Concept Testing of Alternative Labelling
of Healthy / Less Healthy Foods

Research Report
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On Behalf Of
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Executive Summary

The Food Standards Agency is currently considering a number of ways of making it easier for consumers to choose a healthy diet. In particular, the White Paper: Choosing Health and the Agency’s Action Plan on Food Promotions and Children’s Diets include a plan to implement a system of front of pack ‘signpost’ labelling for foods. The intention of the system is to make it easier for consumers to choose a healthy diet by providing ‘at a glance’ information about the nutritional content of foods.

The purpose of this research, which was carried out for the Agency by independent researchers, was to test a range of concepts for how this signposting information might be presented to the consumer. The research examined which of the concepts consumers found most useful and easiest to understand. The five separate concepts tested are reproduced on page 5, along with details of the example products used to stimulate discussion in the focus groups.

Discussion groups were held throughout the UK (including Scotland, Wales and Northern Ireland). The sample covered adults of all ages, with and without children, and with a particular emphasis on consumers from socio-economic groups C2DE. Mini friendship discussion groups were also held with young people aged 16-18 and still in education.

The research revealed strong approval and support for the idea of front of pack labelling, which consumers felt would make it easier for them to assess the nutritional content of foods, and make healthier choices. Consumers felt that any signposting system should be independent from the food industry, with many naming the Agency as the appropriate recognisable body. Of the five concepts tested, two had significantly more promise than the others. These were:

- **A ‘simple traffic light’ system (option A)** - where foods are labelled with a single green, amber or red traffic light on the basis of their overall contribution to a balanced diet.

- **A ‘key nutrients’ system (option D)** – which rates each nutrient (for example as high (red), medium (amber) or low (green)).
Consumers considered both these schemes were straightforward and helpful, as well as being sufficiently prominent to attract notice. They felt they could use them to help choose a balanced diet.

The purpose of the research was to test the broad concept of each approach, rather than the detailed execution on the particular products used to prompt discussion. However, the research also offered useful guidance for how each concept might be further developed, and highlighted those points that might be covered in accompanying consumer information. This would be likely to include information on the criteria underpinning the schemes (e.g., on consumer understanding of terms like “saturates”, or the factors taken into account when allotting a particular colour traffic light) as well as advice on how consumers could apply the signposting messages to their everyday diets.

The research also took some initial views on the application of signposting to catering establishments, with the intention of informing more research at a later date. Consumers’ views on signposting in catering outlets varied significantly depending on the context, the type of outlet, and how often they were likely to eat there. While many consumers were against signposting in catering outlets that they visited only rarely or for treat occasions, consumers who frequently eat out of the home do have concerns about the availability of healthy options, and would welcome more help in making healthy choices. It was clear that a system operating in catering would need to take account of the diversity of the catering sector. For this reason, consumers felt that the same system could not be applied across both the retail and catering sectors. These findings suggest that in any further work, consideration should be given to whether there should be a focus on particular sectors of the catering industry with that context carefully defined.

The results of this research will be used to inform the Agency’s discussions with a range of stakeholders to decide which of the concepts to take forward for further development.
Signposting concepts – with details of stimulus products

Option A – Three Band System – ‘Simple Traffic Light’

- Chicken Wrap • Amber
- Ready salted crisps • Red
- Chocolate coated cereal • Red
- Frozen peas • Green
- Processed cheese spread • Amber
- Orange juice • Green

Option B – Five Band System – ‘Extended Traffic Light’

- Egg salad sandwich • Light green
- Carbonated Soft Drink • Red
- Processed Cheese • Amber
- Cereal bar • Light red
- Roasted peanuts • Red
- Pork sausages • Light red

Option C – Healthy logo

- Wholegrain cereal
- Retailer ‘healthy option’ chicken ready meal
- Diet soft drink
- Dried Apricots
- Fat free fruit yoghurt
- Pre-packed tuna salad
Option D – ‘Key Nutrient’

- Breaded fish shapes: M
- 99% fat free cereal: L
- Fromage frais multipack: L
- Prawn mayo sandwich: H
- Citrus juice drink: L
- Chocolate biscuits: H

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Option E – GDA key nutrients

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BACKGROUND

The Food Standards Agency’s (FSA) role is to:

- Protect consumers by effective enforcement and monitoring of food safety standards;
- Support consumer choice through accurate and meaningful labelling;
- Provide advice to the public and government on food safety, nutrition and diet.

The FSA is promoting the adoption of healthier eating patterns, and the effectiveness of this nutrition strategy depends in part on consumers being able to find out about the nutrient contents of the foods they eat. Earlier research has shown that consumers find it difficult to understand the nutrition labels currently used on food packaging. It has been suggested that simple front of pack signposting of healthy / less healthy food products in addition to the nutrition panel would make it easier to understand the information in order to make informed choices. Following discussions with stakeholders 5 signposting concepts to be used on food packaging have been identified as follows.

- Simple traffic light system (3 bands)
  - red, amber, green ‘lights’ to depict the healthiness of the food item as a whole.

- Extended traffic light system (5 bands)
  - as for the simple version but with more bands
  - could be expressed as for example, traffic light dots of different colours, or sliding scale of stars, $1^* = $less health, $5^* = $more healthy

- Healthy options signposted only
  - healthy options are able to display the signpost, less healthy options are not
  - various versions are used in different countries, often associated with charities such as national heart associations

- Signposting individual key nutrients
  - individual key nutrients, such as fat, sugar and salt, are signposted as being high, medium or low, and / or colour coded
  - Tesco announced earlier this year that they plan to trial this system and Co-op use a similar system as part of their back of pack label
• Signposting key nutrients using GDAs
  
  − Guideline Daily Amount (GDAs) developed by Institute of Grocery Distribution as a means of expressing the contribution a serving of food has to the whole diet
  − Individual key nutrients signposted with GDA information to enable the consumer to assess the quantities of these nutrients in a particular product
RESEARCH OBJECTIVES

Stated as follows.

Primary

• To establish which one or more of the signposting concepts consumers find preferable and most useful in terms of determining healthier choices

• To establish how each performs in terms of consumer understanding

• To understand the strengths and weaknesses of each concept, and to give guidance on those option(s) most likely to be effective (with the possibility of informing choice of options for inclusion in quantitative research)

Specifically

• To examine reaction to the 5 signposting concepts in terms of ease of understanding how the signpost could be used to make healthy choices

• How far does the concept need an accompanied explanation to aid understanding (particularly relevant for traffic light systems and signposting of key nutrients)

• Are there any food products that don't need signposting and why not?

• To gain initial feedback on the potential use of signposting concepts in a catering context

NB – The purpose of the research was to test the broad concept of each approach, and not to examine the detail of its application, or indeed the creative execution of the concepts and example products. It is anticipated that further work will be undertaken to consider and develop materials to support consumer understanding of the final signposting system, as appropriate.
CONCLUSIONS
CONCLUSIONS

Front of Pack Labelling

There was considerable approval and support for the idea of front of pack labelling, reflecting concerns among the sample over the content of packaged food in particular, and its relationship with diet and health.

It was thought that such a scheme would have to be independent from the food industry, and government provenance was assumed, with many naming the FSA as the likely source or regulating body.

Government provenance would also suggest a scheme would have been devised with a broad agenda focussed on health in mind, rather than a fussy or faddy one motivated by issues of dieting, weight loss or appearance.

Respondents felt that a front of pack system should make it easier for them to identify ‘the truth’ about the food they choose as the healthy or unhealthy nature of products should be more immediately obvious ‘at a glance’. They thought this would make it harder for any manufacturer or retailer who might wish to do so to ‘gloss over’ the real characteristics of their products, and would also make it harder for them, the consumer, to turn a blind eye to the significance of their choices.

Two of the concepts had significantly more promise than the others, the Simple Traffic Light, and the ‘Key Nutrients’ scheme.

Simple Traffic Light Concept

This concept often received an initially enthusiastic response, principally because it was thought very easy to grasp requiring very little or no explanation.

However, it could be assumed to be more all embracing than it was intended to be as the system was perceived to be a simple ‘ranking’ of foodstuffs on their overall healthiness. Some took this to include issues over which they had concerns other than key nutrients, for example, additives, or E numbers or artificial sweeteners. This means the scope of the system would need to be clearly explained.

Not all respondents responded positively to the concept with some feeling that it was too simplistic, particularly if they had concerns focussed on specific nutrients, while others felt it was too didactic.
And, following further consideration, some of the initial enthusiasm for the concept dissipated as respondents considered how they might use the scheme in practice, principally because of the difficulty in turning the scheme’s advice into action across a number of different categories of foodstuffs. It was thought difficult for example, to understand how the advice to eat sparingly, to eat in moderation, or to eat plenty would apply to a weekly treat on the one hand, and a daily staple on the other.

Those for whom this system had most appeal, imagined using it as a ‘rough and ready’ way of moving towards healthier eating. Others thought they would use it as a ‘filter’ to tell them whether they needed to read the nutrition panel or not, so for example they might simply buy any product with a green (eat plenty) label, whereas they would go on to read the nutrition panel for more information if it carried either amber (eat in moderation) or red (eat sparingly).

Key Nutrients Concept

This system also received an enthusiastic response, although this was initially less widespread than with Simple Traffic Light because it seemed to be more complicated when first introduced.

A benefit of this approach was that it was seen to be very explicit in terms of what it covered, with no potential to assume it embraced a wider set of diet or health issues than was the case. Conversely, its listing of four key nutrients could help to extend respondents’ personal agendas outside a narrow focus on dieting and weight by suggesting that they should be aware of the levels of each of the listed nutrients. At the same time the listing of key nutrients was reassuring for those who had specific concerns which focussed on one or more of these nutrients.

This concept was seen to be tonally factual and informative in nature, and not offering advice or making judgements.

There could be some confusion around the inclusion of saturates and sugar, as there was little clear understanding of the former and their relationship with fat, and there was uncertainty as to whether the latter referred to added sugar, or to natural sugar, and whether natural sugar was also a matter for concern. This seemed to reflect a general lack of understanding of these nutrients rather than the way the concept presented information about them. Ideally, understanding of saturates and sugar might be increased. Having said that some respondents assumed from the nature of the concept that consumption of either or both of these nutrients should be kept low because it covered other nutrients, for example, fat, which they knew to be best kept low.

The concept was thought simple and likely to attract attention on front of pack, and so likely to prompt re-evaluation of food choices.
It was also liked because it was seen to potentially lay bare some trade offs which might have otherwise gone unnoticed, for example, a food product might promote itself as ‘low fat’ but might be high in sugar. Packaging examples of this concept prompted more surprise than those for other concepts for this reason.

Initial enthusiasm for the concept could dim once respondents thought about how they would use it in their daily lives. All agreed that it would be clear at the extremes, for example if a product carried all green (low) or red (high) lights. Those who were already keeping an eye on specific nutrients for health reasons also felt they would find it easy to use, as it made the process of monitoring much simpler for them. They would either reject a product that was rated red or amber on their ingredients of concern, or look to the nutrition panel for more information, whereas if it were rated green they would feel they could go ahead and buy it without investigating further. Otherwise it was thought likely to be harder to make decisions where an item fell into the middle ground, with a spread of different ratings on the different nutrients. It was felt that this might become easier in practice, as it would be possible to compare brands, products, or even categories in order to form an impression of the relative merits of different choices. The nutrition panel might also be used initially to help understand the precise meaning of the ratings.

Quantification of Concepts

If the relative merits of the two systems were to be quantified it would be important to devise a method that could take into account their different initial appeal, the way this might change with developing familiarity, and the extent to which each relies on ‘practice’ and a competitive context.

The Simple Traffic Light concept had the more instant appeal, and appeared at first to be very easy to use, whereas the Key Nutrients Concept appeared more complex, but might work better for more people in practice in the longer term.

The Key Nutrients Concept might also benefit more from a ‘real life’ context, in terms of people’s understanding of how they would use it.

Catering

It should be stressed that the project only set out to gain initial feedback on the idea of labelling in a catering context so feedback in this area should be treated as information to inform further exploration and debate, rather than being used to make judgments as to the value and merit of implementing a system for catering.
It was clear that ‘catering’ spanned a wide range of eating occasions with food purchased from an equally diverse range of outlets.

The idea of applying a scheme to catering across the board met with an unenthusiastic and sometimes even hostile response. More extreme reactions stemmed from resentment at the idea that healthy eating concerns should be allowed to intrude into a ‘treat’ occasion, for example, a meal to celebrate a birthday, or an anniversary. Such occasions were thought to be relatively infrequent, so not a matter for concern anyway, and their very nature involved a suspension of normal rules. Strength of feeling about ‘treat’ occasions could colour reactions to the idea of labelling in a wider catering context. This suggested that in any further exploration consideration should be given as to whether there should be a focus on particular sectors of the catering industry with that context carefully defined.

Outside of ‘treat’ occasions, many felt they did not eat out often enough to feel that this had to be an area of concern for them, and this is a factor that should perhaps also be taken into account in any future work.

For those who did frequently buy food from catering outlets concerns were more likely to relate to what was available to eat from the outlets they bought from rather than how it was labelled. These respondents were often in situations where choice of outlet was limited, for example, some were delivery drivers while others were tradesmen working in various different locations, and others were employed on industrial estates with only basic catering facilities.

Respondents could also not see how one scheme could be applied across the catering industry, which they saw as populated by a plethora of often tiny independents operating alongside some much more significant businesses. There was perhaps a natural tendency to argue the case for the small business owner against the imposition of any form of control, and respondents could not see how the same rules could be reasonably applied to all types of business.

In addition, any system operating in small independents would be assumed to be inherently unreliable because of the nature of such businesses. For example owner / managed small sandwich bars were not seen to be consistent in portion control, and their suppliers and menu might well change from one week to the next, which was indeed part of their attraction. If the same scheme was universally employed its presence in such outlets might erode its credibility in wider use, for example in a retail environment.
RESEARCH FINDINGS
CONTEXT

The research was not designed to explore contextual issues in depth, and this should be born in mind when reading this section of the report. However, a number of contextual issues affected reactions to the concepts and in some cases have a bearing on how they should be evaluated, and so they are outlined as relevant background.

Diet / Health Concerns and Life-stage

The nature of concern and its corresponding dietary focus differed according to respondents’ life-stages, although we should also say that increased level of concern did not necessarily seem to be matched by the level of action taken, or how effective this may have been.

If they had concerns, teenagers, and young adults, especially females were focussed on weight, and perhaps skin in the sense of having a clear complexion. Those who were watching their diet with these issues in minds thought in terms of calories and sometimes fat, and sugar for those with complexion in mind. Females were on the whole more likely to have these concerns than males, and also seemed likely to have developed them at younger ages. In general male concerns about weight seemed most likely to develop at around 30, and were often seen as part and parcel of a shift to a generally more responsible lifestyle.

“As you get older you start putting on weight. Once you turn 30… it’s drummed into you, on telly, in the newspapers…”

Male, Single, 25-34, C1C2, South

Wider health issues related to diet tended to be seen as only affecting much older people.

“Like word association, you hear heart disease and you think of a sixty year old obese man.”

Female, Single, 18-24, BC1, N Ireland

Parents seemed likely to have developed broader concerns about all aspects of a healthy and wholesome diet focussing on their children. This meant that many believed that there could be some negative health issues connected to for example, additives, ‘Es’, fat, sugar, and processed food generally.
“My youngest child is hyperactive, and there are things that send him loopy.”

Mothers, 20-30, DE, Midlands

“I don’t mind the kids having junk food but you have to watch it”

Fathers, 25-34, BC1, Wales

“I do worry about sugar and the kids because it makes them crazy”

Fathers, 35-44, DE, Wales

However, acting in response to these concerns was subject to practical issues such as what a child might be willing to eat, and what food fitted in with an often busy and rushed lifestyle.

Concerns could initially arise with children in mind but then generalise to become of concern to adults in the household.

“You’ve got to admit that it’s changed a bit though, I sort of feel as though things are downhill from here and I have to become a bit more aware.”

Fathers, 35-44, DE, Wales

Older parents, empty nesters, and retired respondents tended to have more focussed health concerns most often in relation to heart, blood pressure, and cholesterol. Those concerned either suffered problems themselves, or knew (of) someone who did. In some cases respondents had been warned to keep an eye on their diet by their doctor, either as a general means of helping to stay in good health, or in order to tackle particular health problems. Doctors were likely to have mentioned specific nutrients such as fat or sugar, and sometimes also calories, in the course of these conversations. Others had picked up this information by word of mouth or from the media. As a result these respondents concerns often meant they focussed on specific nutrients, and seemed likely to be making much more serious efforts to monitor and control their intake.

“I have to keep an eye out because I have heart problems, most stuff has got salt and sugar in it, to enhance flavour and for long keeping.”

Male, Retired, 65+, C1C2, South
As might have been expected many did not conform to this general pattern of increasing concern for diet or health with increasing age. Some respondents in every life-stage segment were keenly aware of diet and health issues and described convincingly extensive steps they took towards healthy eating.

“I buy fresh veg, get my meat from the butcher, make my own sandwiches.”

Female, Single, 18-24, BC1, N Ireland

“Avoid ready meals, a healthy eating diet means focussing on eating fresh meat and veg… someone told me about the stuff they put into ready meals, they’re full of salt and sugar.”

Female, Single, 25-34, C1C2, Midlands

More commonly, many were aware of the issues but were not taking any action, either because they could not motivate themselves sufficiently or because they had tried to make changes in the past and found it practically too difficult to do so for a number of reasons. A few rejected the need for concern, and in a very small number of cases this was on their children’s behalf as well as their own. A small number of respondents had specific food intolerances, such as a wheat allergy which demanded careful attention, and which also made them more widely aware of the contents of the food they consumed.

“I look for foods that are as pure as they can be – that have had as little intervention as possible.”

Mothers, 35-44, BC1, Scotland

Unease Over Food

There was awareness of a plethora of food or diet concerns and related health problems that could ensue from them. There was no consistent theme to this, as each individual was aware of different issues and seemed to have more or less complete or accurate understanding of them.

These concerns included the following food and health issues:

− calories, fat, sugar, salt, Aspartame, sweeteners, dioxins, BSE, poultry ‘diseases’, animal husbandry, pesticides.
− obesity, diabetes, heart problems, cancers, hyperactivity in children, ADHD, etc, etc.
At the same time there was a perception that new ‘facts’ and concerns were always emerging, with recent examples given of ‘frozen’ fruit, and ‘ready to eat salad’ which had been washed in chlorinated water.

“I started eating oily fish cos I know it’s meant to be good for you, I trained myself to eat it and now it turns out I’m poisoning myself.”

Female, Empty Nesters, 45-54, DE, Wales

“Yeah like you think salads are good but then you have to wash those ready to eat ones because there’s chlorine on them.”

Female, Empty Nesters, 45-54, DE, Wales

“I heard that those salads are crap for you anyway, you might as well have a burger.”

Male, 16-17, In Education, BC1, South

“Even fish that was supposed to be good, you hear about the stuff in fish good, dyes and stuff, how can they think it’s good for you?”

Male, Single, 25-34, C1C2, South

All of this added up to create a general feeling of unease about the content of food and diet, rather than there being any structured understanding of the different issues.

For many it meant that the idea of ‘healthy food’ would ideally have meant much more than an appropriate balance of fat, sugar, salt and saturates. This was accompanied by a feeling that somehow the solution ought to be simple. As several respondents put it, just to be able to eat ‘food that has not been mucked about with’.

**Cues For Healthy Shopping**

Many used one or more of a number of cues as a shortcut to help them end up with a healthier shopping trolley. The most common of these were as follows.

- Putting their faith in brand they trusted. Such brands did not necessarily have to have an overt ‘health’ positioning, but were more often those
which dominated their sectors, and which those in question had been using for a number of years.

- Buying food with brand identities, names or range descriptors that seemed to suggest a healthy option, for example, ‘Low fat’, ‘Healthy Choice’, etc, etc.

> “If you’re on a diet you go for healthy options, low fat…”

Female, Single, 25-34, C1C2, Midlands

> “We’re told by the bloke that played cricket that it’s healthy.”

Male, Retired, 65+, C1C2, South

- Packaging visuals that suggested naturalness or wholesomeness, e.g., pictures of the ‘countryside’ or use of other ‘natural’ or healthy cues.

- Paying a premium, for example, by shopping at a particular supermarket chain, or buying a premium range or brand.

> “If you buy quality or a name you can rely on you can’t go wrong, and if you shop at places that are more expensive you know they’re better quality.”

Female, Single, 25-34, C1C2, Midlands

- Wholesome appearance of the food itself, for example, biscuits with a ‘rustic’ look.

There was a sense that many who used these cues knew or suspected deep down that they were really a way of them avoiding the truth about the choices they made. Many bought convenient processed food in order to help cope with a highly pressurised life-style, and using these cues may have helped to make such choices acceptable.

**Shopping and Food Preparation**

Time was a major issue for all respondents other than for some of those in the empty nester and retired life-stages.

This meant that food shopping trips were often rushed affairs, described by one respondent as ‘dash and grab’. These trips primarily involved buying the same
items as they had bought many times before while spending as short a time as was practically possible doing so.

“In the week when I’m working and I find I need something it’s a case of run in and grab it.”

Female, Single, 25-34, C1C2, Midlands

“The same sort of stuff week in week out.”

Mothers, 25-34, C1C2, South

There was often little ongoing evaluation of most food purchased as the ‘decision’ to buy a particular brand or item had usually been taken some time ago, and the nature and suitability of the selection had not been evaluated since. Empty nester and retired respondents could face a different practical problem of buying and cooking for only two or one. To an extent this was an issue of adjusting from a family buying pattern, but there was also a feeling that supermarkets were not really geared to such purchasers in terms of portion and pack sizes.

“As I live on my own I don’t cook for myself so much, I don’t really cook from scratch any more there’s no point just for me.”

Female, Empty Nesters, 45-54, DE, Wales

Experimentation was often prompted by lower price allied to a promise of taste and convenience rather than by a desire to seek out healthier options.

Shopping was often a fragmented process, and one bigger shop with several ‘top ups’ was a common pattern. This had perhaps been facilitated by the growth of more local food shopping outlets linked to major grocery multiples as well as an increase in the number of outlets offering extended shopping hours.

Time for food preparation was clearly also limited, especially for parents, and the use of pre-prepared or convenience food was often part and parcel of family members eating separate meals, particularly across the course of a weekday afternoon and evening. This was partly a matter of activities outside the home. It was commonplace across the sample for family members to arrive home at different times, and then for children to have various different activities which they had to go to, often being fetched and carried by their parents. It was also because children and adults within families often had different tastes.

“I am healthy but my kids won’t eat fruit and veg and there’s not much you can do about it.”

Fathers, 25-34, BC1, Wales
These factors contributed to the well documented trend for family dining to consist of a number of different meals often taken alone by individual family members spread over the period from late afternoon into early and mid evening.

**The Nutrition Panel**

There was universal awareness of the nutrition panel, and the vast majority of respondents claimed to have referred to nutrition panels at some point, even if only out of curiosity.

A substantial proportion of the sample claimed to use the nutrition panel, even if only when assessing new choices. The focus of this attention was often calories and/or fat. It sometimes included sugar, which was more likely with children in mind, and sometimes salt, which was more likely among those with blood pressure and heart concerns. Ingredients lists were also read by some with specific concerns, for example, particular ‘E’ numbers, a wheat allergy, etc.

As would have been anticipated the nutrition panel was criticised for its small size and complexity. It was thought physically hard to read, especially by older respondents, and also hard to interpret and put to practical use.

“The information on the back – could it be smaller?!”

Mothers, 35-44, BC1, Scotland

Respondents also complained of a lack of consistency in the way content was displayed, as this could be per pack, per item, or per 100 grammes.

Many claimed that it the nutrition panel was ‘impossible’ to use. However, in considering this feedback it is important to bear the issue of motivation in mind, especially as this will also affect how difficulty of use might impinge on evaluation of the concepts. Many women across all social grades and life-stages in the sample claimed to find the panel ‘no problem’ in calorie counting in order to lose weight.

“It’s ok, any woman who’s been on a diet can work out carbs and calories.”

Mothers, 25-34, C1C2, South

They also pointed out that it was only necessary to evaluate each choice once, and thereafter only new additions to their shopping. This suggested that in deciding which system to adopt consideration should be given to which one helps most those who are inclined to make some effort to take action. It would be easy to be swayed by calls for an easy system but some of those who make such
requests will be seeking a path of least resistance and may not be prepared to make any sustained effort to change their behaviour.

Cynicism

There was considerable cynicism expressed across the sample over the behaviour and motivations of food manufacturers and retailers. This emerged spontaneously and freely without being prompted by the moderators.

Respondents voiced the opinion that many in the food industry were at the least guilty of being ‘economical with the truth’, and thought that some were being deliberately deceitful. They gave the following as examples to support these assertions.

- Foodstuffs presented as healthy which were actually unhealthy.
- Use of unsafe or unsound practices, processes and ingredients in agriculture and manufacturing.
- Emphasising the positive and forgetting to highlight the negative, for example products promoted as ‘low fat’ which turned out to be high in sugar or salt.

“You think something like a chicken wrap will be healthy and it’s probably not healthy at all.”

Mothers, 25-34, C1C2, South

“These are portrayed as healthy foods and I don’t think they are.”

Female, Single, 18-24, BC1, N Ireland

Parents could particularly resent these ploys where they potentially impinged on their children’s diet and health.

For some wider issues such as the environment, and exploitation of (third world) agricultural workers could also feed into these concerns. Overall there was a sense from some of feeling betrayed by those they had trusted.

“You have to be vigilant because the food companies don’t care.”

Fathers, 25-34, BC1, Wales
“People are getting to the point where they are sick and tired of being misled.”

Male, Single, 25-34, C1C2, South

“[well known brand] was sold as a healthy option until it came out it was worse than the ones we already had.”

Male, Single, 25-34, C1C2, South
SCHEME SPONSOR

It was felt to be crucial that the scheme would operate independently of both manufacturers and retailers. Respondents thought that it was important for the scheme to operate in the public’s interest in a way that was unaffected by the concerns of the food industry. This led to calls for it to be operated and regulated by ‘government’ in one form or another, with a significant proportion of the sample naming the ‘Food Standards Agency’ as the authority they expected to be in charge of the scheme.

It was felt that in this instance ‘Government’ and the public’s interests were shared if only because of the cost to the nation of the NHS. Many respondents felt they had been exposed to considerable media coverage on this issue in recent months.

“It would have to be a national authority, food standards or something like that, not the manufacturers.”

Male, Single, 25-34, C1C2, South

“If it was the food manufacturers, there wouldn’t be so much of a standard. They’d make out things were good for you when they weren’t.”

Women, Retired, BC1, Scotland

“The government needs to be in charge of the labels and not the manufacturers.”

Fathers, 25-34, BC1, Wales

‘The food manufacturers wouldn’t be so honest – they would work the guidelines’

Male, Empty Nesters, 45-54, CIC2, North

A ‘government’ provenance for the scheme was also thought to suggest a clear agenda shaped around unfussy health. A scheme endorsed by the government would not for example be about dieting for the sake of appearance, or about health fads or passing concerns.

“If it’s coming from the health authority it’s got to be truthful. I’d go by that.”

Mothers, 20-30, DE, Midlands
REACTIONS TO CONCEPTS

Simple Traffic Light (Three Band)

There was often an enthusiastic response to this concept, as it was thought very simple to grasp, and required little or no explanation such that it could easily be explained to others, and easily referred to in speech. Many respondents suggested spontaneously that it would have worked perfectly well without the 'legend' which explained the meaning of each colour or 'light'.

“It cuts to the chase.”

Male, Single, 25-34, C1C2, South

“It’s so simple, it’s instant.”

Male, Retired, 65+, C1C2, South

“It’s like a traffic light - stop, don’t eat it.”

Female, Empty Nesters, 45-54, DE, Wales

Simplicity was seen to be a real benefit as it was thought that it would make it more likely to engage those who were less involved, concerned, or interested in food decisions. It would also be of benefit to those who intellectually might struggle with anything more complicated. Parents felt that it would be possible to use it as a tool for involving and educating children about dietary decisions.

“Kids can relate to traffic lights.”

Fathers, 35-44, DE, Wales

“It’s good because kids would get it.”

Fathers, 35-44, DE, Wales

“I could say it’s not me, look at the dots, it’s telling you.”

Mothers, 20-30, DE, Midlands

Respondents felt that the immediacy and simplicity of the concept meant it would quickly become part of public consciousness and speech. In conjunction with a front of pack positioning it was thought likely to make people think about the significance of their food choices which in turn might help to prompt re-evaluation of established products within repertoires, as it would be harder ignore the traffic light than it would the nutrition panel. This was thought likely to lead shoppers to
make comparisons between brands in store, and perhaps even between different types of food product.

“It would make us feel guilty, if I knew everything I was eating was a red dot it would make it hard to ignore.”

Male, 16-17, In Education, BC1, South

“It may change my habits slightly, I would go for greens over reds.”

Male, Empty Nesters, 55-64, BC1, Wales

Those who reacted positively thought the system was intended to help achieve a balance between different foods according to the colour assigned to them. They interpreted each of the three bands as follows:

− Green = ‘eat as much as you like’, or ‘healthy’, or ‘good for you’.
− Amber = ‘eat in moderation’, or ‘a little of what you fancy’.
− Red = ‘avoid’, other than for a treat.

It was clear that more could potentially be read into the ‘banding’, than the system actually covered. For example, some assumed that ‘healthy’ would mean food without additives, or without ‘E’ numbers or artificial sweeteners. It would therefore be necessary to explain how the bands were arrived at in order to avoid potential misunderstanding.

“It’s not just about weight, it’s other things as well, chemicals should be taken in as well, things like Aspartame or whatever they put in.”

Female, Single, 18-24, BC1, N Ireland

The concept was quickly rejected by some for one or more of the following reasons.

− It could be thought too simplistic, particularly for those who had concerns focused on specific nutrients, for example, fat or salt. These respondents claimed they would not find the ‘general’ nature of the system reassuring, and would therefore still feel the need to check the nutrition panel as they would want to know how the food scored on those particular nutrients.
“It’s less informative. I’d prefer more detail, something more defining.”

Mothers, 35-44, BC1, Scotland

“It doesn’t tell you what is bad about it.”

Male, Retired, 65+, C1C2, South

− Seasoned and regular dieters tended to reject it for the same reason as they would still want to know calorific or fat content.

− It could be questioned whether the scheme applied equally to children, men and women, or whether differences might have to be taken into account.

− The scheme could be thought too didactic, and was criticised for offering ‘advice’ rather than information. This may be partly a question of the language used in the legend, and while there may be potential for solving this problem this could be more difficult than might be assumed on initial consideration.

“It’s very didactic – it’s telling us what to do.”

Mothers, 35-44, BC1, Scotland

“I don’t like being told, I want to know why.”

Female, Retired, 65+, DE, N Ireland

− The scheme could be hard to use in practice, as there was no clear cut guideline for the difference between ‘plenty’, ‘moderation’, and ‘sparingly’. Equally, some could not see how the same instruction could relate to completely different types of food, for example, breakfast cereal, which most people would eat once a day, as opposed to crisps or biscuits which might be eaten several times a day. Once again, it might be harder to communicate a satisfactory answer to this issue than might be assumed.

Those who responded positively to the system imagined using it in a number of different ways.

Most common was to use the colours as a way of balancing both shopping and consumption. Those who had this approach in mind imagined choosing food so that their supermarket trolley would be at least half full of items carrying green lights, with the remainder mainly amber, and perhaps a few red.
“You wouldn’t eat everything green you’d mix and match, but if you had 30 things in your basket and 20 of them were red you’d think a bit.”

Fathers, 35-44, C1C2, N Ireland

“I don’t mind eating a few reds but if the reds were just piling up then I’d have a think about it… my list (shopping) would most likely be nearly all reds so that’s not good.”

Male, Empty Nesters, 55-64, BC1, Wales

“When you start thinking about your kids then the reds would hit home, you’d feel like a shit if everything you gave them was red.”

Fathers, 35-44, DE, Wales

“You’d be trying to get 50 to 60 percent green then a few yellow, and just a couple of reds.”

Male, Single, 25-34, C1C2, South

They felt the amber and red lights would be likely to then act as a reminder when in home that the item in question should be regarded more as one a day treat, or something to eat in moderation, for example, one biscuit with a cup of tea and not several.

“If it’s got a red label on it you might think hang on a minute.”

Fathers, 35-44, DE, Wales

This envisaged pattern was most likely among those not currently using the nutrition panel or those who complained most vociferously about the difficulty of using it.

Another imagined approach would be to use the band as a filter for deciding whether to read the nutrition panel or not.

“You wouldn’t necessarily need to read the back of the pack.”

Male, Single, 25-34, C1C2, South

“A time saving thing, you wouldn’t have to turn it over.”

Mothers, 25-34, C1C2, South
For example an item carrying a green light would be selected without further thought, with the assumption that it would either mean low fat or low calorie or that it meant that it was ‘ok’ on all nutrients.

“You would know at a glance if something was good for you.”

Male, Retired, 65+, C1C2, North

If an item were to carry an amber or red light they might then examine the nutrition panel in order to find out its fat or calorie content, or to check level of another nutrient, for example salt.

“You’d think why is there a red on it, and then you’d read the side of the pack.”

Fathers, 35-44, C1C2, N Ireland

This pattern was most likely among those already using the panel. Effectively the system would make the process of selection easier for them as it would cut out the need to look at the panel for at least some decisions.

An approach which some thought they would use in parallel with the two described above was to only buy and eat food carrying red and perhaps amber light items where it really mattered to them. So they would only ‘go red’ for treat items that they felt they could not do without, and where they were less wedded to the brand or food in question they would move down to amber or green.

“If it’s your absolute favourite you’d stick with it and go green on something else.”

Female, Single, 18-24, BC1, N Ireland

All imagined they might make side by side comparisons between brands, and types of product, shifting to amber or to green if no compromises were involved.

**Extended Traffic Light System (5 band)**

This concept also often received an enthusiastic response when shown before Simple Traffic Light (3 band).

Respondents immediate reaction was to see the concept as a simple idea, which they understood as a rating for the ‘healthiness’ of food, and therefore how often that food should be eaten.
However, this enthusiasm usually evaporated on closer inspection and further consideration as few felt they would be able to use it in practice, as few felt they could imagine how they would use the five bands.

“It’s confusing – you’d be in Asda for 3 years.”

Male, Empty Nesters, 55-64, DE, Scotland

This was partly to do with semantics and the words chosen for the legend, as respondents wondered what the differences should be between for example, ‘plenty’, ‘less often’, and ‘moderation’ when translated into in terms of quantity per day or week, and how that should then be applied across different food types. It was also partly to do with internalising a five band system. Whereas almost all respondents were able to grasp a three band system and internalise it along the lines of ‘good’, ‘ok’, ‘bad’, many found five bands much harder because they did not have a ready concept for the two intermediate positions between bands 1 and 3 and 3 and 5. Some felt that it was only clear how to interpret the concept at the extremes, that is, position 1 or 5. Others thought that if they were to try and use it they would translate it into some kind of points system. For example, they might allocate 5 points to a red item, and one point to a green item, and try and keep their overall ‘trolley score’ as low as possible. Another way of dealing with the concept was to attempt to somehow treat the five bands as three, and allocate the two intermediate bands to one of the there main positions.

In addition the Extended Traffic Light concept shared some other issues with the Simple Traffic Light scheme.

- It could be taken to cover a multitude of health and diet issues under a ‘healthy – unhealthy’ grading.

- It could seem didactic, offering advice rather than information.

“It’s telling you what to eat and what not to eat, it’s like being back at school.”

Male, Retired, 65+, C1C2, South

- It was considered insufficiently informative among those with concerns focused on specific nutrients.

Having spent time considering the concept few could imagine using it to any effect. They thought that while it seemed simple on first glance it was in fact complicated and that they might as well read the nutrition panel.

Reactions to the concept’s execution flagged up accessibility issues that will ultimately apply to any concept selected for development, and will need to be
considered in selection. Many respondents over the age of about 40 felt the legend was very hard to read, and they also found it hard to link the colour of the ‘light’ to the legend correctly.

Key Nutrients

Like Simple Traffic Light, this concept received an enthusiastic response.

Respondents thought the system was easy to understand taking it to mean that each food would be rated low, medium or high with a corresponding traffic light, on the amount of each of the key nutrients listed it contained.

An advantage of this concept was that it was very explicit in terms of what it covered, and therefore by implication what it did not. There was no potential for respondents to assume that it might embrace other elements or issues as they had with both traffic light systems.

“That’s good they way they’ve done it, it’s still simple but there’s more there, it’s good because with the salt and sugar because a lot of people can’t have these.”

Male, 16-17, In Education, BC1, South

“I said earlier the simpler the better but this has just got a bit more to it and it’s just as easy.”

Male, Empty Nesters, 55-64, BC1, Wales

It was also seen to be factual and informative in tone, as it did not offer advice or suggest judgements in relation to the food examples it appeared on.

Listing of the four key nutrients was thought provoking for some as it suggested that they could all affect health. This could broaden concern from calories / fat and ‘dieting’, or at least lay the foundations for extending concern in the future to monitoring and regulating other ingredients.

“That’s never thought about salt. If it’s there you become more aware of it.”

Mothers, 25-34, C1C2, South

“It helps you think about what’s in food.”

Female, Empty Nester, 55-64, BC1, South
This concept was particularly reassuring for those whose dietary concerns were focussed on specific nutrients as it was clear that these nutrients were addressed by the scheme. In this sample these nutrients were most likely to be fat and salt, and less often sugar, primarily in relation to managing risk of heart disease, stroke and cholesterol.

‘Saturates’ could introduce an element of confusion as very few had a clear idea of what they were and what negative health effects might be associated with them. Many respondents were aware of negative publicity around the health issues posed by saturates and saturated fats. However, they were also aware that some saturates were supposed to be beneficial for health, and while some thought these might be poly-un-saturates most were unsure and confused about the distinctions between various forms of saturates, and which were good for them and which were not.

“There are some fatty foods which are good for you.”

Female, Single, 25-34, C1C2, Midlands

As far as the concept went the significance of saturates was most easily understood by those who either just assumed them to be bad, or who felt the concept suggested their consumption should be kept low because that would be in line with the way it dealt with other nutrients of whose harmful effects they were more certain. Some simple worked on a traffic light principal, that is, red for danger, green for go, amber for caution.

To a lesser extent this was also true of ‘sugar’, as some questioned whether the concept was intended to mean ‘natural’ sugar or ‘added’ sugar? Some were clearly already unsure of the significance of sugar in the diet anyway, wondering whether natural sugars were good or bad for them, whether this depended on the amount consumed, and whether this was more or less an issue for children because of potential problems of hyperactivity and tooth decay. Again, some found this lack of certainty easy to deal with by simply assuming that they needed to keep sugar low, feeling that they would either have reached this conclusion independently or assuming it from structure of the concept.

The system was thought simple and likely to attract attention on front of pack, and therefore likely to prompt re-evaluation of food choices by bringing to the buyers attention the significance of their choices and making it harder for them to ‘turn a blind eye’.

“It’s good because it’s in your face. It’s telling me it’s high in fat.”

Mothers, 20-30, DE, Midlands
This aspect of the concept was especially liked by some because they felt that it would lay bare the attempts some manufacturers made to disguise the nature of the trade offs their products made, for example, those that claimed to be ‘low fat’ but were also high in sugar or salt, or those that made a ‘full of fruit’ and implicitly ‘healthy’ suggestion on their packaging but were high in sugar.

“It’s clever marketing and these things are giving you the knowledge.”

Mothers, 20-30, DE, Midlands

“You go for something because it says low this or low that, and then when you look it’s high on something else, much better idea.”

Male, Retired, 65+, C1C2, South

“That's a classic one, Breakfast Cereal, sold as a healthy option, low fat, but it's medium on salt and high in sugar.”

Male, Single, 25-34, C1C2, South

Initial enthusiasm for the concept could dim once respondents thought about how they would use it in practice. All agreed that it would be clear at the extremes. For example if all ‘lights’ were red this would be taken to mean that the food should be no more than an occasional treat or that it should be avoided altogether.

“If I’d seen those 4 red dots on Biscuit Brand that would stop me from eating a whole packet without thinking about it, it would put you off, it’s got to, you can’t sit there and stuff your face with something that’s got so many reds on it.”

Male, 16-17, In Education, BC1, South

If on the other hand all lights were green this would be taken as a signal that within reason they could safely go ahead and buy and eat as much as they wanted. A product showing 3 green lights might be interpreted in a similar way, assuming the one red among three greens was not for a nutrient of concern, for example salt, in the case of those with concerns over blood pressure.

Those who were monitoring specific nutrients for health reasons felt they would find the scheme easy to use, as if a food were red on a nutrient of concern they would reject it immediately. If it were amber they might also reject it, or alternatively would read the nutrition panel for more information depending on how much they cared about the food in question. These respondents felt they
would aim for green on their nutrients of concern on as many items as possible. Depending on their level of concern, they might reject anything else, or perhaps allow some amber ‘lights’ for a treat or because there was no acceptable substitute. These people felt the concept would make it easier for them to monitor their nutrient intake as they were currently doing this by reading the nutrition panel, which some found hard to do either because they had difficult reading the small type, or because they had difficulty understanding it, or both. They felt that they might no longer have to do this, particularly if an item was either green or red as they could make a decision from the front of pack alone.

Otherwise it was thought likely to be harder to make decisions where there was a spread of different coloured ‘lights’ on an item.

“It’s hard to know how to put this all together. All the different colours – am I allowed to eat it or not? High salt and low in fat – what does that mean?”

Male, Empty Nesters, 55-64, DE, Scotland

“It’s hard to work out whether it’s good or bad, is it worse for me to have more sugar or to have more salt?”

Female, Single, 18-24, BC1, N Ireland

In such cases respondents thought that their impulse would be to make comparisons with other alternatives in order to establish the range of alternatives, switching to a healthier colour mix if one was offered by an acceptable alternative.

“I’d look for the alternatives. If it looked better I’d go for a different option.”

Female, Single, 25-34, C1C2, Midlands

“It wouldn’t change me eating some reds if I really like them I might just have them a bit less.”

Fathers, 25-34, BC1, Wales

If this was not available they thought they would re-consider the purchase, perhaps referring to the panel to establish what the rating actually meant, and considering the products other benefits, e.g., if high in fibre, financially good value, taste and so on. It seemed likely that many would adopt a filtering system of some sort based on the mix of different coloured lights and their feelings about the nutrients concerned, for example, younger respondents more concerned about looks might try to stay green on fat and sugar, but might be less concerned about salt, whereas older respondents with a ‘health’ focus might try to go green
on fat and salt, but might be less concerned over sugar. Alternatively some felt they would arrive at a ‘rule of thumb’ for instant selection, rejection or further investigation, for example, they might buy a product with 2 greens and 2 ambers or better without further thought, check the panel if any red were present, and reject anything with 2 ambers and one red or worse

“You’d balance your shopping out, you’d say ok, we’ll have the yoghurts, but we won’t have any sugary cereals this week.”

Mothers, 20-30, DE, Midlands

**GDA – Guideline Daily Amounts**

This concept was rejected almost immediately by all but a few.

It was thought by many to be hard to understand, and likely to require some initial explanation, for example, what was meant by the letters M and F? and what was the relationship of the top number to the bottom number? and did the content mean per pack, per 100g or per serving? and if the latter what constituted a serving?

More fundamentally perhaps, it was thought likely to prove impossible to use in practice. The nature of the concept, that is, its use of numbers, seemed to suggest to respondents that they were expected to take a precise approach to its use which they thought would mean adding up and monitoring their total daily consumption for each nutrient with the aim of being at or below the guideline daily amount. Use of numbers seemed contradictory to taking the concept as an indication of desirable levels and balancing roughly across the day or the week. The idea of doing this completely switched off the majority of respondents who could simply not imagine how they would be able to do it.

“You’ve got to be Carol Vorderman to keep up with that.”

Male, Retired, 65+, C1C2, South

“You’d need a calculator – it takes it too far.”

Male, Empty Nesters, 55-64, DE, Scotland

“It’s a lot of bother, it would just confuse.”

Male, Empty Nesters, 45-54, C1C2, North
Some women were not daunted by the concept, and claimed that they were already counting ‘nutrients’ in this way from the panel, and would continue to do so from the GDA if it were introduced. However, it emerged that most of these women were only monitoring fat or calories and did not envisage extending their monitoring to include the nutrients embraced by the concept. They felt that to extend their monitoring across four nutrients and juggle daily amounts accordingly to arrive at an overall balance would be far too much of a challenge. A smaller number of women were already monitoring more nutrients and felt they would continue to do so from the GDA concept. They appeared prepared to be more robust in their approach than others, using the ‘numbers’ on the nutrition panel as a guide, and not as an absolute measure.

This approach was frequently criticised for ‘putting the back of the pack on the front’, that is not adding anything more than was already provided by the nutrition panel, and not making monitoring any simpler. Some felt that this was a manufacturer or retailer inspired system, because they thought it deliberately set out to obfuscate and deliver the truth in such a way that no one would be able to interpret and act on it. In their view such a scheme would be a ‘cop out’ if it were government backed, as they assumed that the motive behind it would be to avoid any conflict with the food industry.

“Only someone with a vegan dog would bother with this.”

Male, Empty Nesters, 55-64, BC1, Wales

“This is just trying to baffle you with bullshit.”

Fathers, 35-44, DE, Wales

They felt that the concept was sufficiently complex as executed to escape attention even on the front of packaging, as the extent of detail it had to carry reduced its impact. In their opinion the public would ‘filter it out’ of their perceptions over time because the difficulty of using it made it irrelevant.

The idea of communicating GDAs received some positive comment as it was thought useful to know what a target allowance should be, but it was felt that they might be more appropriately presented as an additional element on the nutrition panel.

“I like it saying the RDA and then you can work it out for yourselves and it’s good for educating you.”

Female, Empty Nesters, 45-54, DE, Wales

Reactions to the mocked up packaging examples illustrated that there was value in the approach, as some items were thought shocking in terms of the proportion
of a nutrient’s daily allowance they contained, whereas with others the impact of consuming several small snacks across a day, such as biscuits or crisps could also become clear.

“You’ve almost gone over the top just with that.”

Female, Empty Nester, 55-64, BC1, South

“Forty grams of fat, that’s almost half your daily intake!”

Male, Single, 25-34, C1C2, South

**Healthy Symbol**

This approach would require explanation, as its meaning was not immediately obvious. Explanation of the concept might be challenging, as it was easy to assume that its remit was wide potentially embracing issues such as additives, pesticides, ‘E’ numbers, etc, etc, etc.

“What would it mean? No GM no artificial flavouring or colouring?”

Female, Single, 25-34, C1C2, Midlands

It would need to be made clear that the concept only covered a number of specified key nutrients, and that its presence would not necessarily imply wholesome content above or beyond that or the absence of any other ingredients.

Consumers would also have to be driven to find foodstuffs which carry it. Respondents pointed out that it would not prompt them to reconsider existing choices as some other routes did.

“If you don’t eat healthy things you wouldn’t see it.”

Female, 16-17, In Education, C2DE, Midlands

“If you weren’t thinking about it you wouldn’t come across it in the first place.”

Female, Single, 18-24, BC1, N Ireland

Reactions to mocked up examples of food packaging suggested that it might be hard to establish confidence in the system. There was considerable surprise that a frozen packet ready meal and a low calorie carbonated soft drink could carry it, as these two items seemed unhealthy to many.
“It’s not healthy, it’s only healthy compared to [the non-diet variety].”

Male, Single, 25-34, C1C2, South

“Surely they couldn’t have that on diet soft drink! I wouldn’t trust it at all, it’s acid, 90% sugar…”

Male, Retired, 65+, C1C2, South

“They’ve taken the sugar out, but they’ve put Aspartame in and that’s really evil.”

Mothers, 20-30, DE, Midlands

“This is a ready meal and that is a salad! How are they in the same category?”

Mothers, 20-30, DE, Midlands

Respondents were interpreting the idea of ‘healthy’ to mean a positive contribution to health, in the sense of ‘good for you’, and an absence of any potentially damaging ingredients. They could not see how these types of food and drink could be awarded the symbol. This led them to question whether it had any value at all.

This approach was also thought to be ducking confrontation with the food industry, as it did not clearly indicate what was good or bad, and was thought only likely to work for people who were already scrutinising packaging. While this meant that the concept could perhaps reinforce ‘good behaviour’ it was thought unlikely to prompt reappraisal as some of the other concepts might.

“At least with the traffic lights they had the balls to do it.”

Male, Single, 18-24, C1C2, Scotland

“It’s actually more helpful to have warning.”

Male, Single, 18-24, C1C2, Scotland

“I’d want to know what’s not healthy.”

Male, Retired, C1C2, North
WHAT FOODSTUFFS SHOULD BE COVERED?

Respondents assumed that any ‘packaged’ food would use the system and felt that any they would treat any product that did not with a great deal of caution.

“If a company wasn’t involved you would think that they’ve got something to hide”

Male, Empty Nesters, 55-64, BC1, Wales

“If it wasn’t there I’d be suspicious, you’d definitely be suspicious, why not?”

Fathers, 35-44, C1C2, N Ireland

Non participation would be taken to mean that the product in question had something to hide, or worst still that it had a more generally dubious provenance, for example, that it was from a country where normal standards did not apply, or that it had somehow by-passed the normal regulatory bodies altogether. Therefore unless there were very powerful reasons to reconsider respondents thought they would not buy products that were not covered by the scheme, assuming of course that the dominant majority of packaged foods were.

There were differing views on whether a scheme should encompass fresh fruit and vegetables, and fresh meat.

Some considered this to be unnecessary, as they either assumed ‘fresh’ food to be safe, or felt that at least that ‘fresh’ meant that it had not been altered or processed in any way, so it was food as food should be, whether healthy or not.

Others disagreed, especially with the Key Nutrients system in mind, pointing out that some fresh or natural foods did contain more fat or sugar or salt than others, and that it was important to be warned of this when buying them. They cited bacon as an example of a meat high in salt, and minced meat as an example of a meat that could be high in fat.

“Especially meat. Because you don’t know what’s in any meat.”

Female, Single, 18-24, BC1, N Ireland

They also raised the question of ‘natural’ or no added sugar in fruit asking whether large quantities could still be harmful, even though they were natural.
Some respondents who tried to prepare all their food from fresh ingredients believed there would be an education value in applying the scheme to meat and fresh produce, as they thought it would help to underline the difference between ‘fresh ingredients’ and ‘processed food’, which in their opinion would help to inform people that the latter contained much more fat, sugar and salt than the former, never mind preservatives, additives and so on. They thought that in turn this might at least start to make people think about the significance of the decisions they were making, for example when buying convenience food to save time in preparation.

It was thought that systems might need to be adapted to work for ‘fresh’ areas perhaps using point of sale display material.
FEELINGS ABOUT FRONT OF PACK LABELLING

There was considerable approval and support for the idea of front of pack labelling, assuming that it helped to make choices easier than reading the nutrition panel, and was executed in a way that attracted attention.

These sentiments reflected concerns over food generally, poor eating habits, diet and health. Respondents felt that in this area the interests of ‘government’ and the public coincided. The effect on health spending was readily understood and this was surely an issue that affected everyone.

“The Government doesn’t want us to turn into fat, lazy bastards.”

Male, Single, 18-24, C1C2, Scotland

“These ideas can only make things better, I do think it’s easier that the panel on the back.”

Male, Empty Nesters, 55-64, BC1, Wales

There was a widely expressed view that the food industry had at the least been guilty of being ‘economical with the truth’ as far as the products it sold went, and that it had perhaps been allowed to get away with too much for too long. Respondents felt the any front of pack system should move towards much more immediate clarity in indicating the true content of the food concerned.

“Honesty, so you have none of the twaddle, no nonsense, hard facts.”

Mothers, 25-34, C1C2, South

While the existing nutrition panel was used and was to some extent valued it was thought to allow a food’s content to remain obscure, as a manufacturer could rely on its complexity and the ‘small print’ to make ‘the truth’ harder to find.

Front of pack labelling was thought to be a way of helping to make consumers more conscious of the food decisions they made.

“Then what you’re doing is your choice, at least I know what I’m buying.”

Fathers, 35-44, C1C2, N Ireland

This would be achieved both by giving new information about food’s ingredients, and also by reminding consumers of what they might already know or suspect
about food content but perhaps choose not to think too hard about. Many respondents acknowledged that sometimes they chose not to think too hard about some of the food choices they made because they liked the taste of a particular food, or because it helped them in a busy lifestyle, or because it was one that their children would happily eat, and so on, and so on.

It seemed that a clear front of pack system could help to prompt re-evaluation of choices which had often been made a long time ago and not reviewed since. It could also help inform choices between brands, products, and perhaps to some extent even categories.

Many respondents expressed the view that a scheme would also be a step towards making manufacturers and retailers ‘come clean’ about the content of their products as it should make it harder to distract the consumer with clever or even cynical packaging and marketing. It was thought that greater (enforced) honesty in the food industry should make it easier to make informed choices, and that in the long run a front of pack system would be likely to be to stimulate the introduction of more healthy products as manufacturers experienced declining sales of their less healthy lines.

“[the brand used as an example] are not going to be very happy at being a no-no, it would make you feel guilty to eat 4 reds.”

Male, Empty Nesters, 55-64, BC1, Wales

“It would encourage them not to do it like that.”

Mothers, 25-34, C1C2, South

There were calls for retailers to become involved with a scheme by helping to explain it where necessary with use of in store displays as it was thought that an explanation would be easiest to absorb at the point of use. Respondents thought retailers might also help in areas where application would be more difficult, specifically fresh food areas as the products themselves might be unpackaged and so could not carry the system, and display materials would be necessary.
TARGETING

While a front of pack food labelling scheme should be ‘for’ the whole population it is inevitable that there will be different responses to it from different segments, and it will be important to bear this in mind when evaluating the different options in order to decide which one(s) to take forward.

There were different starting points within different elements of the sample in terms of levels of existing understanding, levels of ability to understand a new scheme, inclination to engage with a scheme, and determination to put it into practice in terms of everyday shopping and consumption.

It was clear that understanding might not necessarily lead to action. For example teenagers and other young people might understand a system but might not feel the need to act on it in the near future if they did not feel that health was an issue for them, or if they thought that they would not ‘eat like this forever’ anyway. A change in life stage, such as becoming a parent, or perhaps reaching 30 years of age might be a precursor to serious action for the majority. However, the trigger of a change in life stage might then prompt them to work with a system that they had previously understood but not used.

Family, Empty Nester, and Retired segments seemed likely to contain more individuals who would be motivated to act. Respondents felt that parenthood tended to foster a generally more responsible attitude, and also that specific concerns for children could extrapolated to the whole family, for example, the amount of sugar in the diet. Health problems affect more people with increasing age, either directly, or at second hand via the experiences of their peers.

However, some older respondents, most likely to be men, seemed entrenched in their current behaviour and either unable or unwilling to change, or both. It emerged that many of those concerned had only recently begun shopping for food independently of a female partner, and it is perhaps unrealistic to expect such people to engage with food labelling when a supermarket still feels like an alien environment to them.

These differences within the overall population have implications for how a scheme should be evaluated, in that some segments might be ones where the ambition should be to drive understanding whereas in others there should be hope for driving action as well.
CATERING

Respondents were asked how they felt they might respond to food labelling when eating out. The breadth of what ‘eating out’ might mean was established by prompting with the following list, and the explanation that ‘eating out’ should be taken to mean all food bought for consumption outside the home.

Eating Out

<table>
<thead>
<tr>
<th>Takeaways</th>
<th>Café</th>
</tr>
</thead>
<tbody>
<tr>
<td>Restaurants</td>
<td>Mobile food outlet</td>
</tr>
<tr>
<td>Fast Food</td>
<td>Canteen at school / work / college</td>
</tr>
<tr>
<td>Pub / Wine Bar</td>
<td>Motorway Service Station</td>
</tr>
<tr>
<td>Ready to eat takeaway food from supermarkets</td>
<td>Garage</td>
</tr>
<tr>
<td>Sandwich bar – eat in or takeaway</td>
<td>Railway stations, airports</td>
</tr>
<tr>
<td>Coffee Shop</td>
<td>Paper Shop</td>
</tr>
<tr>
<td>Fish and Chip Shop</td>
<td></td>
</tr>
</tbody>
</table>

Respondents felt that any packaged food should follow the same system as retail and could see no reason why this could not be the case. Exploring this issue led many to argue that the retail system should be extended to cover any food sold in supermarkets, including food that could be eaten in or out of the home. It was clear that many respondents felt that supermarkets should be seen as distinct entities from other retailers and catering operations due to the sheer scale of their operations, the extent of the nation’s dependence on them, and because they were felt to be sophisticated businesses who ought to be able to implement a scheme.

Otherwise feelings about the application of a scheme in a catering environment varied according to the type of occasion respondents had in mind.

There was considerable antipathy towards encountering a scheme that operated across an entire menu when eating out for a treat. The nature of treat occasions was felt to mean that normal rules and concerns are suspended and a scheme would force these back onto the agenda.

“It would annoy you. You would think that the dots say I can’t have it”

Female, Empty Nesters, 45-54, DE, Wales
“I don’t know if you’d want to see that on the menu if you were going out for a meal with your girl or your wife, she’d say what have you brought me here for?”

Fathers, 35-44, C1C2, N Ireland

“It’s less important in restaurants – they’re treats. You already eat in them sparingly.”

Female, Retired, 65+, BC1, Scotland

“I tend to let the barriers down when I’m eating out. If it’s a sandwich at lunch then I check the content.”

Female, Single, 25-34, C1C2, Midlands

It was difficult to arrive at a definition of what constituted a ‘treat’ outlet as one person’s ‘treat’ was often another’s ‘quick bite to eat’. ‘Proper’ restaurants, that is, those that were independent of any large chain, and tended towards formality had clear treat status, while that of some other types of establishment was less clear. For example, restaurant – takeaways (typically Indian or Chinese), Pizza restaurants, non big chain burger restaurants, Tex Mex, pubs, and wine bars could all be seen either as treat or more everyday venues. Of course there is not only the issue of the individual’s eating out repertoire but also the fact that such outlets vary greatly in many ways, for example, price, ambience and presentation.

Some felt that a scheme along the lines of the Healthy Symbol might be acceptable against particular dishes on a menu in a venue that was being used for a treat. This was likened to the way vegetarian dishes were signified by use of a ‘V’. Respondents pointed out that some outlets and chains were already using a healthy eating or ‘low fat’ mark.

“Like the thing they do for Vegetarians, some pubs do weight watchers.”

Mothers, 20-30, DE, Midlands

This approach was felt to have the merit of being there for those who were looking for such choices while remaining relatively unobtrusive for those who were not. The symbol would be interpreted as a claim in relation to the rest of the menu offered by the establishment in question rather than an absolute claim which was intended to stand comparison against other outlets. However, there was in no sense a call for such a system in this type of outlet.
The majority of respondents felt that they would know what to eat if diet or health was a personal concern, and if it were they would first consider their choice of outlet, or whether to eat out at all. It was thought to usually be clear from the type of outlet whether there might be more or less relatively healthy items available.

“Personally I wouldn’t bother with it when you are having a takeaway you know it’s high in calories.”

Female, Empty Nesters, 45-54, DE, Wales

“There’s going to be nothing good in a fish and chip shop.”

Mothers, 20-30, DE, Midlands

Irrespective of these issues respondents felt that they did not eat out frequently enough from any type of venue for the provision of healthy options to matter to them anyway.

A lot of people buy a sandwich every day, and some have a take-away three times a week.”

Female, Single, 25-34, C1C2, Midlands

While quotas were employed in this sample for exposure to catering outlets it may be that feelings about the need for a system would be different for those for whom eating out is an everyday rather than an occasional experience. This suggests there may be a need to structure recruitment according to frequency of eating out in further work on catering.

There was a belief in the quality of food in anything approaching a ‘proper’ restaurant in terms of the outlet’s choice and preparation of ingredients. Many felt there would be no need for a labelling system because the dishes would have been prepared from fresh ingredients. There was very little awareness of the fact that it is common practice for restaurants to buy in part of completely pre-prepared meals or meal components such as sauces.

At a personal level the need for a scheme to cover catering was influenced by a combination of how often the individual concerned needed rather than chose to eat out of home, the extent of choice they felt they had available to them when they did so, and how concerned they were about diet and health. Some of those whose concern was greatest felt that often the problem was more to do with the choice available to them rather than how it was labelled. Respondents who were mobile workers, for example delivery drivers, or tradesmen working on different sites from one day to the next, and those working on relatively isolated industrial
estates thought that it was often hard to find ‘healthy’ food, and in some cases claimed that their choices were further constrained by having to eat ‘on the move’ or in a dirty or unhygienic environment.

Cost could also be an over-riding factor that was felt to sometimes force people to favour less healthy choices than they might otherwise have done.

Making healthy choices was thought particularly difficult for those whose working life meant they end up eating at irregular times, especially if this was ‘on the road’, as they might have no choice about where or when they stopped for food, and several remarked that often their hunger to eat something overcame their better intentions however strong these were.

“If you drive a lorry you have to eat what’s handy, and usually it’s not good food. I load up and the first drop might be at ten, 10.00am, 10.30am, by that time I'd eat anything.”

Fathers, 35-44, C1C2, N Ireland

“I get half an hour to get lunch, eat it, and get back to work. It's not easy.”

Fathers, 35-44, C1C2, N Ireland

“If you’re hungry you’ll eat anything if you’ve got nowhere else to go... I don’t eat crisps and that kind of muck, but if I’m coming back from somewhere on the train and I haven’t eaten all day it’ll be a bag of crisps, one of their stupid sandwiches and a drink.”

Mothers, 20-30, DE, Midlands

There was felt to be more of a case for labelling, and perhaps the introduction of compulsory healthy options where there is little choice about using a particular catering outlet.

“If people are tied to where they eat, like a work canteen or a college it’s a bit different, they have an obligation to tell you what’s healthy and what’s not, and have a healthy counter.”

Male, Single, 25-34, C1C2, South
“If you’ve got to eat there you need to know there’s healthy options available to you.”

Female, Single, 25-34, C1C2, Midlands

School, college and staff canteens were seen to be examples of these situations, as were motorway service stations, airports, trains and stations. Canteens were felt to be a more pressing issue in this respect as many felt there had been considerable improvements in the other types of venue, and that many offered a good choice nowadays. Those who used catering outlets in town or city centres felt there was little problem finding healthier choices as they believed there was sufficient choice on the average high street to make this possible. Sandwich bars in particular were felt to be a good option as the customer could choose or specify the sandwich they wanted and its ingredients.

“You can tell them what you want in it.”

Female, Retired, 65+, DE, N Ireland

This meant they could combine known healthy ingredients, for example, wholemeal bread, chicken and salad, while avoiding known culprit ingredients such as mayonnaise, butter and salt. Like restaurants, sandwich bars were also seen to be preparing their food from fresh ingredients which tended to give them a healthy aura. There was little thought given as to the composition of the ingredients that were delivered to sandwich bars in the first place.

The catering industry was clearly perceived to be a much more varied and complex landscape than retail. The retail food industry was seen as very much dominated by big business in the shape of the major supermarket chains, whereas in catering there was seen to be a plethora of small, even tiny independents of various different forms who rubbed shoulder with a lesser number of large chains. It was seen to be ridiculous and unfair to the smaller independents to expect all these different types of business to adopt the same system and implement it in the same way.

“In a place like BHS or M&S, big established companies, ok, but the little chip shops and sandwich bars aren’t going to be able to do it.”

Mothers, 20-30, DE, Midlands

And, it was thought to be almost impossible to police whether all of the myriad different types of outlet stuck to the rules or not.

An industry wide scheme, and particularly a scheme that embraced both retail and catering seemed unfeasible as its use in the small independent sector could
undermine its wider credibility. It was thought impossible to guarantee consistency among small independent catering outlets. Respondents pointed out that portion control was variable within the same outlet, never mind between outlets, and that an outlet might be forced to change suppliers which could completely change the composition of the food on their menu.

“How would they regulate it? Are they going to do an inspection every time a small sandwich bar or a little restaurant changes suppliers?”

Female, Single, 25-34, C1C2, Midlands

This would tend to make the suggestion that such a system could not be ‘accurate’ and might not be reliable, which indicates that if a catering scheme were introduced it might need to be kept distinct from retail in order to avoid this happening.

“If they did it I think people would be sceptical as to how it was checked up on, and that would make them sceptical about whether it was checked up on in the supermarkets.”

Male, Single, 25-34, C1C2, South

It was thought likely that the public would generalise what they had learned from a retail scheme to a catering environment. For example, if ‘southern fried chicken’ from a supermarket was high in fat and salt, the same might be assumed to be true of a similar product from a take–away outlet or restaurant. Respondents felt they might extrapolate more directly from pre-packaged ‘catering’ food from supermarkets such as sandwiches, rolls, and pasta salads to similar food prepared to order.

Inevitably perhaps the fast food industry tended to be the focus of greatest criticism, although respondents believed that those who used fast food outlets did so with their eyes open as the unhealthy nature of their products was so well known. Some called for fast food outlets to be forced to adopt the same sort of scheme as retail might adopt, as they felt that they were similar types of business in terms of scale and sophistication to supermarkets. Having said that the majority realised the difficulties this might create in relation to small independents, as they thought that it would be hard for the authorities to argue for a scheme to apply to fast food retailers if it did not also apply to their small independent competitors. Many felt that fast food retailers might have more to gain from voluntarily adopting a scheme than not, as they thought that it was possible that their products were less unhealthy than they and others like them might have supposed.
TEENAGERS

Teenagers response to concepts was much in line with the rest of the sample in terms of comprehension and understanding, as was the way they imagined that each of the concepts could be used to arrive at healthier choices.

Their likely use of the concepts (if at all) reflected their current concerns which centred on weight and skin complexion. ‘Weight’ concerns were more or less ubiquitous among females and less common among males as might have been expected. Skin concerns were perhaps less common overall, and much more evenly distributed between the sexes. Weight and skin concerns meant that teenagers who did consider the contents of the food they ate were most likely to be focussed on information on calorie, fat, and sugar content and as a result the ‘key nutrients’ and ‘GDA’ concepts were seen to have most relevance, with the GDA concept dismissed as too complex as has been reported for the adult sample. Teenagers tended to see salt as something to worry about later even if they were aware of its negative health implications, and like other segments were much less clear on the significance of saturates altogether.

“If I’m on a diet I’ll look otherwise I won’t.”

Female, 17-18, In Education, BC1, South

Perhaps unsurprisingly some (not all) teenage males were among those least likely to engage with a system, while there was a spectrum of attitudes among the female respondents. Some explained that because their parents provided the bedrock of their diet they felt that they could pretty much eat whatever they wanted on the occasions they bought their own food without any real need to fear harmful effects.

“Most of it’s healthy because Mum is on a diet.”

Female, 16-17, In Education, C2DE, Midlands

Teenage respondents seemed not be under any illusions that the food they bought was healthy when this was not the case, and some clearly revelled in the un-healthiness of some of their choices in an attempt to shock. Other teenagers felt that they did not need to worry about their diets until later in life, as they associated diet related health problems with ‘old’ people.

“Of course I know that having 2 burgers and chips and beans isn’t good for me but I was having a hungry day and just had to.”

Male, 16-17, In Education, BC1, South
“Most people know they are eating crap in fast food places.”

Female, 17-18, In Education, BC1, South

“I supposed I do generally eat quite badly but when you are 16 your life is hectic you don’t have time to cook a meal for yourself you’re in and out of the house the whole time and if your parents work they haven’t got time to do it either”

Female, 17-18, In Education, BC1, South

“You’ve got the rest of your life to worry. I don’t want to be thinking about it. There’s loads of bad stuff in it, but I like it.”

Male, 17-18, In Education, C2DE, Midlands

Price was claimed to be a key factor in most decisions, both in terms of absolute unit price, for example what was available to buy for a given sum of money (can I get anything for £1), and also value, how much food they could get for a given sum of money (how much can I get for £1). They also pointed out that food they bought was often consumed out of home, or ‘on the run’ if in home, perhaps while rushing to get ready to go out. This meant that it might have to be food they could hold and eat, or food that required no or minimal preparation.

In some homes where both or the sole parent worked teenagers were already responsible for some ‘main meal’ preparation which often resulted in a diet of ready meals eaten after school, or at best the assembling of a number of more or less processed ingredients.
APPENDICES

Methodology
Sample
Procedure
Recruitment Questionnaire
Discussion Guide
METHODOLOGY

Group discussions were the chosen method for conducting the research.

Among adults these were composed of 6-7 respondents each. Among young people (16-18) mini friendship groups of 3-4 respondents each were conducted. This was because experience suggested that in a research exercise young people were more likely to talk freely in the company of close friends whose presence would help to create a supportive atmosphere.

The decision was taken to structure the sample by life-stage as it was felt that this would be a primary factor affecting attitudes to diet and health.

In summary the research sample was as follows.

- Young People, 4 x mini friendship groups 16-18
- Adults, aged 18 – 65 +, 20 group discussions spread across life-stages
  - single or married / cohabiting, no children 18-34
  - older and younger families 20-44
  - empty nesters 45-64
  - retired 65 +
RESEARCH SAMPLE

The sample was structured as follows. A copy of the recruitment questionnaire is contained in the appendices.

Young People,

Mini friendship groups, 3-4 respondents each.

- Age 16-17, all in full time education, year 11 at school
  - 1 x female, C2DE
  - 1 x male, BC1
- Age 17-18 in full or part time education
  - 1 x female, BC1 year 12
  - 1 x male, C2DE year 13
- Recruitment criteria
  - all to be living with parents / guardians
  - parents / guardians to do the bulk of food shopping and preparation
  - all buy some food for themselves at least occasionally

Adults

- Age 18-34, single or married / cohabiting, but no children in household, 4 groups
  - 18-24, 1 x male C1C2, 1 x female BC1
  - 25-34, 1 x male DE, 1 x female C1C2
- Age 25-44, older and younger families, 6 groups
  - 20-30, female DE
  - 25-34, 1 x male, BC1, 1 x female C1C2
  - 35-44, 1 x male C1C2, 1 x male DE, 1 x female BC1
- Age 45-64, empty nesters, singles or couples with no children living at home, 6 groups
  - 45-54, 1 x male BC1, 1 x female DE, 1 x male C1C2
  - 55-64, 1 x male DE, 1 x female C1C2, 1 x female BC1
• Age 65 +, retired, mix of those living alone and those as couples, 4 groups
  – 2 x male C1C2
  – 2 x female, 1 x DE, 1 x BC1

• Fieldwork locations
  – England, - South, Midlands, North
  – Scotland
  – Wales
  – Northern Ireland

• Fieldwork was conducted from the 20th September to 11th October 2004
PROCEDURE

A copy of the discussion guide is contained in the appendices. In summary, the order of discussing topics was as follows.

- Moderator introduction, explanation of purpose of discussion
- What factors affect their choice of food (briefly as a warm up)
- Introduction of signalling concepts in rotated order, together with packaging examples
- Compare and contrast concepts, and explore reactions to idea of front of pack labelling

Relevance of concepts to out of home eating of different types
RECRUITMENT QUESTIONNAIRE

ADULTS

RJ2902

Q1 I am conducting a market research survey. Can you tell me if you or any of your friends or relations work, or have ever worked in any of these occupations? READ OUT:

- ADVERTISING-------------------------- 1
- MARKET RESEARCH----------------- 2
- PUBLIC RELATIONS--------------- 3
- MARKETING------------------------ 4
- PUBLISHING----------------------- 5
- JOURNALISM----------------------- 6
- BROADCASTING--------------------- 7
- MANUFACTURE AND RETAIL OF FOOD FOR CONSUMPTION IN OR OUT OF THE HOME* 8
- DIETICIANS, NUTRITIONISTS, HEALTH VISITORS, NURSES, DOCTORS---------- 9

IF ANY OF THE ABOVE MENTIONED, CLOSE
* Exclusion need not apply to retail sales assistants, shelf stackers, supervisors, only to retail managerial staff. However, respondents themselves should not work in catering outlets in any capacity

Q2 a) Have you ever attended a market research group or interview?
   Yes ---------------------------------------- 1 – GO TO Q2b
   No---------------------------------------- 2 – GO TO Q3

b) when did you last attend a group or interview?
   In the last year ------------------------ 1 – CLOSE
   Over a year ago ----------------------- 2 – GO TO Q2c

c) how many groups/interviews have you ever attended?_____

d) what was the subject of the groups/interviews you attended?

WRITE IN__________________________________________

RESPONDENTS SHOULD NOT HAVE ATTENDED MORE THAN 3 GROUPS EVER, AND NEVER ON THE SAME SUBJECT AS THE CURRENT ONE
Q3  How much of a role do you play in buying food in your household?

- Do all of the buying------------------------- 1
- Do most of the buying---------------------- 2
- Do some of the buying---------------------- 3
- Do very little buying----------------------- 4
- Do none of the buying---------------------- 5

**FEMALE RESPONDENTS: ALL TO AGREE WITH STATEMENTS 1-3. MALE RESPONDENTS: 3 PER GROUP TO AGREE WITH STATEMENTS 1-3 AND 3 TO AGREE WITH STATEMENTS 4-5.**

Q4  a) How often do you look at nutrition information on the food you buy?

- Never ------------------------------------------- 1 – See ‘Exclusion’ below
- Sometimes------------------------------------ 2
- All the time----------------------------------- 3

b) thinking about the amount of fat, sugar and salt in the food you buy and eat, and the food you buy on behalf of your family, which best describes you or your household?

- I haven’t really given it much thought--------- 1
- I can’t see the point of being concerned about what’s in the food I or my family eat, I never have been and I never will be ------------------- 2 – See ‘Exclusion’ below
- I’m quite concerned about what is in the food we eat and try to watch what is in the food I/we eat but I don’t always manage to --------- 3
- I would like to watch what is in the food I/we eat but I don’t think I would find it very easy---- 4
- I watch what is in the food I/we eat from time to time ----------------------------------- 5
- I watch what is in the food I/we eat, but I don’t do it all the time----------------------------------- 6
- I’m really concerned about what is in the food we eat for health reasons, and I always look carefully when buying ------------------- 7

**FEMALE FAMILY, FEMALE EMPTY NESTER AND FEMALE RETIRED GROUPS: AT LEAST 2-3 RESPONDENTS PER GROUP TO AGREE WITH STATEMENT 3 AT Q4a AND STATEMENT 7 AT Q4b.**

**IN ALL GROUPS EXCLUDE ANY WHO AGREE WITH BOTH STATEMENT 1 AT Q4a AND STATEMENT 2 AT Q4b.**
Q5  Do you or anyone who you buy food for, need to keep a check on the amount of salt, fat or sugar they eat due to medical reasons?
   Yes ---------------------------------------------- 1
   No----------------------------------------------- 2

**EMPTY NESTERS AND RETIRED GROUPS**: AT LEAST TWO PER GROUP TO SAY YES.
**FAMILY GROUPS (SEE QUOTAS)**: 2 PER GROUP TO SAY YES.

Q6  Thinking of eating out or buying food to eat out, either on the providers’ premises, or at place of work, in the car etc. which of the following do you use regularly, which do you use occasionally, and which do you never use?

<table>
<thead>
<tr>
<th></th>
<th>Regularly</th>
<th>Occasional</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ready to eat take away food from</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>supermarket or shop</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Takeaway sandwich outlet</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Fast food outlet e.g. McDonalds,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>fish &amp; chips, pizza</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Other takeaway e.g. Indian, Chinese,</td>
<td>4</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Greek</td>
<td></td>
<td></td>
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<tr>
<td>Restaurant</td>
<td>5</td>
<td>5</td>
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</tr>
<tr>
<td>Canteen at work/college/school</td>
<td>6</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Pub/wine bar</td>
<td>7</td>
<td>7</td>
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</tr>
<tr>
<td>Coffee shop</td>
<td>8</td>
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<tr>
<td>Café</td>
<td>9</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>Mobile food outlet e.g. kebab van</td>
<td>10</td>
<td>10</td>
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</tr>
</tbody>
</table>

**AT LEAST 3 PER GROUP TO DO ONE OR MORE OF THE ABOVE REGULARLY. ENSURE A MIX OF OUTLETS.**
CLASSIFICATION

NAME ____________________________________________

ADDRESS ____________________________________________

TELEPHONE NUMBER ____________________________________________

OCCUPATION OF HOUSEHOLD’S MAIN INCOME EARNER

PROBE FOR FULL DETAILS

<table>
<thead>
<tr>
<th>SOCIAL GRADE</th>
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<tr>
<td>B</td>
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<td>C1</td>
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<td>C2</td>
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<tr>
<td>D</td>
<td>4</td>
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<tr>
<td>E</td>
<td>5</td>
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OWN OCCUPATION ____________________________________________

<table>
<thead>
<tr>
<th>AGE</th>
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<tr>
<td>18-24</td>
<td>1</td>
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<tr>
<td>20-30</td>
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</tr>
<tr>
<td>25-34</td>
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</tr>
<tr>
<td>35-44</td>
<td>4</td>
</tr>
<tr>
<td>45-54</td>
<td>5</td>
</tr>
<tr>
<td>55-64</td>
<td>6</td>
</tr>
<tr>
<td>65-74</td>
<td>7</td>
</tr>
<tr>
<td>75+</td>
<td>8</td>
</tr>
</tbody>
</table>

SEX: Male 1 Female 2

MARITAL STATUS: Married/cohabiting 1 Divorced/separated 2 Widowed 3 Single 4

PRESENCE & AGES OF CHILDREN AT HOME: None 1 WRITE IN ____________________________
| ETHNIC ORIGIN: | White – | British | 1 |
| | | Irish | 2 |
| | | Other | 3 |
| | Write In |  |
| Mixed - | White & Black Caribbean | 4 |
| | White & Black African | 5 |
| | White & Asian | 6 |
| | Any other mix | 7 |
| | Write In |  |
| Asian or Asian British – | Indian | 8 |
| | Pakistani | 9 |
| | Bangladeshi | 10 |
| | Other | 11 |
| | Write In |  |
| Black or Black British – | Caribbean | 12 |
| | African | 13 |
| | Other black background | 14 |
| | Write In |  |
| Chinese or other ethnic background – | Chinese | 15 |
| | Other | 16 |
| | Write In |  |

DATE OF GROUP__________________________________________ TIME ___________

I AM NOT A FRIEND OR RELATION OF THE RESPONDENT, AND TO THE BEST OF MY KNOWLEDGE HE/SHE IS NOT KNOWN TO ANY OTHER RESPONDENT IN THE GROUP

RECRUITER’S SIGNATURE________________________DATE ___________
RECRUITMENT QUESTIONNAIRE

YOUNG PEOPLE

RJ2902b

Q1 I am conducting a market research survey. Can you tell me if you or any of your friends or relations work, or have ever worked in any of these occupations? **READ OUT:**

ADVERTISING------------------------------- 1
MARKET RESEARCH------------------------- 2
PUBLIC RELATIONS------------------------ 3
MARKETING------------------------------- 4
PUBLISHING------------------------------- 5
JOURNALISM------------------------------- 6
BROADCASTING---------------------------- 7
MANUFACTURE AND RETAIL OF FOOD FOR CONSUMPTION IN OR OUT OF THE HOME * 8
DIETICIANS AND NUTRITIONISTS----------- 9

**IF ANY OF THE ABOVE MENTIONED, CLOSE**
* Exclusion need not apply to retail sales assistants, shelf stackers, supervisors, only to retail managerial staff. However, respondents themselves should not work in catering outlets in any capacity

Q2 a) Have you ever attended a market research group or interview?
   Yes ------------------------------------- 1 – **GO TO Q2b**
   No-------------------------------------- 2 – **GO TO Q3**

   b) when did you last attend a group or interview?
      In the last year------------------------- 1 – **CLOSE**
      Over a year ago------------------------ 2 – **GO TO Q2c**

   c) how many groups/interviews have you ever attended?_____

   d) what was the subject of the groups/interviews you attended?
      WRITE IN______________________________________________

**RESPONDENTS SHOULD NOT HAVE ATTENDED MORE THAN 3 GROUPS EVER, AND NEVER ON THE SAME SUBJECT AS THE CURRENT ONE**
Q3  a) Can you tell me your age?

GROUPS 1 & 2: AGED 16-17. GROUPS 3 & 4: AGED 17-18

b) Can you tell me if you are in full or part-time education?

   Full-time----------------------------- 1
   Part-time--------------------------- 2
   Neither----------------------------- 3 – CLOSE

GROUPS 1 & 2: ALL TO BE IN FULL-TIME EDUCATION.
GROUPS 3 & 4: ALL TO BE IN FULL OR PART-TIME EDUCATION

c) which school year are you in?

WRITE IN______________________________

GROUPS 1 & 2: ALL IN YEAR 11.
GROUP 3: ALL IN YEAR 12.
GROUP 4: ALL IN YEAR 13

Q4  a) Do you live with your parents/guardians?

   Yes ------------------------------------------ 1 – GO TO Q4b
   No------------------------------------------ 2 – CLOSE

b) who does the bulk of the food shopping and preparation in the household?

   Parents/guardians-------------------------- 1 – GO TO Q5
   Other--------------------------------------- 2 – CLOSE

Q5  a) Do you buy some food for yourself either to eat at home, or to eat out of the home (more substantial than just chocolate bars, crisps etc.)?

   Yes ------------------------------------------ 1 – GO TO Q5b
   No------------------------------------------ 2 – CLOSE

Thinking of eating out or buying food to eat out, either on the providers’ premises, or at school, on the bus etc. which of the following do you use regularly or occasionally, and which do you never use?

<table>
<thead>
<tr>
<th>Outlet</th>
<th>Regularly</th>
<th>Occasionally</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ready to eat take away food from store</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Takeaway sandwich outlet</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Fish &amp; chips, pizza</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Other takeaway e.g. Indian, Chinese, Greek</td>
<td>4</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Restaurant</td>
<td>5</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Canteen at work/college/school</td>
<td>6</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Pub/wine bar</td>
<td>7</td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td>Coffee shop</td>
<td>8</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td>Café</td>
<td>9</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>Mobile food outlet e.g. kebab van</td>
<td>10</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>School canteen</td>
<td>11</td>
<td>11</td>
<td>11</td>
</tr>
</tbody>
</table>

AT LEAST 3 PER GROUP TO DO ONE OR MORE OF THE ABOVE REGULARLY. ENSURE A MIX OF OUTLETS.
### CLASSIFICATION

**NAME**

**ADDRESS**

**TELEPHONE NUMBER**

**OCCUPATION OF HOUSEHOLD’S MAIN INCOME EARNER**

#### PROBE FOR FULL DETAILS

<table>
<thead>
<tr>
<th>SOCIAL GRADE</th>
<th>CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>B</td>
<td>1</td>
</tr>
<tr>
<td>C1</td>
<td>2</td>
</tr>
<tr>
<td>C2</td>
<td>3</td>
</tr>
<tr>
<td>D</td>
<td>4</td>
</tr>
<tr>
<td>E</td>
<td>5</td>
</tr>
</tbody>
</table>

**GROUPS 1 & 4: C2DE**  
**GROUPS 2 & 3: BC1**

**SEX:**

- **Female**: 1 – **GROUPS 1 & 3**  
  - White - British: 1  
  - Irish: 2  
  - Other: 3  
  - WRITE IN__________

- **Male**: 2 – **GROUPS 2 & 4**  
  - White & Black Caribbean: 4  
  - White & Black African: 5  
  - White & Asian: 6  
  - Any other mix: 7  
  - WRITE IN__________

**ETHNIC ORIGIN:**

- **Asian or Asian British –**
  - Indian: 8  
  - Pakistani: 9  
  - Bangladeshi: 10  
  - Other: 11  
  - WRITE IN__________

- **Black or Black British –**
  - Caribbean: 12  
  - African: 13  
  - Other black background: 14  
  - WRITE IN__________

- **Chinese or other ethnic background –**
  - Chinese: 15  
  - Other WRITE IN__________ 16
DATE OF GROUP___________________________TIME_________

I AM NOT A FRIEND OR RELATION OF THE RESPONDENT

RECRUITER'S SIGNATURE____________________DATE_________
Moderator introduction, explanation of purpose of discussion, want to start by talking about how people choose the food they buy to eat at home

- what sort of things are you thinking about when you choose food on a typical shopping trip
- how much active ‘choice’ is there and how much is repeat purchase / autopilot
- what things are taken into account when making a choice
- is this different depending on what kind of product it is, eg, staples, vs treats, or who is likely to eat it, eg, self, partner, children
- what role does the packaging itself play, do they look for anything in particular (introduce food pack examples)
- probe any mention of reading of nutrition panel

Introduction of concepts in rotated order, with simple verbal explanation of where the concept would appear, ‘something that would appear on the front of all food packaging’, introduce accompanying ‘in situ’ examples (explain that nutrition panel would stay)

- initial reactions?
- what is their understanding of the concept, how would they explain it to a friend?
- how helpful or otherwise would the concept be?
- do they feel they would understand how to use the concept? what is it telling you about the food? eg, high in fat = buy but only occasionally, ‘never buy’, ‘green light’ = live on this alone, or a good part of a diet etc, etc
- is it clear that the concept applies to nutrients and not global ‘healthy – unhealthiness’, eg, does a symbol on a soft drink mean it is ok to drink lots of it
- what difference would it make if information was carried on the front of a pack like this?
- for example does it bring the effect of diet on health to mind, does it act as a reminder to think about food choices, or does it help them to understand what the food they buy contains?
- how would they imagine using it? eg, across all food they buy, in ‘culprit’ categories, for children, for family members with health issues, etc, etc
- what dietary concerns would it help people to address?
- how easy would it be to apply the concept to their food purchasing?
- would it be used in conjunction with the nutrition panel, or as a stand alone device?
- if used in conjunction with the nutrition panel, how would this be?
- how do they imagine their use of the concept would build or change over time?

- Introduce explanation or paraphrase it if concept is not grasped
  - do they now feel they understand how the concept is supposed to work
  - establish where the gaps in understanding were between concept and explanation
  - reprise earlier discussion, how useful would it be, how would they use it, how easy would it be to apply, etc
  - how much explanation is required, and how do they feel this should be delivered

- How could they apply the concept to end up with a healthier typical 'shopping basket', using the list of different food examples
  - use list to encourage respondents to think about the various items they buy and / or eat and how the concept could be applied to them
  - do they think the concept would help them in how they might have to deal with different foods, eg, cut out, cut down, substitute
  - are there any food products they feel would not need to carry the labelling, and if so why
  - are there any food products or types of food products which they feel should definitely carry the labeling and why

- Repeat for each concept

- Compare and contrast concepts
  - which do they feel are of most use and why
  - which elements do people find particularly helpful and why

- Explore front of pack labelling and thinking behind the concepts
  - how might front of pack labelling make a difference?
  - as a general principle and thinking of the concepts shown would it make it easier for them to manage their diet?
  - how might it have helped?
  - explore feelings about nutrition labels and previous usage
  - what should front of pack labelling set out to achieve
  - what would they think if a pack did not carry the label, eg manufacturer / retail not in the scheme, ‘unapproved’, very unhealthy, healthy…
• Who would be behind a system like this, eg, government, retailer, producer
  – would its authority / credibility change depending on who was behind it
  – should the ‘source’ be made explicit
  – do any of the concepts suggest one source or another, eg, is one more ‘governmental’ or another more ‘retailer’

• What do they think of applying the system to food purchased to eat out of home (prompt with board detailing range of out of home eating occasions)
  – explore immediate reactions
  – who is more interested and for what reasons

• On what occasions do they feel the labelling would be more or less relevant or useful or desirable, and why
  – explore in relation to different occasions, eg, is a sandwich bar different from a restaurant, things they do more or less frequently, choice vs ‘have to’

• How well would each of the concepts work for out of home eating (ensure potential of each is discussed, even if only briefly)
  – are the issues that were relevant for retail equally relevant for catering
  – are they applied differently, or do they have different weight
  – are there other considerations, eg, more restricted choice, ‘impulse’ vs considered decision, etc
  – do some work better in some situations than others, explore in relation to examples
  – are there different communication issues in a catering context
  – would they interpret the concepts as having meaning across all food / food outlets, or having relative meaning within the outlet’s ‘menu’

• Which concept do they feel works best for out of home
  – does it work equally well in any situation
  – where does it work best

• Does the same concept work for retail and for out of home
  – explore pros and cons of using the same concept
  – explore whether it needs any adapting for out of home, and if so in what situations
  – explore pros and cons of using a completely different concept
  – how might this work better, and what would its disadvantages be
• Thinking of all the concepts / material they have seen, and various points raised in discussion, If they were in charge, what would they do

• Thank you and close