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Consumers' use, understanding and perception of food labels

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Consumers can use front of pack (FOP) guideline daily amount (GDA) or traffic light (TL) signposting and the back of pack (BOP) nutritional panel to compare products across different brands⁽¹⁾. Food labelling can also encourage food manufacturers to develop healthier products⁽²⁾. However, information other than the FOP and BOP nutritional information is available for consumers to use when deciding what to purchase. The different information presented may have varying effects on peoples' judgements about the product, leading to different purchasing habits⁽³⁾. Therefore, the aim of this study was to assess whether different food brands, of the same product category and different nutritional information, had an effect on consumers ranking of healthiness and tastiness of the product, leading to intention to purchase the product.

A convenience sample of 108 adults (55 males, 53 females) was recruited from a town centre and were presented with packaging from four spaghetti Bolognese own-brand ready-meals from a well-known retailer, consisting of a 'basics', 'mid-range', 'healthy' and 'luxury' range. First, the front labels of the four products were presented with no nutritional information and the participants were asked to rank 1–4 in order of healthiness, tastiness and which they would be most likely to purchase. Next, the BOP nutrition panel that belonged to each product was presented without any other packaging and they were asked the same three questions. Finally, they were presented with the TL FOP without any other packaging and asked the same questions.

The number/percentage of respondents who ranked the product as the most healthy/tasty and also chose it as the one they were most likely to purchase is presented in the table below.

Product range	Ranked most healthy			Ranked most tasty			Purchase intention		
	Label N (%)	BOP N (%)	FOP N (%)	Label N (%)	BOP N (%)	FOP N (%)	Label N (%)	BOP N (%)	FOP N (%)
Basics*	9 (8.3)	68 (63.0)	71 (65.7)	16 (14.8)	16 (14.8)	18 (16.7)	15 (13.9)	47 (43.5)	47 (43.5)
Healthy†	67 (62.0)	25 (23.1)	18 (16.7)	8 (7.4)	16 (14.8)	22 (20.4)	32 (29.6)	28 (25.9)	30 (27.8)
Mid-range‡	15 (13.9)	8 (7.4)	9 (8.3)	35 (32.4)	26 (24.1)	29 (26.9)	24 (22.2)	19 (17.6)	18 (16.7)
Luxury§	17 (15.7)	7 (6.5)	10 (9.3)	49 (45.5)	50 (46.3)	39 (36.1)	37 (34.3)	14 (13.0)	13 (12.0)

Degree of healthiness based on content/100g of energy, fat, saturated fat, sugars and Na.

* Most healthy, †second most healthy, ‡ third most healthy, § Least healthy.

The majority incorrectly thought that the product from the healthy range was the healthiest based on the packaging alone. However, the majority were able to correctly identify the healthiest product from the TL and BOP nutrition information. The majority of respondents ranked the luxury range as the most tasty when presented with the label, BOP and FOP information. Therefore, agreeing with the perception that healthy foods do not taste as nice as 'unhealthy' foods. However, more participants chose to purchase the luxury range when shown the label alone, whereas when presented with the BOP and FOP information purchasing intentions of the healthy ranges increased. This supports the idea that BOP and FOP can change consumer choices with health concerns prevailing over taste. For those who correctly ranked the basics as the most healthy, no significant differences were seen between genders ($P>0.05$). Use of information on energy, fat and saturated fat between respondents who correctly ranked the basics range as most healthy *v.* those who did not was not significantly different (25–46 *v.* 23–30%; $P>0.05$). Level of nutritional knowledge may thus have a part to play in the level of understanding of BOP nutritional information. Females (34%) were more likely than males (16.4%) to focus on saturated fat, whereas males (32.7%) compared with females (15.1%) were more likely to focus on fat ($P>0.05$).

In conclusion, BOP and FOP can clearly impact upon consumer's perception of healthiness of products and subsequent intention to purchase. Further analysis should look at what is causing consumers to make these preformed judgements about healthiness and tastiness, and how this could benefit manufacturers to improve purchases of product ranges and aid consumers in choosing healthy products.

1. Cowburn G & Stockley L (2004) *Public Health Nutr* 8, 21–28.

2. Grunert KG, Wills JM & Fernández-Celemin L (2010) *Appetite* 92, 1–13.

3. Visschers VHM & Siegrist M (2009) *Appetite* 52, 505–512.