Center, comprising the Millennials who were born between 1981 and 1996 (current age: 28 till 43 years old) whereas Generation Z are those who were born between 1997 and 2012 (current age: 12 till 27 years old).

Therefore, this research aims to fill the gap by examining the factors of knowledge, satisfaction and attitude that shape healthy eating intentions among adults particularly between Millennials and Generation Z with the goal of developing more effective intervention and policies to encourage healthier dietary behaviours in this critical demographic.

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Literature Review

The followings are the seven sections to be discussed for the study's literature review.

Behavioural Intention as in Theory of Planned Behaviour

Intention on its part is a conscious plan to perform a given behaviour at some other time in the future as defined by Ajzen (1991). It is underpinned by the renowned grand Theory of Planned Behaviour (TPB) founded by Ajzen in 1991. In relation to the context of study, individuals who have positive attitude to healthy foods are likely to possess intention towards healthy eating (Smith & Jones, 2023; Brown & Green, 2023; Doe & Lee, 2024).

Knowledge

Consumer awareness and knowledge can develop the intention to use environmentally friendly products and innovations. Knowledge is important for the intention to consume healthy food. It helps to enhance the level of information and knowledge of general consumers and also helps to promote healthy eating habits intervention (Verneau, Sodano & Sannio, 2014). Moreover, Lee, Kim, and Jung (2022) confirm the positive interrelatedness between young individuals' food knowledge and sustainable eating habits. They suggest that encouraging ecological eating practices and advancing the creation of a sustainable society require raising young individuals' food literacy through education.

Attitude

Attitude represents the overall evaluation of the perceived consequences of particular behaviour under the consideration of an individual (Aizen, 1991). A positive attitude toward behaviour can guide the behaviour to perform that behaviour (Yadav & Pathak, 2016). Chang (2014) concurs that those with strong attitude towards a balanced diet regard healthy eating habits as more importance. In addition, Rezai, Teng, Shamsudin, Mohamed, and Stanton (2017) postulate that attitude positively and significantly influences the intention to consume healthy food among the Malaysian sample.

Satisfaction

Satisfaction is a post purchase action behaviour that indicates the feeling of the consumers after using a particular product or service. It indicates the general assessment of consumers on the basis of consuming the goods or services (Özkan, Süer, Keser, & Kocakoç, 2019). This study is supported by Türkmen and Sivrikaya (2020) in which they found that there is a relationship between eating healthy food and life satisfaction.

Generation

There are studies indicate that generation is one of the factors that significantly shape healthy eating intentions. Millennials and Generation Z are the main group of younger generations who exhibit a strong preference for health-conscious food choices, driven by increased awareness of nutrition and wellness trends. For instance, Leijon, Algotson, Bernhardsson, Ekholm, Ersberg, Höök, Klüft, Müssener, Garås, and Nilsen (2024) highlight that younger generations are more likely to engage in health-promoting behaviours which include healthy eating due to social media exposure and peer influence. Conversely, older generations may have different dietary habits influenced by traditional food practices and less exposure to contemporary health information. Moreover, they also found that generational differences in food preferences and health beliefs can lead to varying intentions towards healthy eating, with younger generations showing a greater inclination towards plant-based diets and organic foods.

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Gender

Numerous studies have investigated the complex interplay between one's gender identity and their intention to adopt healthy eating practices, yielding a wealth of insightful findings that defy simplistic generalizations. Recent study conducted by Chard et al. (2024) identified that there were gender differences in sustainable diet behaviours whereby women generally exhibit a stronger intention to engage in healthy eating compared to men, often driven by health consciousness and social norms surrounding food choices. In detail, women tend to choose healthier foods and eat regular meals, while men show preferences for specific tastes and meal-related behaviours. Furthermore, men may prioritize convenience and taste over health, which can hinder their healthy eating intentions (Feraco et al., 2024). Moreover, according to Roberta (2020), cultural factors also play a role, as gender norms can dictate the types of foods considered acceptable or desirable for each gender, further influencing dietary intentions. Women tend to adhere more to healthy dietary programs due to health awareness and body image concerns, while men show more consistency in dietary changes. Fascinatingly, Abdella (2023) found that while women are more likely to intend to eat healthily, men may show a greater willingness to change their eating habits when motivated by specific health-related information. Overall, while gender differences in healthy eating intentions are evident, the interplay of social, cultural, and individual factors complicates this relationship, suggesting a need for targeted interventions that consider these dynamics.

Marital Status

There are various studies found that marital status significantly influences healthy eating intentions when they tend to adopt healthier dietary habits compared to their unmarried counterparts. A study in Malaysia highlighted that married individuals' healthy lifestyle intentions were influenced by their attitudes and perceived behavioral control, which were notably stronger among those in partnerships (Abdullah & Osman, 2023). Furthermore, according to Zyra et al. (2024), marital conflict can negatively impact dietary habits, particularly among mothers, indicating that the dynamics within a marriage can also affect healthy eating intentions and also affects fostering healthy eating habits among preschoolers. Overall, Regina et al. (2018) conclude that, being married appears to foster healthier eating behaviors, while unmarried individuals may face challenges in maintaining such habit. These findings underscore the complex interplay between marital status and dietary intentions.

Research Methodology

The chosen participants were reached out to through a WhatsApp group, where a hyperlink to the internet-based questionnaire was provided, spanning from June to September 2022. Therefore, a grand total of 577 participants were obtained. However, after carefully examining the responses and eliminating any that were left blank or showed a pattern of straight-line answers, only 547 valid responses were used for analysis. The questionnaire comprised two components, namely: 1) demographics and 2) characteristics related to healthy eating. The latter part comprises 11 items, which include the initial set of 16 questions. The survey used a 7-point Likert scale, which spans from 1 (indicating complete disagreement) to 7 (indicating strong agreement).

The questionnaire was modified and incorporated from other sources, as indicated in Table 1. Meanwhile, the remaining questions received answers regarding the demographic characteristics of the respondents.

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Table 1: Major Variables and The Sources

Variables	Sources
Behaviour intention	Lee et al. (2018)
Knowledge	Al Mamun et al. (2020), Lee et al. (2018)
Satisfactions	Lee et al. (2018)
Attitude	Fila (2006), Al Mamun et al. (2020)

Next, Kaiser-Meyer-Olkin Measure (KMO) test was conducted to check the suitability for factor analysis. As the outcomes were found to be significant, factor analysis was thus carried out. Theoretically, it is one of the most useful methods known for studying and validating the internal structure of research instruments (Nunnally, 1978; Pedhazur & Schmelkin, 1991; Kieffer, 1999; Henson & Roberts, 2006). Next, principal component analysis (PCA) with varimax rotation was implemented to investigate the instruments; upon their confirmation, the data were subjected to reliability and normality tests using kurtosis and skewness.

Following factor analysis, the next analysis was carried out using an independent t-test, followed by measuring the effect size via eta squared. A test of independence was performed to check whether the two-subgroups for generations, gender and marital status were rated differently for the mean scores associated with the major variables (i.e. behavioral intention, knowledge, satisfaction and attitude). Eta squared represents the proportion of variance for the dependent variable that is explained by the independent variable (Pallant, 2001). The current study utilised Cohen's (1988) guidelines to interpret the strength of the effect size.

A Chi-square assessment was then conducted to explore the relationship between two categories of three demographic variables (i.e. generations, gender and marital status), which was then cross tabulated with three items each, namely 1) accountability for nutrition; 2) frequency of a healthy diet; and 3) weekly physical activity.

Findings

This section presents an overview of the participants' characteristics and the trends of certain health-related issues. It is followed by a discussion on the specific analytical methods employed, including descriptive analysis, reliability tests, factor analysis, independent t-tests, and cross-tabulations.

Table 2 presents a summary of the demographic characteristics of the participants. The sample size was evenly divided between males (51.4%, 281) and females (48.6%, 266). The majority of participants were born in 1997 or later (74%, 405). Additionally, a significant proportion of participants were single (76.8%, 420) and nearly half of them held a bachelor's degree (47.3%, 259). In terms of residential area, 53.4% (292) resided in urban areas, while 17.4% (95) lived in rural areas.

Table 2: Demographic of The Respondents

Variable	Items	Frequency	Percentage
Gender	Female	266	48.6
	Male	281	51.4
Generation	Millennials	142	26
	Generation Z	405	74

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Marital Status	Married	127	23.2
	Single	420	76.8
Education	Diploma or Certificate	197	36
	Postgraduate	13	2.4
	Secondary school	78	14.3
	University bachelor's degree	259	47.3
Residential	Rural	160	29.3
	Suburban	95	17.4
	Urban	292	53.4

Before examining the healthy trend of the respondents, let us have a look at their Body Mass Index (BMI) in Figure 1. There are 547 of them, and of those, 62.7% have a normal BMI, 9.3% are underweight, and 28% are either pre-obesity or obese.

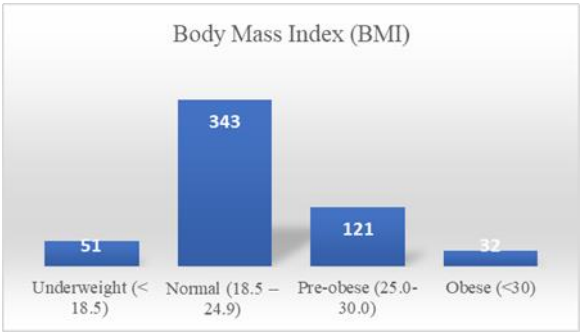

Figure 1: Body Mass Index (BMI)

It can be seen that the frequency of a healthy diet among respondents follows a normal distribution curve in Figure 2. Only 7.7% (42) of the respondents had always eaten healthily. 14.6% (80) of them regularly eat healthy foods. A majority of them, or 44% (241), sometimes eat a healthy diet. 26.3% (144) rarely had a healthy diet, whereas 7.3% (40) never do so.

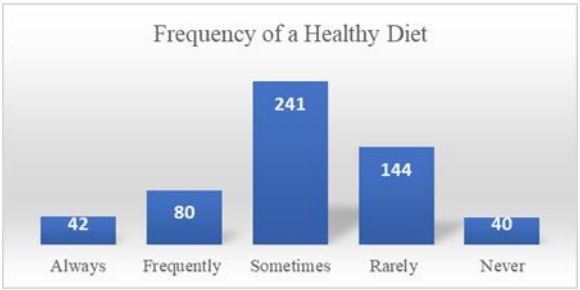

Figure 2: Frequency of a Healthy Diet

According to Figure 3, just 8.8% (48) of people engage in vigorous physical activity each week, whereas 22.9% (125) and 26.1% (143) of the respondents exercise 2-3 times per week and at least once each week, respectively. Unfortunately, 34.6% (189) of respondents exercise irregularly, which is a depressing fact.

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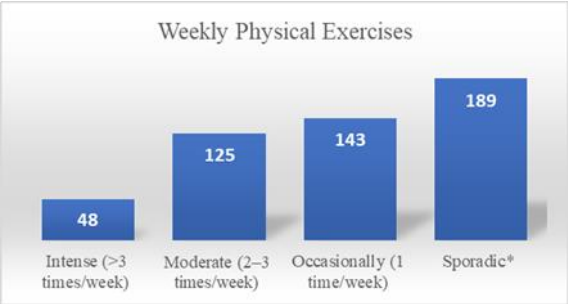

*(occurring at irregular intervals/week)

Figure 3: Weekly Physical Exercises

In Table 3, the research descriptive analysis was presented. The mean (M) and standard deviation (SD) of the respondents' behavioural intention (M=4.3620, SD=0.6517) and satisfaction (M=4.2297, SD=0.6888) were both slightly above average. As opposed to Knowledge (M=3.8495, SD=0.7442) and Attitude (M=3.7514, SD=0.9196), which were below average. A normality test was also performed on these variables. The results of the univariate skewness and kurtosis tests are also displayed in the same table. Behavioural intention, knowledge, satisfaction, and attitude all had skewness and kurtosis values between ±1 and ±7. It was discovered that the study's four main variables were all normally distributed as a result.

Reliability tests were then performed on the key variables. According to Nunnally (1978), established scales have a reliability of 0.8–0.9. As shown in Table 4, the study's Cronbach alpha was higher than 0.7, with values for behavioural intention, knowledge, satisfaction, and attitude of 0.774, 0.798, 0.817, and 0.781, respectively. Three items for factor knowledge and one item for attitude were taken out.

Table 3: Descriptive and Normality for The Major Variables

Variable	Mean	SD	Skewness	Kurtosis
Behavioural Intention (BI)	4.3620	0.6517	-0.9577	0.7601
Knowledge (KN)	3.8495	0.7442	-0.3314	-0.1609
Satisfaction (SA)	4.2297	0.6888	-0.6068	-0.3007
Attitude (AT)	3.7514	0.9196	-0.4875	-0.2611

The results of the factor analysis were explained in the paragraphs that followed. In the study, the Kaiser-Meyer-Olkin Measure of Sampling Adequacy (KMO) was initially described. To determine whether the data were suitable for factor analysis, the KMO approach was employed. The KMO for the study was 0.880, which indicated that it satisfied the condition because it was higher than 0.50 and suggested a meritorious index. Barlett's test also produced a result of 2363.7 with a significance level of 0.001. This showed that there was no correlation between the variables, enabling factor analysis. The researcher felt safe enough to move forward with factor analysis after these two tests.

The primary focus of exploratory factor analysis (EFA) is communality. Communalities are the variation in observed variables that may be attributable to a single common cause. Table 4 demonstrates that with extraction values larger than 0.5, 11 of the examined items satisfied the communality requirement. The communalities value increases with the degree of connection between the variable and the given factors. For example, BI1 can explain 81.6% of the factor if

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its value is 0.816. The other components all have values greater than 0.5, demonstrating that they can each fully explain the factor.

In order to calculate the anti-image correlation, measures of sampling adequacy (MSA) were utilised. The value was obtained by looking at the diagonal value with the letter "a" next to each value in SPSS. The remaining 4 were determined to be less than 0.5, while 11 of the 15 items under examination satisfied the MSA requirements (above 0.5). The entries with low factor values were thus eliminated from the list, leaving 11 items instead of the original 15. These 11 items allowed for further factor analysis.

The process of factor loading ended with factor determination. To ascertain whether item corresponds to which factor (and to demonstrate the relationship between the items and the construct), the loadings were examined using a rotating component matrix. The lack of independent and dependent variables in the data set necessitated the use of Principal Components Extraction and Varimax Rotation. According to the results (see Table 4), the loading and cross loading were both greater than 0.5. The Rotated Component Matrix corresponded to the loading factor coefficients of 11 items in the 1, 2, 3, and 4 factors. Factor 1 was shown to be associated with items BI1, BI2, and BI3, with correlation coefficients ranging from 0.720 to 0.816. KN1, KN2, and KN3 had correlation coefficients of 0.721, 0.727, and 0.668, respectively, with factor 2. Factor 3 had correlation coefficients of 0.759, 0.709, and 0.734 with SA1, SA2, and SA3, respectively. Factor 4 was associated to AT2 and AT3 by values of 0.820 and 0.768, respectively.

Table 4: Factor Analysis Results

	1	2	3	4	Communalities	Anti-image correlation
BI1	0.816				0.757	.853[a]
BI2	0.768				0.679	.892[a]
BI3	0.720				0.677	.910[a]
KN1		0.721			0.721	.850[a]
KN2		0.727			0.727	.859[a]
KN3		0.668			0.668	.908[a]
SA1			0.759		0.759	.875[a]
SA2			0.709		0.709	.908[a]
SA3			0.734		0.734	.895[a]
AT2				0.820	0.820	.836[a]
AT3				0.768	0.768	.874[a]
Cronbach	0.774	0.798	0.817	0.781		
Eigenvalue	2.172	2.075	2.036	1.736		
% of Variance	19.749	18.864	18.513	15.779	72.905	

The generation, gender and marital status mean scores for the major variables were examined using an independent sample t-test. Table 5 contains a summary of the research findings. First, mean values for the key factors and gender are examined. It was discovered that men (M=3.8470, SD=0.9199) and women (M=3.6504, SD=0.9101; t(545)=-2.511, p<0.05) scored quite differently on the attitude scale. On the other hand, because the magnitude of the changes in the means was so modest (eta square=0.011), gender might only be responsible for 1% of the variance in the variable attitude. Overall, there were not significant variations between the mean

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scores for the three key variables—behavioural intention, knowledge, and satisfaction—based on gender.

Next, the mean scores for generation were then examined using an independent sample t-test. It was discovered that the scores for behavioural intention between Millennials (M=4.5141, SD=0.5720) and Generation Z (M=4.3086, SD=0.6699; t(545)=3.517, p<0.01) were very different. On the other hand, the size of the changes in the means was fairly tiny (eta square=0.022), suggesting that generations may only be responsible for 2% of the variance for the variable behavioural intention. The other important factors' mean scores, including knowledge, satisfaction, and attitude, were generally not significantly affected by generation.

Last but not least, the independent sample t-test was used to assess the marital status key component mean scores. For behavioural intention, it was discovered that married people (M=4.4856, SD=0.5950) scored significantly higher than single people (M=4.3246, SD=0.6640; t(545)=2.450, p<0.05) did. Contrarily, the size of the mean changes was relatively small (eta square=0.01), suggesting that marital status may only be responsible for 1% of the variance in behavioural intention. Based on marital status, there were no substantial variations in the mean scores for the three key factors, knowledge, satisfaction, and attitude.

Table 5: Independent Sample T-Test for Generation, Gender and Marital Status

	Generation				**Gender**				**Marital Status**			
Variable	Millennials	Generation Z	t-value	p-value	Male	Female	t-value	p-value	Married	Single	t-value	p-value
BI	**4.514**	**4.309**	**3.261**	**0.001**	4.332	4.39	-1.044	0.297	**4.486**	**4.325**	**2.45**	**0.015**
KN	3.918	3.826	1.273	0.204	3.784	3.911	-1.994	0.047	3.900	3.834	0.877	0.381
SA	4.329	4.195	1.994	0.047	4.164	4.292	-2.174	0.03	4.299	4.209	1.298	0.195
AT	3.828	3.725	1.146	0.252	**3.65**	**3.847**	**-2.511**	**0.012**	3.894	3.708	1.996	0.046

Consequently, this section discusses the cross-tabulation analysis results. The study's goal was to discover if there was any relationship between these three questions: 1) accountability for nutrition; 2) frequency of a healthy diet; and 3) weekly physical activity and the three categorical variables; generation, gender and marital status.

According to Table 6, the respondents' generation were compared to those of the three questions. The only question that is relevant is weekly physical activity, which has a chi square value of 6.045 and at the 5% level. In other words, Millennials supported 29.8% of weekly physical activity and Generation Z supported 70.2% of weekly physical activity.

Table 6: Cross Tabulation on Generation

Items	**Category**	**Millennials**	**Generation Z**	**N**	**Chi Square**
Accountable for your diet	Yes	26.70%	73.30%	524	2.054
	No	8.70%	91.30%	23	(0.152)
Frequency of a healthy diet	Rarely	22.10%	77.90%	122	0.955
	Frequently	27.10%	72.90%	425	(0.328)
Weekly physical activity	Rarely	20%	80%	215	6.045
	Frequently	29.80%	70.20%	332	(0.014)

*p-value in the parenthesis

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According to Table 7, 52.3% of males and 47.7% of females agreed on accountability. According to the chi square value of 3.383, there was a 10% significant difference in responder accountability for their diet and gender. When it was investigated whether there are gender disparities in weekly physical exercise, the results show that 41.9% of males stated they did it regularly compared to 58.1% of women and the chi square value of 29.579 is significant at the 1% level.

Table 8 shows that 76.1% of singles and 23.9% of married people believed that someone was responsible for the diet. When it was examined whether there are differences by marital status in the frequency of a healthy diet and weekly physical activity, the results for the former show that 24.5% of married people said they did it frequently compared to 75.5% of single people, while the results for the latter show that 24.3% of married people said they frequently conduct the weekly physical activity compared to 74.7% of single people. All of the chi square results, however, are discovered to be insignificant.

Table 7: Cross Tabulation on Gender

Variable	Category	Female	Male	N	Chi Square
Accountable for your diet	Yes	47.70%	52.30%	524	3.383 (0.066)
	No	69.60%	30.40%	23	
Frequency of a healthy diet	Rarely	41.80%	58.20%	122	2.587 (0.108)
	Frequently	50.60%	49.40%	425	
Weekly physical activity	Rarely	34%	66%	215	29.579 (0.001)
	Frequently	58.10%	41.90%	332	

*p-value in the parenthesis

Table 8: Cross Tabulation on Marital Status

Variable	Category	Married	Single	N	Chi Square
Accountable for your diet	Yes	23.90%	76.10%	524	2.054 (0.152)
	No	8.70%	91.30%	23	
Frequency of a healthy diet	Rarely	18.90%	81.10%	122	2.587 (0.108)
	Frequently	24.50%	75.50%	425	
Weekly physical activity	Rarely	20%	80%	215	1.770 (0.183)
	Frequently	25.30%	74.70%	332	

*p-value in the parenthesis

Discussion

The present study explores the factors influencing healthy eating intentions among Malaysian adults, specifically focusing on the differences between Millennials and Generation Z, males and females, as well as married and unmarried. The alarming rise in obesity rates in Malaysia, where over half of the adult population is classified as overweight or obese, necessitates a deeper understanding of dietary behaviours and intentions within these demographic groups. This discussion synthesizes the study's findings and situates them within the broader context of existing literature on healthy eating behaviours.

The results indicate significant generational differences in healthy eating intentions, with Millennials and Generation Z exhibiting distinct patterns. Millennials, born between 1981 and 1996, tend to prioritize convenience and cost-effectiveness in their food choices, while

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Generation Z, born between 1997 and 2012, demonstrates a stronger inclination towards health consciousness and ethical considerations regarding food production. This aligns with findings by Leijon et al. (2024), which suggest that younger generations are more influenced by social media and peer dynamics in their dietary choices. The emphasis on health-promoting behaviours among Generation Z can be attributed to their digital engagement and heightened awareness of nutrition trends, reinforcing the need for targeted health promotion strategies that resonate with their values.

Furthermore, the study highlights that Generation Z's strong ethical values related to environmental sustainability and animal rights significantly influence their dietary preferences. This finding supports previous research indicating that ethical considerations are increasingly shaping food choices among younger consumers (Brown & Green, 2023). As such, public health campaigns should leverage these motivations to foster healthier eating habits within this demographic.

The analysis also reveals notable gender differences in healthy eating intentions, with women exhibiting higher scores than men. This finding is consistent with existing literature that suggests women are generally more health-conscious and proactive about their dietary choices (Chard et al., 2024). The implications of these gender differences are critical for designing effective public health interventions. Campaigns aimed at promoting healthy eating should consider tailoring messages to address the specific motivations and barriers faced by different genders. Moreover, understanding the underlying factors contributing to these gender disparities can inform strategies to enhance men's engagement with healthy eating practices. For instance, incorporating elements that emphasize convenience or social aspects of healthy eating may resonate more with male audiences.

The examination of marital status as a variable influencing healthy eating intentions among Malaysian adults reveals significant insights into dietary behaviours and preferences. The findings indicate that marital status plays a crucial role in shaping individuals' intentions towards healthy eating, with distinct differences observed between married and single individuals.

The data suggest that married individuals tend to exhibit higher healthy eating intention scores compared to their single counterparts. This aligns with existing literature that posits married individuals often have more stable eating patterns, potentially due to shared meal preparation responsibilities and a greater emphasis on family health (Smith & Jones, 2023). The social dynamics of marriage may foster an environment where healthy eating is prioritized, as couples often collaborate to make dietary choices that benefit their collective well-being.

Conversely, single individuals may experience greater variability in their eating habits. Factors such as convenience, time constraints, and financial considerations can lead to less consistent healthy eating practices among this demographic (Brown & Green, 2023). The lack of a partner may result in fewer shared meals and less motivation to prepare nutritious food, contributing to lower healthy eating intention scores.

The study underscores the importance of knowledge, satisfaction, and attitude as key predictors of healthy eating intentions. Higher levels of nutritional knowledge were associated with more positive attitudes towards healthy eating, corroborating findings from Lee, Jin, & Kim (2018) that highlight the critical role of food knowledge in shaping dietary behaviours. This suggests

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that enhancing nutritional education could be a vital component of interventions aimed at improving dietary habits among young adults.

Satisfaction with food choices also emerged as a significant predictor of healthy eating intentions. Individuals who reported higher satisfaction levels were more likely to express positive intentions towards consuming healthy foods. This aligns with research by Liu & Grunert (2020) which found a strong correlation between life satisfaction and food-related satisfaction. Therefore, public health initiatives should focus not only on promoting healthy food options but also on enhancing overall satisfaction with dietary choices.

Limitations and Future Research Directions

While this study provides valuable insights into the factors influencing healthy eating intentions among Malaysian adults, it is essential to acknowledge its limitations. The cross-sectional design limits causal inferences regarding the relationships between variables. Future research could benefit from longitudinal studies to better understand how healthy eating intentions evolve over time.

Additionally, expanding the sample size to include a more diverse population across different regions of Malaysia would enhance the generalizability of the findings. On top of that, investigating other factors such as socio-economic status, cultural influences, and individual motivations that may influence dietary behaviours could provide a more comprehensive understanding of the complexities surrounding healthy eating intentions.

Conclusion

In conclusion, the study found that a majority of respondents have a normal Body Mass Index (BMI). Healthy eating habits and physical activity levels vary widely, with most individuals engaging in physical activity irregularly and only a small percentage maintaining consistent healthy eating habits. Mean scores for behavioural intention and satisfaction are slightly above average, while knowledge and attitude scores are below average. All variables were normally distributed, and reliability tests confirmed acceptable internal consistency. Exploratory Factor Analysis identified four distinct factors which are behavioural intention, knowledge, satisfaction and attitude, indicating strong relationships with the measured items. Gender differences were observed in attitudes and physical activity, with men having higher attitude scores and women engaging in more regular exercise. Generational differences showed that Millennial scored higher in behavioural intention, while marital status differences indicated married individuals had higher behavioural intention scores. The significant generational differences were found in weekly physical activity, with Generation Z being more active. Gender differences in physical activity were also significant, but no significant differences were found in accountability for nutrition or frequency of a healthy diet based on gender or marital status. Overall, the study highlights the importance of considering demographic factors when examining health behaviours and underscores the need for targeted interventions to address varying levels of physical activity and healthy eating among different groups.

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