Consumer Perceptions of Supplemented Food Labelling

Summary

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Ce rapport est aussi disponible en français
This public opinion research report presents the results of online focus groups conducted by Léger Marketing Inc. on behalf of Health Canada. This qualitative research was conducted with 88 Canadians between January 27 and February 15, 2021.

Cette publication est aussi disponible en français sous le titre « Perceptions des consommateurs à l’égard de l’étiquetage des aliments supplémentés ».

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Executive Summary

Léger is pleased to present Health Canada with this report on findings from virtual discussion groups focusing on consumer perceptions of labelling approaches for supplemented foods. This report was prepared by Léger Marketing Inc. who was contracted by Health Canada (contract number HT372-203995/001/CY awarded December 17, 2020).

1.1 Background and Objectives

Health Canada has developed a multicomponent labelling strategy for supplemented foods (SF) integrating front and back of pack (respectively designated as front of package (FOP) and back of package (BOP)) labelling components to help consumers identify and distinguish SFs from conventional foods, determine the type and amount of the supplemental ingredients (SIs), and highlight any cautions associated with the use of a particular SF product.

The objectives of the study are as follows:

1. To generate a rich understanding of consumers’ perceptions of supplemented foods and the utility of labelling components to help them identify these foods and the supplemented ingredients, and to inform them about the appropriate use; and
2. To further extend and explore these findings when consumers are challenged with other information on the label including claims and a nutrient specific “High in” FOP nutrition symbol on SFs high in saturated fat, sugars or sodium.

1.2 Methodology

Qualitative Research – Online Focus Groups

Léger conducted a series of twelve virtual discussion group sessions with French-speaking and English-speaking Canadians recruited from all the regions in Canada. Participants were recruited, screened for health literacy level, and assigned to virtual discussion groups by health literacy status and demographics of interest (e.g. youth, pregnant/breastfeeding women, those with chronic disease, Indigenous, Francophone). Eight participants were recruited by our professional recruiters for each discussion group session. A total of 88 recruits participated in the virtual discussion groups (see Table 1 for details). All participants received an honorarium of $100, indigenous participants in Northern territories were given $150 (given the difficulty of recruitment and to secure their participation).

Table 1. Details of the discussion sessions

<table>
<thead>
<tr>
<th>Session Detail</th>
<th>Date</th>
<th>Recruits</th>
<th>Participants</th>
<th>Language</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session 1 – Primary grocery shopper with marginal health literacy</td>
<td>January 27 (5PM - EST)</td>
<td>8</td>
<td>7</td>
<td>English</td>
</tr>
<tr>
<td>Session 2 – Primary grocery shopper with adequate health literacy</td>
<td>January 27 (7PM - EST)</td>
<td>8</td>
<td>8</td>
<td>English</td>
</tr>
<tr>
<td>Session 3 – Primary grocery shopper with marginal health literacy</td>
<td>February 4 (7PM - EST)</td>
<td>8</td>
<td>8</td>
<td>French</td>
</tr>
<tr>
<td>Session 4 – Youth 14-17 with adequate health literacy</td>
<td>January 28 (5PM - EST)</td>
<td>8</td>
<td>8</td>
<td>English</td>
</tr>
<tr>
<td>Session 5 – Youth 14-17 with marginal health literacy</td>
<td>January 28 (7PM - EST)</td>
<td>8</td>
<td>8</td>
<td>English</td>
</tr>
<tr>
<td>Session 6 – Youth 14-17 with adequate health literacy</td>
<td>February 4 (5PM - EST)</td>
<td>8</td>
<td>8</td>
<td>French</td>
</tr>
</tbody>
</table>
The virtual discussion group sessions were approximately 1h30 minutes in duration and were conducted by a moderator using the CMNTY online platform. The choice of platform helped to facilitate the moderation, ensure an optimal interface between moderator and participants, and enable interaction as the discussion unfolded. The platform also allowed the moderator to share food label images with participants to lead each part of the discussion. Food label images were also integrated into the online polling questions that each participant completed at the end of the discussion group. The online platform also allowed for remote viewing of each session by Leger and Health Canada observers.

In each discussion group, the moderator introduced participants to the concept of SFs and the multi-component labelling approach for SFs. This was followed by a series of four task-based discussions led by a moderator with a semi-structured discussion group guide. For each task-based discussion, the moderator presented participants with visual stimuli of a SF mock package to focus on. The labelling strategy of each SF addressed various layers of the multi-component labelling approach as dictated by the nutritional profile and supplemental ingredients in the SF. Examples included SFs that did and did not require cautionary labelling; some were also high in nutrients of public health concern (i.e. saturated fat, sugars or sodium). These discussions generated a rich understanding of consumers’ perceptions of SFs and the utility of labelling components to help them identify these foods and the supplemented ingredients, and to inform them about the appropriate use.

### 1.3 Overview of the Findings

#### 1.3.1 Qualitative Research

The FOP and BOP labelling strategies of each SF addressed various layers of the multi-component labelling approach as dictated by the nutritional profile and supplemental ingredients in the SF.

- When initially challenged with a SF product that did not require cautionary labelling and was not high in nutrients of public health concern, participants paid attention to the FOP marketing features (claims and branding) and nutrient claims. Some thought that these claims identified the nature of the supplemental ingredients and used them to identify and confirm to them that this was a SF.

- When challenged with the FOP of a SF that required cautionary labelling, participants’ attention was drawn to the supplemented food product identifier (SFPI). The black and white text “Supplemented/Supplémenté” and bolded exclamation mark within the SFPI, combined with its placement at the top of the front panel, were key design attributes of the identifier that grabbed their attention. The SFPI was used to identify and confirm the food as a
In general, participants perceived the SFPI to mean that the product contained supplemental ingredients (SIs) and to carefully consider using the product. The presence of an exclamation mark in the SFI conveyed a strong message to pay attention to the information on the package including the ingredients and the cautionary labelling on the back of the package. The words “Health Canada” in the SFPI prompted participants to be cautious about the SF and prompted some to search for more ingredient information on the product package.

- When further challenged with a SF that was “High in” nutrients of public health concern (i.e. saturated fat, sugars, sodium) and required cautionary labelling, participants’ attention was drawn to the “High in” FOP nutrition symbol. This nutrition symbol prompted them to take a closer look at the rest of the food label for details about the “High in” nutrients of concern. The inclusion of a Health Canada attribution in the “High in” FOP nutrition symbol was perceived by some to make it credible. Some interpreted it as an alert from Health Canada’s about the presence of less healthy ingredients or to warn consumers about the unhealthy nutritional profile of the SF. Little mention was made of the SFPI in the presence of a “High in” FOP nutrition symbol on a SF.

- The Supplemented Food Facts table (SFFt) on the BOP was the predominant piece of label information participants used to identify a SF. The large, bold font heading stood out on the BOP and was attention grabbing. Key sub-sections of the SFFt were used by participants to confirm the type and amount of the SIs, specifically the "supplemented with" listing and the footnote “naturally occurring and supplemental amounts”. In general, participants were unfamiliar with many of the SIs and were unable to determine if the amount of a supplemental ingredient was a significant amount or not in the absence of a percentage of daily value.

- Participants noted that the absence of the percent daily value (% DV) in the SFFt limited their ability to use the information to make an informed decision about the use of the SF. It also made it challenging to evaluate the nutrient profile of the supplemental ingredients, if there was a little or a lot of a SI in the SF. The statement "naturally occurring and supplemented amounts" contributed to their overall confusion by not distinguishing what proportion of the quantitative listing of the supplemental ingredient was naturally occurring in the product versus supplemented.

- Participants’ noticed the cautionary labelling on the BOP however some mentioned that placement of the caution on the FOP would make it easier to notice and would better convey its importance. For some participants, the wording and positioning of the caution statements on the BOP suggested that the cautions for use were not that important. For others, the caution statements outlining limitations of use were alarming.

- Participants had difficulty understanding the reasons behind the cautionary labelling and the statements were too complex to determine appropriate use. The statements gave them little or no indication as to why the targeted groups of people should not consume the particular SF. Participants felt there were too many caution statements to consider and the lack of context for each SI made it even more challenging for participants to know if consumption limits were based on the amount of the SI or some other ingredient. The maximum daily amount cautionary statement influenced some participants to perceive the SF as potentially dangerous and a threat to the health of the consumer. Some said that the fact that the SF was not recommended for pregnant women, breastfeeding women and young people was an indication that the product was not necessarily good for anyone’s health. This scared some and made others feel ambivalent about consuming the product.

- Participants expressed mixed understandings regarding the presence of a Health Canada attribution in the SFPI. Some participants perceived this to mean the supplemented food product was formulated, approved, endorsed, regulated and/or recommended by Health Canada. Others believed that Health Canada monitored and verified the ingredient contents to ensure that it was a supplemented food product and that it was safe for use. Some
viewed the attribution as a warning from Health Canada to pay attention and be vigilant, that it signified that Health Canada had evaluated the product and was using the logo to alert consumers to the presence of less healthy ingredients or to warn them to pay attention to the product ingredients and the cautions for use on the BOP.

- Some participants felt misled by the labelling elements on SF products, particularly when comparing FOP with BOP information. In particular, the messages conveyed by different pieces of label information were seen by some participants to be at odds with each other. The presence of the “High in” FOP nutrition symbol with the attribution to Health Canada and BOP cautionary labelling on a SF convinced most participants that the SF was not a healthy food choice, despite what they felt that the package design was trying to convey. Some considered that the addition of vitamins made the SF appealing and justifiable for consumption while others used the “High in” FOP nutrition symbol and the BOP caution statements to qualify the food as unhealthy.

- Overall, participants of varying health literacy levels and socio-demographics perceived SFs to have varying degrees of healthiness compared to regular foods and to contain added ingredients that are good for them. They were able to use the SFPI on the front of pack to identify a food product as a SF. The presence of an exclamation mark in the SFPI conveyed a strong message to pay attention to the information on the package including the ingredients and the cautionary labelling on the back of the package. Participants were able to navigate through the SFFt on the back of SF packages and find the type and amount of the supplemental ingredients in SF products. They also identified cautionary labelling as a labelling tool that communicated the safe and appropriate use of a SF. Nonetheless, participants had mixed opinions about the efficacy of labelling tools to help them make decisions for safe and appropriate use of these SF products.
1.4 Notes on Interpretation of the Research Findings

The views and observations expressed in this document do not reflect those of Health Canada. This report was compiled by Léger based on the research conducted specifically for this project.

Qualitative research is designed to reveal a rich range of participants’ opinions, perceptions and interpretations. It does not and can not measure what percentage of the target population holds a given opinion or perception. Findings are qualitative in nature and cannot be used quantitatively to estimate the numeric proportion or number of individuals in the population who hold a particular opinion.

1.5 Political Neutrality Statement and Contact Information

Léger certifies that the final deliverables fully comply with the Government of Canada’s political neutrality requirements outlined in the Policy on Communications and Federal Identity and the Directive on the Management of Communications.

Specifically, the deliverables do not include information on electoral voting intentions, political party preferences, standings with the electorate, or ratings of the performance of a political party or its leaders.

Signed:

Christian Bourque, Senior Researcher

Léger