FutureBridge

EXECUTIVE BRIEF 2026

NUTRITION ADHERENCE

From Better Products to Sustained Value

How food and nutrition companies can turn product potential into sustained consumer value



NAVIGATION

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HOW TO USE THIS REPORT

A Management Lens, Not a Prescription

The report is designed for leadership teams making portfolio, innovation, commercial, regulatory, and data decisions in nutrition. It treats adherence as an end-to-end consumer-routine capability, not a marketing, app, or subscription initiative.

Nutrition Adherence

Nutrition Adherence = the **sustained, appropriate use** of a nutrition solution within its intended role, occasion, and context over a period relevant to the value it is designed to create.

What it is not

Adherence is therefore **not synonymous with daily consumption, repeat purchase, or maximum frequency**. The appropriate behavior depends on the product's intended role.

Why it matters

A strong nutrition formulation is necessary, but it is not sufficient. Its value depends on whether consumers can use the solution appropriately and sustain the behavior for it to work.

IN THIS REPORT

In this report, "Nutrition Adherence" is not a prescription to consume more often or follow a rigid regimen. It is a **management lens** for determining whether an appropriate nutrition role can be sustained in real life and whether sustaining that role creates meaningful consumer value.



SECTION

01

Executive Summary

The Nutrition Growth is no Longer just Getting the Consumers to Buy

A strong formulation is essential, but its real-world value depends on matching the right nutrition solution to the right consumer and enabling them to use it appropriately and consistently.

The growth opportunity is not simply to sell more nutrition. It is to **ensure the right nutrition solution delivers its intended value in real life.**

The Shift – From product performance to sustained use

Nutrition is moving from product novelty to broader availability across categories. The challenge is therefore shifting from simply creating products consumers want to buy to understanding which nutrition roles consumers can realistically sustain

Buying the product is not the same as following a routine.

The Response – Design the routine, not just the product

Research indicates that personalized goals, self-regulation, and social support can aid adherence. To translate nutrition into meaningful real-world value, companies should ask:

- What role should the solution play for this consumer, and in which moments does it matter most?
- Where does the individual's routine break down, and which product, sensory, format, packaging, commercial, or digital interventions can remove the critical friction?

The opportunity: remove the friction that undermines good nutrition intention and enable consumers to sustain it.

The Payoff – Turn repeat purchase into sustained consumer value

Better adherence can potentially create a stronger relationship between **product use → consumer benefit → continued use → durable portfolio value**. The prize is not maximum consumption. It is durable consumer value: appropriate nutrition use that can be sustained and a portfolio system that knows when to scale, adapt, or stop.

The strategic question

For nutrition companies, the strategic question becomes: **How do we make the right nutrition behavior easier to sustain?**



SECTION

02

The Shift

Nutrition Intent ≠ Sustained Use

Nutrition innovation is producing more credible functional propositions across protein, fiber, fortified foods, supplements, healthy snacking, and medical nutrition. But stronger formulation does not automatically translate into sustained consumer value.

The strategic challenge is whether consumers can use the product as intended, at the right amount and frequency, and sustain that routine long enough to deliver its intended dietary value.

Product friction	Taste fatigue, tolerance, preparation burden, and format
Routine friction	Competing priorities, missed occasions, changing needs and household habits
Market friction	Affordability, access, availability and replenishment

Consumers may have strong nutrition intentions, but intention does not always translate into sustained use. The gap can come from sensory fatigue, disrupted routines, preparation effort, affordability, access, competing choices or changing individual needs.

METRIC	VALUE	DESCRIPTION
Behavior studies	35	Systematic review identifies individual, environmental and intervention-level barriers to adherence
Global adherence to Planetary Health Diet on PHDI	85/140	A measurable gap between current diets and defined healthier dietary pattern (2024)

Source: UNICEF/WHO/FAO 2024; PNAS 2024; Clinical Nutrition Insights 2025, as cited in the supplied source material.

Read-through

Nutrition adherence is not simply a motivation problem. It is an **access × behavior × intervention-design** problem.

The implication for nutrition companies is straightforward - better formulation alone does not guarantee sustained value. The winning system must make the appropriate behavior affordable, easy to initiate, easy to repeat, and relevant to the consumer's routine.



SECTION

03

The Routine Battleground

From Purchase to Sustained Value

The traditional commercial funnel measures success through trial, purchase, and repeat purchase. But nutritional value depends on what happens after purchase: whether the consumer uses the product appropriately, fits it into daily life, and continues the behavior over time.

WHO explicitly includes "following a diet" and lifestyle changes within its definition of adherence, reinforcing that adherence is fundamentally about behavior, not simply product ownership.

The strategic question is no longer only whether consumers purchase the product, but whether they can use it appropriately and sustain its intended role in everyday life.

TRADITIONAL MODEL	ROUTINE-LED MODEL
Formulation → Trial → Purchase → Repeat	Need state → Product role → Trial → Appropriate use → Persistence → Consumer value → Sustained value
SKU as unit of growth	Routine as unit of strategy
Purchase as behavioral proxy	Actual use + occasion + consistency
Promotion and replenishment	Routine continuity
First-use sensory preference	Experience that remains acceptable over time
Broad consumer messaging	Support around specific barriers

Source: 52 studies | 24,652 participants. A 2026 meta-analysis found that digital interventions targeting healthy/sustainable eating produced a small positive effect (d=0.33), useful evidence that behavior can be influenced, but not through a single universal solution (JMIR).



Read-through

The important change is not from "product" to "digital." It is from tracking transactions to understanding behavior. A 2023 systematic review of 35 studies found that adherence to diet and lifestyle interventions is shaped by three broad areas: individual factors, the surrounding environment, and intervention design. Social support, self-regulation, and personalization were among the recurring facilitators. This means companies can influence adherence through more than communication, for example: Format → Convenience → Occasion → Taste → Affordability → Support → Replenishment. **The strategy is to move from SKU to routine.**

Repeat Purchase is not Adherence

A repeat purchase tells us the consumer bought again. It does not tell us whether the product was used as intended or just sustained over time. Repeat purchase remains an important commercial measure, but it is not a measure of adherence.

SIGNAL	WHAT IT MAY OR MAY NOT MEAN
Repeat purchase	Continued use, promotion response, household sharing, or unused stock
Subscription renewal	Consumption continuity, auto-renewal, or excess inventory at home
High digital engagement	Behavior change or content consumption without product use; useful behavior support or simply content/app engagement
Flavor extension / New SKU	Useful variety or unresolved sensory fatigue
More SKUs	Better choice - portfolio breadth or unresolved friction
High distribution	Availability or weak actual usage

Read-through

Purchase data can tell us what entered the household. It cannot reliably tell us what was consumed, by whom, how often, or in what amount.

THE PURCHASE–CONSUMPTION GAP

- 16,356 purchases - compared with dietary recalls in a study of 196 household food shoppers
- Moderate agreement between food-purchase-based and actual diet-quality measures
- Range of agreement for individual nutrient measures

CASE ILLUSTRATION

A nutrition brand sees strong repeat purchases for a protein product. A conventional review interprets this as successful retention. An adherence-led review asks four additional questions:

- Was it actually consumed?
- Was it consumed at the intended frequency/portion?
- Did it fit naturally into the consumer's routine?
- Did the consumer continue because it delivered value or any other reason?

The transaction is not an endpoint. It is beginning of consumption journey.

ADHERENCE IS A BEHAVIORAL SIGNAL.



SECTION

04

The Evidence Discipline

Need for Nutrition Adherence

The gap is not simply a lack of behavioral data. It is the absence of a connected management approach that defines appropriate nutrition use, identifies barriers to sustaining it, and links behavioral evidence to consumer and business value.

The missing capability is connecting consumer behavior to business decisions

TODAY'S MANAGEMENT GAP

Sales & repeat purchase

What companies measure today

Actual use remains unclear

What they cannot see

THE MISSING LINK

No connected system to diagnose behavior, select interventions and validate value

THE FUTUREBRIDGE MANAGEMENT LENS

01	02	03	04	05
Define the intended role	Diagnose the friction	Design the intervention	Measure sustained use	Validate value

Nutrition Adherence

A management lens for defining appropriate nutrition use, diagnosing barriers, and improving sustained behavior in pursuit of consumer value.

Where Evidence ends and Strategy Begins

Research shows that nutrition behavior can be influenced, but the effect depends on how the intervention is designed and whom it is designed for.

There is no single "adherence solution.

69

INTERVENTIONS TESTED

Across 52 papers, researchers tested 69 digital interventions.

65%

USED GOALS & PLANNING

Goal-setting & planning were the commonly used behavior-change techniques.

d = 0.58 vs 0.30

WITH vs WITHOUT PROMPTS / CUES

Interventions using prompts/cues showed a larger effect than those without them.

86%

VARIATION ACROSS STUDIES

Results varied substantially across interventions and contexts.

Studies suggest that nutrition declarations can improve consumers' understanding of a product's nutritional content.

WHAT THE EVIDENCE SAYS	WHAT THE EVIDENCE DOES NOT ESTABLISH	WHAT FUTUREBRIDGE ADDS
▪ Adherence is multi-factorial. ▪ Barriers vary by intervention and context. ▪ Sensory, environmental, social and behavioral factors can influence sustained use. ▪ Digital interventions can help, but effects are variable. ▪ Adherence is defined and measured inconsistently across nutrition research.	▪ There is no universal nutrition adherence frequency. ▪ Repeat purchase is not equivalent to adherence. ▪ More consumption is not inherently better. ▪ Digital engagement does not automatically create adherence. ▪ A single intervention works across categories and consumers. ▪ Sustained use automatically means positive health value.	FutureBridge organizes these behavioral insights into an enterprise management framework: **define the intended role → identify the friction → design the intervention → measure appropriate sustained use → assess consumer and business value**

READ-THROUGH

The evidence does not say "digital = adherence."

It says that specific behavioral mechanisms can help and that their effectiveness depends on the consumer, context, and intervention design.

Build the capabilities to turn nutrition intent into appropriate behavior and behavior into lasting value.

The Evidence Chain: From Purchase to Value

A nutrition proposition needs different types of evidence at different stages, from "does it work?" to "will people use it?" to "will they keep using it?"

THE BEHAVIORAL EVIDENCE CHAIN

From transaction to business value – the steps to demonstrate Nutrition Adherence.

01 **PURCHASE**
Did they buy?

02 **USE**
Did they actually use it?

03 **CONSISTENCY**
Did the behavior recur?

04 **APPROPRIATE USE**
Was it used within the intended role?

05 **NUTRITION ADHERENCE**
Was appropriate use sustained over the relevant period?

06 **CONSUMER VALUE**
Did the sustained role create meaningful value?

07 **BUSINESS VALUE**
Did the intervention create viable economics?

Each stage requires its own evidence. Progression through the chain does not automatically establish consumer benefit or business value.

226

NUTRITION REVIEWS ASSESSED

Only 76 assessed dietary adherence, and just 19 explicitly defined what adherence meant.

174

STUDIES

A systematic review found that nutrition declarations generally improve consumers' understanding of nutritional content, while nutrition and health claims can increase perceptions of healthfulness and purchases, but these effects should not automatically be interpreted as improved diets

COMMENTARY

Evidence should follow the consumer journey. Scientific evidence can establish what a product can do. Consumer research can explain why people want it. Behavioral evidence can show whether they use it. Outcome evidence can test whether that use creates the intended benefit. Commercial data can show whether the model works economically.

The strategic gap is not a lack of evidence, but the ability to connect evidence across the consumer journey without treating one signal as a substitute for another.

Evidence creates value when it changes a decision, not simply when it adds another metric.



SECTION

05

The Five Capability System

Five Capabilities to Enable Appropriate Sustained use

Adherence is not an app, loyalty program, or subscription. It is the result of removing the barriers that make a nutrition behavior difficult to sustain.

#	CAPABILITY	MANAGEMENT QUESTION	SYSTEM FOCUS
01	Make it enjoyable	Will consumers still accept it after repeated exposure?	Maintain sensory acceptance over repeated use.
02	Fit it into life	Can the intended role fit naturally into an existing routine?	Connect the product to real consumer routines and occasions.
03	Make it easy to use	Can format, portion, preparation and packaging make appropriate use easier?	Reduce preparation, portion and execution friction.
04	Learn from real use	Can we determine whether the intended behavior is actually being sustained?	Measure actual behavior rather than relying on purchase proxies.
05	Adapt the offer	Can the proposition change when consumer needs or barriers change?	Respond to changing needs and demonstrated barriers.

Research identifies barriers and facilitators across the individual, environment, and intervention design, supporting the idea that adherence needs to be designed across the consumer experience, not added as a single digital layer.

READ-THROUGH

Durable nutrition routines are built by **removing friction at five points**: the product must remain enjoyable, fit naturally into life, be easy to use correctly, generate useful learning from real behavior, and adapt when consumer needs or usage patterns change. These capabilities should sit across R&D, sensory, packaging, marketing, consumer insights, and commercial, not inside a standalone "adherence" function.

Nutrition Adherence is not a feature to add to a product. It is an integrated product, routine, and experience design capability, enabling companies to make appropriate sustained use easier to achieve. Appropriate sustained use must be designed into the proposition, not bolted on after purchase.

Appropriate sustained use must be designed into the proposition, not bolted on after purchase



SECTION

06

Category and Market Applications

Adherence Varies by Category

There is no universal nutrition-adherence formula. The right intervention depends on why consumers stop, struggle, or change their behavior.

CATEGORY	KEY ADHERENCE QUESTION	PRIORITY DESIGN LEVER	BUSINESS IMPLICATION
Protein / active nutrition	Will consumers continue to enjoy and use it?	Taste, format and occasion flexibility	**Design for long-term.**
Fiber / gut health	Can consumers tolerate it and make it part of daily life?	Tolerance, dose simplicity and routine fit	**A clinically credible ingredient still needs a tolerable, easy-to-maintain consumption routine.**
Fortified foods / beverages	Can the nutrition benefit fit into something they already consume?	Habit integration, taste and affordability	**The lower the behavior change, the easier the proposition may be to sustain, but only if it remains affordable and acceptable.**
Healthy snacking	Does it make the better choice easier?	Portion, convenience and substitution	**The opportunity is to make the better choice easier, not simply add another snack to the diet.**
Meal replacement	Can the routine survive changing appetite, schedule and preferences?	Flexibility, satiety and variety	**The challenge is not proving that the format can work; it is designing a routine consumers can maintain.**
Supplements	Can consumers manage the regimen consistently?	Simplicity, reminders and persistence support	**Reduce the number of decisions the consumer has to make.**
Medical nutrition	Can the product overcome taste, tolerance, and caregiver burden?	Sensory acceptance, format, and support	**There is no single adherence lever, even within one nutrition category.**

READ-THROUGH

The same adherence strategy should not be applied across categories.

Protein may need better repeated-use experience; fiber may need better tolerance and routine fit; healthy snacks may need substitution and portion architecture; supplements may need simpler regimens; and medical nutrition may require product, caregiver, and service support. The strategic task is therefore to identify the dominant barrier first and then design the smallest intervention that removes it.

The category shapes the barriers. Diagnosis identifies the friction. The friction determines the intervention.

Market Context Shapes Adherence

The same nutrition product can face very different adherence barriers across markets. Convenience, affordability, access, household routines, and food culture can determine whether a proposition is easy to sustain. What is often **missing** is a clear connection between products and their influence on consumer behavior, and the specific interventions required to enable appropriate, sustained use.

WHERE CAN NUTRITION BECOME PART OF THE EXISTING ROUTINE?

Their potential advantage is lower behavioral friction because they can fit into an existing eating occasion.

OPPORTUNITY EXAMPLE	WHY IT MATTERS	QUESTION TO TEST
Protein breads / baked goods	Can add nutrition to an existing meal occasion	Can nutrition be added without compromising taste, texture or price?
Fiber-fortified staples	High-frequency foods can create repeated exposure	Can consumers use them regularly without tolerance issues?
Micronutrient-fortified staples	Nutrition can be embedded into familiar foods	Is the benefit clear without making the product feel "medical" and expensive?
Portion-led formats	The format can make the intended amount easier to manage	Does the format work in real household use?

MARKET / CONSUMER CONTEXT	LIKELY FRICTION	PRIORITY RESPONSE
Time-constrained	Preparation time and decision fatigue	Ready-to-use formats and existing occasions
Affordability-constrained	Price, pack size and frequency	Smaller packs, value architecture and familiar formats
Household-led	Shared consumption and unclear individual roles	Household-friendly portions and clear usage cues
Access-constrained	Availability, distribution and replenishment	Reliable distribution before digital engagement
Convenience-led urban	Portability, availability and time pressure	RTD, portable formats and occasion anchoring



READ-THROUGH

Adherence does not happen in a vacuum. The same product can be easy to sustain in one market and difficult in another because the consumer's food environment, budget, time, household structure, and access are different. This is why the intervention should address the dominant market friction, not just the product category. The intervention does not have to be digital.

Therefore, companies need a measurement system that tracks more than purchase.

Design for the market. Solve for the consumer. Enable appropriate sustained use.



SECTION

07

Leadership Playbook

From Nutrition Adherence to Enterprise Action

Build a Measurement System for Nutrition Adherence

Move beyond purchase metrics to understand whether nutrition is used as intended, sustained over time and creating value for both consumers and the portfolio.

FutureBridge's layered measurement system

There is no universally accepted nutrition-adherence metric today. The opportunity is to build a commercially useful measurement system without pretending that these measures are already industry standards.

RECOMMENDED MEASUREMENT ARCHITECTURE

01	**Commercial**	Purchase, distribution, trial and repeat purchase.
02	**Behavior**	Actual use, consistency, and appropriate use.
03	**Adherence**	Appropriate use sustained over the relevant period.
04	**Consumer value**	Evidence that the sustained routine delivers the intended value.
05	**Business value**	Incremental economics, viability and scalability.

READ-THROUGH

Repeat purchase is an important commercial signal, but it comes at the end of a much longer consumer journey. A stronger measurement approach tracks whether consumers access the product, start using it, use it appropriately, and sustain that behavior over time, before connecting these signals to consumer and business value.

The evidence base itself shows that nutrition adherence is measured inconsistently. This creates an opportunity for companies to define a practical measurement architecture around the behaviors that matter most for each category.

Nutrition Adherence becomes an enterprise capability when intended behavior, intervention design, measurement and investment decisions are managed as one integrated system.

Making Nutrition Adherence a Cross-Functional Business Responsibility

Adherence should be managed as a cross-functional business system, with clear ownership, a small set of KPIs, and predefined decisions when consumer behavior or economics fall short.

GOVERNANCE ELEMENT	RECOMMENDED DESIGN
Leadership owner	One senior leader accountable for the adherence agenda and cross-functional alignment
Routine / portfolio owner	A named owner responsible for the consumer journey from initiation through sustained use
Core team	Marketing, Consumer Insights, R&D / Sensory, Packaging, Commercial, Operations, Regulatory / Scientific and Data
Review cadence	Monthly performance review; quarterly decisions on scale, adapt, pause or stop
Decision rights	Agree upfront what success means, what evidence is required and when investment should change
Operating principle	Consumer value, evidence quality and commercial viability must be considered together

DECISION RULES – No adherence initiative without a clearly defined target behavior and baseline. No scale-up based on engagement or repeat purchase alone. No intervention should increase consumption unless the additional consumption is appropriate and creates consumer value. **Scale only when behavioral evidence and commercial economics support the case.**

WATCH-OUT – Do not create an "Adherence Team" that becomes **another silo**. The objective is to embed adherence thinking into existing R&D, Marketing, Commercial, and portfolio decisions.

Manage adherence like a business system, not a campaign.
Define the intended behavior. Diagnose the friction. Assign ownership. Govern for value.



SECTION

08

From Hypothesis to Capability

From Pilot to Scalable Adherence Capability – Prove Behavior Before Scaling

Start with the consumer problem, not the technology. Define the routine, identify why it breaks down, test the smallest intervention that could fix it, and scale only what creates evidence of sustained use and value.

IMPLEMENTATION PATH

PHASE	TIMING*	WHAT TO DO	OUTPUT
1. Diagnose	0–6 months	Identify a priority consumer routine, understand where it breaks down and establish a baseline	**Adherence Friction Map**
2. Pilot	6–12 months	Test one clear intervention against the identified barrier	**Validated intervention + consumer/business readout**
3. Integrate	12–18 months	Build the learning into product, packaging, communication and commercial decisions	**Cross-functional adherence system**
4. Scale	18–24 months	Expand only the interventions that demonstrate sustained behavior and viable economics	**Portfolio adherence playbook**

* Illustrative implementation horizon; timing should vary by category, market, and intervention complexity

ADHERENCE HYPOTHESIS

Target consumer + routine → specific barrier → targeted intervention → behavioral improvement → consumer/business guardrails.

EVERY PILOT SHOULD TEST FOUR THINGS

01 BEHAVIOR
Did sustained use improve?

02 CONSUMER
Did satisfaction / perceived value improve?

03 BUSINESS
Does the intervention have viable economics?

04 GUARDRAILS
Any regulatory, scientific, privacy or trust issues?

Example - Protein: If taste fatigue is causing drop-off, offering a format/flavor architecture designed for repeated use should improve continued use without reducing satisfaction or margin.

Don't scale the idea. Scale the evidence –

Prove the behavior. Validate the value. Embed the capability.



SECTION

09

The Path Forward

The Path Forward

The opportunity is not to create another "adherence program." It is to identify where valuable nutrition routines break down, remove the most important friction, and scale what proves effective in sustaining use and consumer value.

01.
WHERE TO PLAY

Where does sustained appropriate use materially influence consumer value?

Prioritize the categories, consumer needs, and occasions where adherence constrains the intended nutritional value.

02.
WHAT TO BUILD

Which barriers can we address more effectively through our product, portfolio, and commercial capabilities?

Determine whether the intervention requires changes to formulation, sensory, format, packaging, affordability, access, support, or digital tools.

03.
HOW TO INVEST

What evidence must we see before scaling?

Agree on appropriate-use measures, consumer-value evidence, economic thresholds, and the governance required to scale, adapt, or stop.

The opportunity is not to maximize consumption. It is to make appropriate nutrition use easier to sustain.

And the leadership question becomes: Where can we make the greatest difference by removing the smallest meaningful friction?

Implementation Note

THE FIRST PILOT

STEP 01

One target consumer

STEP 02

One important routine

STEP 03

One verified barrier

STEP 04

One targeted intervention

STEP 05

One pre-agreed scorecard

The leadership question

Where can we make the greatest difference by removing the **smallest meaningful friction**?

MEET OUR

Our Team



Rima Mittra

Director, Food, Agriculture & Nutrition

With 15+ years in Food & Nutrition, Rima translates advances in food science, shifting nutrition needs, and market trends into differentiated innovation and growth strategies for industry leaders.



Sabrina DeLay

Chief of Staff to the Group CSO, Global Head, Food, Agriculture & Nutrition

She drives strategic alignment and execution across global initiatives, ensuring coherence between vision, operations, and market impact.

Continue the conversation →

ABOUT

FutureBridge

FutureBridge is a global innovation and strategy consulting firm that helps companies anticipate disruption, decode emerging markets and technologies, and convert future signals into growth decisions. The firm works with leadership teams across food and nutrition, life sciences, energy, chemicals, mobility and industrial sectors to support innovation strategy, market intelligence, technology scouting, portfolio prioritization and future ready growth planning.

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