Health Canada Santé Canada

Consumer Perceptions of Supplemented Food Labelling

Findings Report

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Ce rapport est aussi disponible en français

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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

Session Detail	Date	Recruits	Participants	Language
Session 1 – Primary grocery shopper with marginal health literacy	January 27 (5PM - EST)	8	7	English
Session 2 – Primary grocery shopper with adequate health literacy	January 27 (7PM - EST)	8	8	English
Session 3 – Primary grocery shopper with marginal health literacy	February 4 (7PM - EST)	8	8	French
Session 4 – Youth 14-17 with adequate health literacy	January 28 (5PM - EST)	8	8	English
Session 5 – Youth 14-17 with marginal health literacy	January 28 (7PM - EST)	8	8	English

Session 6 – Youth 14-17 with adequate health literacy	February 4 (5PM - EST)	8	8	French
Session 7 – Pregnant or breastfeeding women with marginal health literacy	February 2 (5PM - EST)	8	8	English
Session 8 – Pregnant or breastfeeding women with adequate health literacy	February 2 (7PM - EST)	8	8	English
Session 9 – People with chronic health condition with marginal health literacy	February 3 (5PM - EST)	8	7	English
Session 10 - People with chronic health condition with adequate health literacy	February 3 (7PM - EST)	8	7	English
Session 11 – Indigenous in Northern Territories with marginal health literacy	February 15 (4h30 – MST)	8	6	English
Session 12 - Indigenous in Northern Territories with marginal health literacy	February 15 (6h30 – MST)	8	5	English

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 SF. 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

Detailed Results – Qualitative Research

2.1 Discussion Groups with Canadians

The main objectives of this research project were:

1. To generate a rich understanding of consumers' perceptions of supplemented foods (SFs) and the utility of labelling components to help them identify these foods and the supplemented ingredients (SIs), and to inform them about the appropriate use; and
2. To further extend and explore these findings when 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.

Participants were recruited, screened for health literacy level, and assigned to virtual discussion groups by health literacy status (to minimize the known risks of stigmatization when discussing the complexities of numeric and prose based label information) and demographics of interest (e.g. youth, pregnant/breastfeeding women, those with chronic disease, Indigenous, Francophone). At the beginning of each discussion group, participants were familiarised with the concept of SFs by presenting different examples of SFs currently on the market. 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, participants were presented with one SF mock package visual stimuli to interact with and focus their discussion 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. More specifically, a SF that is not high in saturated fat, sugars or sodium and has NO cautionary labelling; a SF that is not high in saturated fat, sugars or sodium and has cautionary labelling; and SFs that are high in saturated fat, sugars or sodium and have cautionary labelling.

Discussion group transcripts were analyzed thematically by consumer competencies of awareness, understanding, appraisal, and use of label information to identify these foods as supplemented, to identify the supplemented ingredients (SIs), and to inform about appropriate use.

2.1.1 Task #1

Task Objective: The primary objective of this task is to assess participants' awareness and understanding of specific labelling elements that help them identify a SF and determine the SIs. A secondary objective is to ascertain their overall perception of the SF.

SF Visual Stimuli: This is a water-based beverage with added vitamins and minerals. Figure 1 shows the stimuli used for the youth and women's discussion groups; Figure 2 shows the stimuli used in all other groups.

Figure 1. Elan VitaMin BOOST Youth and women (pregnant and breastfeeding groups) 	**FOP Label elements** • Brand name "VitaMin Boost" • Marketing claim "refreshing" • Common name "water beverage with vitamins and minerals" • Nutrient/health claims "Source of vitamin D and magnesium, vitamin D and magnesium help build bones and teeth" **BOP label elements** • Supplemented Food Facts table • List of ingredients
Figure 2. Elan VitaMin BOOST General audience (remaining groups) 	**FOP Label Elements** • Brand name "VitaMin Boost" • Marketing claim "flavoured with ginseng" • Common name "water beverage with vitamins and minerals" • Nutrient/health claims "contains pantothenate and magnesium, factors in energy metabolism and tissue formation" **BOP Label Elements** • Supplemented Food Facts table • List of ingredients

Awareness and Understanding of Labelling Elements to Identify a SF and Determine the SIs

FOP label elements

Participants noted the words "flavoured with ginseng," the claims about pantothenate and magnesium/vitamin D and magnesium encased in attention grabbing blue bubbles, the common name "water beverage with vitamins and minerals", and the product brand name "VitaMin Boost" in large bolded font, as specific label information that helped them to identify the beverage as a SF. Some thought that the nutrient claims on the FOP highlighted the SIs and their benefits. Others thought that the ginseng that was added as a flavouring agent was a SI and that over-consumption could cause problems. The brand name "VitaMin Boost" was perceived by some to mean that the product was "boosted" or "supplemented" with something or that the product was similar to an energy drink.

BOP label elements

The Supplemented Food Facts table (SFFt), was the predominant piece of label information that participants noticed and used to identify the beverage as a SF. The large, bold font heading "Supplemented food facts" drew participants' attention and confirmed to them that it was a "Supplemented" food. Some participants stated that they were not used to seeing "Supplemented" at the top of the table, so they did not pay much attention to it at the beginning of the task.

When asked to identify the label information that told them the type of SIs in the beverage, participants identified the subheading "supplemented with" followed by the list of SIs at the bottom of the table. The footnote under the supplemental ingredient listing “naturally occurring and supplemental amounts” was used by some to confirm the type of SIs.

In general, the words: magnesium, Vitamin D and stevia in the list of ingredients were familiar to participants. The regular use of vitamin and mineral supplements was mentioned as the basis for this sense of familiarity with those elements. However, many struggled with reading and recognizing the vitamin pantothenate, one of the SIs, and erythritol, an artificial sweetener.

Many participants were challenged by the absence of a % Daily Value (% DV) to be able to evaluate the quantitative amount of the SIs as stated on the SFFt. Many could not determine if the amount of a SI was a significant amount or not in the absence of a % DV. The statement "naturally occurring and supplemented amounts" contributed to the overall confusion by not distinguishing what proportion of the quantitative listing of the SI is naturally occurring in the product versus supplemented. Some also wondered whether it was possible to consume too much of these SIs.

Consumer Perceptions of the Supplemented Food

Many described the beverage as a flavored water-based drink with vitamins and minerals. Most participants considered that there was nothing inherently unhealthy about the beverage based on the limited number of ingredients and the nutritional profile (low in calories, sugars, fat and sodium). However, they were unsure about the health benefits or the worth of consuming it. While some mentioned that more vitamins and minerals must be healthier or at least useful for those who were deficient or exercise a lot, other said that people should not consume this product on a daily basis because an excess of vitamins or minerals could potentially harm them. Others were concerned about the presence of ingredients that they perceived to be artificial/chemical or ingredients that were not familiar to them (e.g. pantothenate). Other participants were less certain about the health aspects of this drink. They pointed out that the water-based beverage contains calories, carbohydrates, and therefore sugars, and that a water beverage should not have any of those. Some were concerned about the presence of sweeteners and their possible use to mask the taste of something else. The product packaging suggested to some that the product would likely be more expensive than water.

2.1.2 Task #2

Task Objective: The primary objective of this task was to assess participants' awareness and understanding of labelling elements that help them to identify a SF and specific cautions for use. A secondary objective was to ascertain their overall perception of the SF.

SF Visual Stimuli: The second task presented participants with a flavoured green tea beverage.

Figure 3. BURST Beverage For all groups 	**FOP Label elements** • Brand name "Burst" • Supplemented Food identifier that includes an exclamation mark, the word supplemented and the words "Health Canada" • Common name "Fruity green tea beverage" • Nutrient/health claims "High in Vitamin C, an antioxidant that helps protect your cells" **BOP label elements** • Supplemented Food Facts table • Caution box • List of ingredients

Awareness, Understanding and Appraisal of Labelling Elements to Identify a SF and Ascertain Cautions for Use

FOP label elements

Participants initially mentioned using the supplemented food product identifier (SFPI) to identify that the beverage was a SF. It was described as "the first thing they noticed", "standing out", "very noticeable" and "eye-catching". The bolded exclamation mark within the identifier, the placement of the identifier at the top of the front panel and the color contrast (black and white on green) were key design attributes of the identifier that grabbed their attention. In general, participants thought that the presence of an exclamation mark in the SFPI on the front of package 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. A few participants indicated that the exclamation mark symbol was rather intense, that it raised concern about the product, and that it could even be alarming in some ways.

Participants expressed mixed understandings of the Health Canada attribution in the SFPI. Some participants perceived the attribution to mean that the supplemented food product was formulated, approved, endorsed, regulated and/or recommended, by Health Canada. Others believed that Health Canada monitored these products and had verified the ingredient contents to ensure that it was a supplemented 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 push consumers to pay attention to the product's ingredients and the cautions for use on the BOP. The logo was not understood by these participants to mean that Health Canada was endorsing the product.

The health claim and the brand name "BURST" were also used by participants to identify the beverage as a SF. The brand name "Burst", the company name "Empower Inc." and the common name "Fruity green tea beverage" suggested to some participants that this drink was some type of energy drink. Some participants were not confident that the health claim concerning the vitamin C was sharing trustworthy information about the product. They considered it a marketing tool to make the product look healthier and that additional vitamin C was not useful for most consumers.

BOP label elements

Participants noticed the SFFt and its distinct heading. Participants mentioned that the SFFt and the list of ingredients (LOI) indicated what the SIs were, however, they noted that they were not familiar with the SIs in the beverage (cysteine and glycine). Many were drawn to the cautionary labelling. However, some participants suggested that they would prefer placement of the caution on the front, to make it easier to notice and to 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. The caution on the BOP was noticed and interpreted by participants as a recommendation for those targeted by the cautions to not consume the beverage, but participants had no indication as to why the targeted groups of people should not consume this particular beverage. At best, participants were able to speculate on reasons that led to the warning. They suggested that the presence of green tea, and therefore caffeine in the product, could explain the specific warning given to these groups. Other participants, however, pointed out that the drink could interact with medications, be bad for people with caffeine sensitivity or that excessive consumption of vitamin C could be harmful. Very few mentioned that the SIs, cysteine and glycine, could the trigger of the cautionary label.

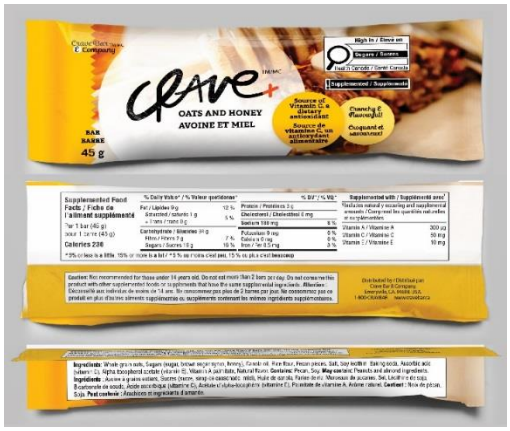
Perception of the Product

Some participants considered the BURST beverage to be a fairly healthy product, based on the presence of health claims about the high vitamin C content, their interpretation of the nutrient content information in the SFFt (i.e. low sugars, low sodium), and the presence of "organic" ingredients (i.e. organic green tea and organic cane sugars). Some participants mentioned that the colors of the branding were attractive and made the beverage look healthier to them. Others referred to the presence of sugars, calories and caffeine to describe and identify the drink as a sugary tea, a light energy drink and a type of "junk food". Participants who expressed a negative impression of the SF pointed to different elements to explain their reluctance. 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 sacred some and made others feel ambivalent about consuming the product.

2.1.3 Task #3

Task Objective: The objective of this task was to generate a rich understanding of consumers' perceptions of SFs and the utility of labelling components to inform them about the appropriate use when 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 and/or sodium.

SF Visual Stimuli: The third task presented participants with an oat and honey granola bar.

Figure 4. CRAVE Bar For all groups 	**FOP Label elements** • Brand name "Crave" • Marketing claim "Oats and Honey" and "Crunchy and Flavorful" • A nutrition symbol that includes a magnifying glass, the words "high in sugars" and the words "Health Canada" • Supplemented Food product identifier that includes an exclamation mark and the word "Supplemented" • Nutrient claim "Source of vitamin C, a dietary antioxidant" **BOP label elements** • Supplemented Food Facts table • Caution box • List of ingredients

Awareness, Understanding and Appraisal of Labelling Elements to Ascertain Cautions for Use

FOP label elements

The brand name "Crave", the marketing claim "oats and honey", the nutrient claim regarding the content in vitamin C, and the "High in" FOP symbol attracted the attention of participants. Little mention was made of the "Supplemented/Supplémenté" text-based Supplemented Food product identifier (SFPI). The "High in" FOP sugars nutrition symbol received much attention from participants. The magnifying glass in the "High in" nutrition symbol stood out on the FOP, drawing their attention and prompting some to access the back of the package to look for more information on sugars in the list of ingredients and the SFFt. Many noticed the words "Health Canada" within the "High in" nutrition symbol. Participants discussed how the "High In" nutrition symbol was both credible and concerning. The "High in" nutrition symbol with the magnifying glass indicating that the product is "High in" sugars was a clear indication to some that the product was high in sugars. The inclusion of a Health Canada attribution was perceived by some to make the nutrition symbol credible; they saw this as a warning to stop and think about the nutritional value of the bar. While some participants felt that the packaging attributes, including the name, were seen to give a healthy look to the product, those that noticed the "High in" FOP nutrition symbol and the cautions for use on the BOP felt that the healthy look of the packaging was misleading.

BOP label elements

As noted in the previous task, participants noted that the absence of % 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 in the SF. Participants generally understood from the cautionary label that this product was contra-indicated for youth under 14 years old and that it should not be mixed with other supplements or SFs. Some appreciated that the rationale was explicit in the cautions for use. There was much discussion on participants' understanding of the intent of these cautions, including prevention of overconsumption of SIs or of other nutrients including calories or sugars. Participants had difficulty understanding the reasons behind the warnings and the lack of context for the amount of each SI made it even more challenging to know if consumption limits were related to the amount of the SI or some other ingredient. Some mentioned that the information conveyed on the cautionary label was complex and contained too many elements to try to figure out if it was appropriate for them to use.

Perception of the Product

The presence of the "High in" FOP nutrition symbol with the attribution to Health Canada, the presence of different types of sugars in the list of ingredient and the warnings on the back of the package convinced most participants that this product was not a healthy food choice, despite what they felt that the package design was trying to convey. One participant described it as a cookie-like treat, but with added vitamins. Some participants were less worried by these characteristics and perceived the product as acceptable because it contained ingredients such as nuts, oats, and added vitamins A, C and E. Some evaluated the amount of sugars to not be too high or at least not higher than similar products. For those who were physically active, it was thought to be a good option when exercising. Some participants at risk of chronic disease mentioned that it might be useful for a person with diabetes to manage low blood sugar episodes.

2.1.4 Task #4

Task Objective: The objective of this task was to review the overall labelling strategy for SF products and to identify important pieces of labelling information on the FOP and the BOP that consumers might use when making food decisions.

SF Visual Stimuli: The fourth task presented participants with a caffeinated chocolate bar.

Figure 5. CRAVE Bar For all groups 	**FOP Label elements** • Brand name "Everton's Chocobar" • Marketing claim "Sweet & Energizing" • A nutrition symbol that includes a magnifying glass, the words "High in sat fat and sugars" and the words "Health Canada" • Supplemented Food identifier that includes an exclamation mark and the word supplemented • Claim "High caffeine content" **BOP label elements** • Supplemented Food Facts table • Caution box • List of ingredients

Awareness, Understanding and Appraisal of Labelling Elements on SFs

Awareness of FOP label elements

Participants discussed the FOP labelling elements they noticed: the magnifying glass and the sugars wording in the "High in" FOP nutrition symbol, the exclamation mark in the SFPI, the attribution to "Health Canada", the "High caffeine content claim and the marketing claim "sweet and energizing" on the FOP. Similar to the previous task, the magnifying glass drew some participants' attention to the "High in" sugars warning on the FOP nutrition symbol while overall, the presence of the "High in" FOP nutrition symbol prompted many participants to take a closer look at the rest of the label. Some participants were surprised by the lack of prominent placement of the caffeine claim on the FOP.

Awareness of BOP label elements

As with previous tasks, participants were aware of the SFFt, the % DV of sugars within the SFFt, the quantitative listing of the SIs as well as the list of ingredients and cautions for use. It was mentioned that the placement of the cautionary labelling under the flap on the back of the bar risked it being not noticed.

Understanding and Appraisal of FOP elements

The SFPI was understood by some participants to mean that the product contained SIs and to carefully consider using the product. The words "Health Canada" prompted participants to be cautious before consuming this product. It also prompted some to search for more ingredient information on the product package. The "High in" FOP nutrition symbol was understood to mean the food was high in saturated fat and sugars. It was also thought to be Health Canada's alert to consumers to the presence of less healthy ingredients or to warn them about the unhealthiness of the nutritional profile of the SF.

Some participants felt misled by the labelling elements on this SF product, particularly when comparing FOP with BOP information. In particular, the messages being conveyed by different pieces of label information were at odds with each other, specifically the "High in" sugars nutrition symbol and the word "sweet" on the FOP didn't convey the same message as the first ingredient in the list of ingredients on the BOP, i.e. "*unsweetened* chocolate". Others believed that the words "sweetened", "energizing" and "dark chocolate" were being used to advertise the product as healthy, when in fact, they considered it unhealthy. Others' impression of the claim "energizing" meant the presence of protein, yet they remarked that there were only 2 grams of protein in the bar; they then concluded that caffeine must be the source of energy.

Understanding and Appraisal of BOP elements

Participants felt there were too many caution statements to consider. The caution statements outlining limitations of use were alarming for some. It made them question the product and investigate it further. Although concerning, the sub-group specific cautionary statements (i.e. not for pregnant and breast feeding women, not for children < 14 years) were noted by participants and they indicated that they would strongly advise pregnant and breastfeeding women against consuming this product by pointing out the SIs, including caffeine, or by pointing to the warning that is given on the packaging. For specific caution statements referring to use with other supplements or SFs, participants felt that they would advise consumers already taking supplements to take either their supplement or the SF, but not both. This type of cautionary statement was overwhelming to some, requiring them to consider many factors when evaluating the safe and appropriate use of the SF. They were also unsure of the repercussions if they consumed both the SF bar and their vitamins.

Perception of the SF

Participants mentioned their initial attraction to the product packaging and its similarity to candy or energy bar type of product. Some participants did not like the choice of brand name "Choco-Bar" and did not believe that this product had the ingredient profile of a real chocolate bar. The sugars and caffeine content were perceived by participants to be similar to that of an energy bar, a solid version of an energy drink or a meal replacement bar. Some considered that the addition of vitamins made the SF appealing and justifiable for consumption, making it an alternative for breakfast on the run. Participants expressed the value of this bar for athletes, those trying to "bulk up and gain weight", or for students needing a boost of energy to stay up all night. Others described this product as a chocolate bar with lots of sugars, fat, caffeine and not much "good" content. Some participants used the caution statement of not consuming more than 1 bar per day to qualify the food as unhealthy. Specifically, the warning about the maximum daily amount strongly influenced participants' perceptions of this food, enough to call it "scary". Some participants went on to describe this bar as potentially dangerous and a threat to the health of the consumer.

2.2 Exit Questionnaire and Polling questions

After the final task-based discussion was completed, each participant completed an online exit questionnaire designed to summarize participants' understanding of the multi-component labelling approach for SFs. A series of polling questions were asked to summarize participants' key perceptions of SFs. The exit and polling questions can be found in the moderator guide in the appendix.

2.2.1 Exit Questions

Q1 – Highlighting the SF product identifier (SFPI)

The majority of respondents thought that the SFPI indicates that the product is a SF. Some also indicated that the SFPI highlights that there are cautions for use and that certain individuals should not eat this food. Few participants thought that the SFPI indicated the type and amount of supplemental ingredients.

Q2 – Highlighting the supplemental ingredients (SIs) in the Supplemented Food Facts table (SFFt)

The majority of respondents thought that the information indicated the type and amount of SIs and to a lesser extent that it means that the product is a SF. Few participants thought that the listing of SIs tells them how much of the bar they can eat or whether or not certain individuals should not eat this food.

Q3 – Highlighting the cautionary labelling on the back of the package of a SF

The majority of respondents used the cautionary labelling to identify the product a SF, and understood that certain individuals should not eat this SF, and that there was a consumption limit for the particular SF. Few participants thought that the cautionary labelling gave them information about the type and amount of SIs in the product.

Q4 – Highlighting the "High In' FOP nutrition symbol

The majority of respondents thought that the "High in" FOP nutrition symbol identified the product as an unhealthy food. Few participants used the FOP nutrition symbol to indicate that the product was a SF or that it identified the type and amount of SIs.

Q5 – Highlighting the SF product identifier (SFPI) on a SF product that also has a "High in" FOP nutrition symbol

Virtually all respondents thought that the SFPI indicates that the product is a SF. While some respondents indicated that it highlights that there are cautions about the use of the product, few indicated that the information tells them that certain individuals should not drink this beverage. Some perceived the presence of the Health Canada attribution in the SFPI to mean that Health Canada has approved the product.

Q6 – Highlighting cautionary labelling on a SF product that also has a "High in" FOP nutrition symbol

Virtually all the participants indicated that the cautionary labelling information stated that certain individuals should not consume the SF product or drink this beverage as well as a safe level of consumption for others. Few indicated that the cautionary labelling identifies the type and amount of the SIs in the product or that this is a SF.

2.2.2 Polling Questions

Q1

Most participants said that SF are sometimes healthier than regular food and a minority of them said that SF food are never healthier than regular food.

Q2

Most of the participants answered that SF sometimes have added ingredients that are good for them. Few of them said that it is never the case.

Q3

Opinion were mixed regarding whether SF label information gives the information needed to decide whether to consume a food. Most participants said sometimes but a few said always, and few said never.

Appendix

A.1 Qualitative Methodology

Léger conducted a series of twelve online focus groups with French-speaking and English-speaking Canadians. Conducting the discussion sessions online offered the opportunity to regroup people from all the regions in Canada. Some sessions were conducted with participants with a marginal health literacy while the other sessions were conducted with participants with an adequate health literacy. The standard Newest Vital Sign questionnaire was used during participant recruitment to assign a literacy level to each participant (see recruitment guides in Appendix 2 and 3). Two to three sessions were held with each of the following participant profiles: primary grocery shoppers, youth between ages of 14 and 17, pregnant and breastfeeding women, people with chronic diseases or risk factors for chronic disease and indigenous persons from Northern territories.

A total of 88 recruits participated in the online focus groups (see Table 2 for details). All participants in the focus group received an honorarium of $100. Indigenous people in the northern territories were offered $150 for their participation, given the difficulty in recruiting and for securing their participation on the dates determined for these groups.

Online discussion sessions were conducted using the CMNTY software to facilitate moderation and to ensure an optimal interface between moderator and participants. Participants could interact with one another and the moderator as the discussion unfolded. Each session had a duration of 1h30.

All sessions allowed for remote viewing by Leger and Health Canada observers.

Table 2. Details of the discussion sessions

Session Detail	Date	Recruits	Participants	Language
Session 1 – Primary grocery shopper with marginal health literacy	January 27 (5PM - EST)	8	7	English
Session 2 – Primary grocery shopper with adequate health literacy	January 27 (7PM - EST)	8	8	English
Session 3 – Primary grocery shopper with marginal health literacy	February 4 (7PM - EST)	8	8	French
Session 4 – Youth 14-17 with adequate health literacy	January 28 (5PM - EST)	8	8	English
Session 5 – Youth 14-17 with marginal health literacy	January 28 (7PM - EST)	8	8	English
Session 6 – Youth 14-17 with adequate health literacy	February 4 (5PM - EST)	8	8	French
Session 7 – Pregnant or breastfeeding women with marginal health literacy	February 2 (5PM - EST)	8	8	English
Session 8 – Pregnant or breastfeeding women with adequate health literacy	February 2 (7PM - EST)	8	8	English
Session 9 – People with chronic health condition with marginal health literacy	February 3 (5PM - EST)	8	7	English
Session 10 - People with chronic health condition with adequate health literacy	February 3 (7PM - EST)	8	7	English

Session 11 – Indigenous in Northern Territories with marginal health literacy	February 15 (4h30 – MST)	8	6	English
Session 12 - Indigenous in Northern Territories with marginal health literacy	February 15(6h30 – MST)	8	5	English

Recruitment was carried out by professional recruiters. The recruitment guide (available in the appendix 2 and 3) ensured that the participants met the profiles sought for each session and that they were equipped to participate in an online discussion session. To do so, they had to confirm that they had a high-speed Internet connexion, a computer or a laptop.

Moderation

All focus group sessions were moderated and supervised by a senior Léger researcher assisted by a research analyst. Health Canada employees were able to observe the discussion forum. The discussion guide (available in the appendix 4) consisted of a semi-structured discussion guide. It allowed the moderator to follow the thread of the discussion and ensured that an array of themes were covered while leaving sufficient room for the participants to express themselves and develop in detail their experiences, ideas, opinions and perceptions.

Research Protocol

In order to reach the research objectives, participants completed four tasks designed to investigate Canadians' awareness, understanding and appraisal of the multicomponent supplemented food (SF) labelling strategy across a varied range of SF products; and to explore Canadians' perceptions, understanding and appraisal of SFs when challenged with the presence of other information on the front of package. For these four tasks, participants were shown the front of package (FOP) and the back of package (BOP) of a series of food products. The information on the images shown to the participants is presented in appendix 5. Once the tasks were completed, participants were asked six multiple-choice questions to evaluate their understanding of the multicomponent labelling approach for SFs.

Limitation

Qualitative research is designed to reveal a rich range of opinions and interpretations rather than to measure what percentage of the target population holds a given opinion. These results must not be used to estimate the numeric proportion or number of individuals in the population who hold a particular opinion because they are not statistically projectable.

A.2 Screening Guide – Non-indigenous Participants

DISCUSSION GROUPS DESCRIPTION (non-Indigenous groups)

The discussion groups will be held online.

The objective is to recruit 8 participants per discussion group.

	DATE / HEURE	PARTICIPANT PROFILE
GROUP 1 8 participants	JANUARY 27 5:00PM EST	**Group with primary grocery shopper** • Adults over 18 (varied sociodemographics) • Gender: a good mix • *Language spoken: English* • *Primary grocery shopper* • Marginal health literacy
GROUP 2 8 participants	JANUARY 27 7:00PM EST	**Group with primary grocery shopper** • Adults over 18 (varied sociodemographics) • Gender: a good mix • *Language spoken: English* • *Primary grocery shopper* • Adequate health literacy
GROUP 3 8 participants	FEBRUARY 4 7:00PM EST	**Group with primary grocery shopper** • Adults over 18 (varied sociodemographics) • Gender: a good mix • *Language spoken: French* • *Primary grocery shopper* • Marginal health literacy • Province: Quebec
GROUP 4 8 participants	JANUARY 28 5:00PM EST	**Group with Youth Canadian 14-17** • Youth between 14 and 17 (varied sociodemographics) • Gender: a good mix • *Language spoken: English* • Adequate health literacy
GROUP 5 8 participants	JANUARY 28 7:00 PM EST	**Group with Youth Canadian 14-17** • Youth between 14 and 17 (varied sociodemographics) • Gender: a good mix • *Language spoken: English* • *Marginal* health literacy
GROUP 6 8 participants	FEBRUARY 4 5:00PM EST	**Group with Youth Canadian 14-17** • Youth between 14 and 17 (varied sociodemographics) • Gender: a good mix • *Language spoken: French* • *Adequate* health literacy

GROUP 7 8 participants	FEBRUARY 2 5:00PM EST	**Group with Pregnant or breastfeeding women** • Adults over 18 (varied sociodemographics) • Gender: women • *Language spoken: English* • *Pregnant or breastfeeding* • Marginal health literacy
GROUP 8 8 participants	FEBRUARY 2 7:00PM EST	**Group with Pregnant or breastfeeding women** • Adults over 18 (varied sociodemographics) • Gender: women • *Language spoken: English* • *Pregnant or breastfeeding* • Adequate health literacy
GROUP 9 8 participants	FEBRUARY 3 5:00PM EST	**Group with people with chronic diseases** • Adults over 18 (varied sociodemographics) • Gender: good mix • *Language spoken: English* • *People with chronic diseases (i.e. diabetes, CV disease, cancer) or risk factors for chronic disease (i.e. hypertension, dyslipidemia, metabolic syndrome, prediabetes)* • Marginal health literacy
GROUP 10 8 participants	FEBRUARY 3 7:00PM EST	**Group with people with chronic diseases** • Adults over 18 (varied sociodemographics) • Gender: good mix • *Language spoken: English* • *People with chronic diseases (i.e. diabetes, CV disease, cancer) or risk factors for chronic disease (i.e. hypertension, dyslipidemia, metabolic syndrome, prediabetes)* • *Adequate* health literacy

For each participant, collect the following information:

Participant name:	
Phone number at home:	
Cell phone:	
Email address:	
Recruitment date:	Recruiter :
Group #:	Confirmation (date):

RECRUITMENT PROCESS

Recruitment of Participants

Recruitment of participants for the non-Indigenous discussion groups will be done in three steps. The steps are detailed below along with the objective of each step.

Step 1 (web-based step) – Screening and profiling
The objective of the first step is to profile participants on a series of socio-demographic indicators and determine their health literacy (NVS) score. The information gathered during this first phase will allow us to validate the eligibility of participants and determine the focus group session to be assigned according to the respondent's profile.

Step 2 (web-based) (continued from step 1) - Consent
The objective of the second step is to obtain the consent of the participants. Information about the objectives of the research, the use of results, the client, the risks of participating, confidentiality, and the rights of the participants are presented to the respondents. Informed consent is then solicited from the respondents to continue the recruitment process.

Step 3 (telephone step) – Validation and log-in information
The third step of recruitment consists of validating the respondent's contact information (email address used to communicate login information), his or her availability at the scheduled date and time of the group. This step allows the sharing of information for the log in to access the online discussion group platform.

STEP 1 (WEB) – SCREENING AND PROFILING

Léger is conducting consumer research for Health Canada to help inform nutrition labelling regulations for supplemented foods.
The format of the research is an online discussion group with up to eight participants led by a research professional.

The online discussion group will be a maximum of **1.5 hours**. You will be compensated **$100** for your time.

A1. **Are you interested in participating?**

Yes	1	**CONTINUE**
No	2	**THANK AND TERMINATE**

I would now like to ask you a few questions to see if you meet our eligibility criteria to participate.

A2. To participate in the online discussion group you will need to use **a computer with** a **high-speed Internet connection,** a **WebCam** and **a microphone**. **You cannot participate by using a mobile phone**. Are you able to participate under these conditions?

Yes	1	**CONTINUE**
No	2	**THANK AND TERMINATE**

PROFILING

INTRO1. Socio-demographic questions

1. Do you or anyone in your immediate family work or have you ever worked in …?

Marketing Research	1 **THANK AND TERMINATE**
Marketing and Advertising	2 **THANK AND TERMINATE**
Public relations, communications	3 **THANK AND TERMINATE**
Media (newspapers, television, radio, etc.)	4 **THANK AND TERMINATE**
Telecommunications	5 **THANK AND TERMINATE**
None of the above	9

Sex

2. Are you…?.

… a man	1
… a woman	2
Other	3

Province

3. In which province or territory do you live?

British Columbia	1

Alberta	2
Saskatchewan	3
Manitoba	4
Ontario	5
Quebec	6
New Brunswick	7
Nova Scotia	8
Prince Edward Island	9
Newfoundland	10
Northwest Territories	11
Yukon	12
Nunavut	13

Language

4. What is your ***first official language spoken***?

French	1	GR 3; 6
English	2	GR 1; 2; 4 ;5 ;7; 8; 9; 10

AGE.

5.What age category do you fall into?

13 or younger	99	THANK AND TERMINATE
14 to 17	0	ELIGIBLE **ONLY** FOR GR 4-5-6
18 to 24	1	
25 to 34	2	
35 to 44	3	
45 to 54	4	
55 to 64	5	
65 and over	6	

6. How much of your household's grocery shopping do you do?

All or most	1	ELIGIBLE FOR GR 1-2-3
Some	2	
None	3	

Pregnant or breastfeeding

ASK IF SEX=2

7. Are currently pregnant or breastfeeding?

Yes	1	ELIGIBLE FOR GR 7; 8
NO	2	

Chronic Medical Conditions

8. Has a doctor ever told you that you have any of the following health problems?

Cancer	1	ELIGIBLE FOR GR 9-10
Heart disease	2	ELIGIBLE FOR GR 9-10
Diabetes	3	ELIGIBLE FOR GR 9-10
Lung disease including emphysema, chronic bronchitis, chronic obstructive pulmonary disease, pneumonia or lung cancer	4	ELIGIBLE FOR GR 9-10
Hypertension	5	ELIGIBLE FOR GR 9-10

Dyslipidemia	6	ELIGIBLE FOR GR 9-10
Metabolic syndrome	7	ELIGIBLE FOR GR 9-10
Prediabetes	8	ELIGIBLE FOR GR 9-10
None of the above	95	

EDUCATION.

8. What is the highest level of education you completed?

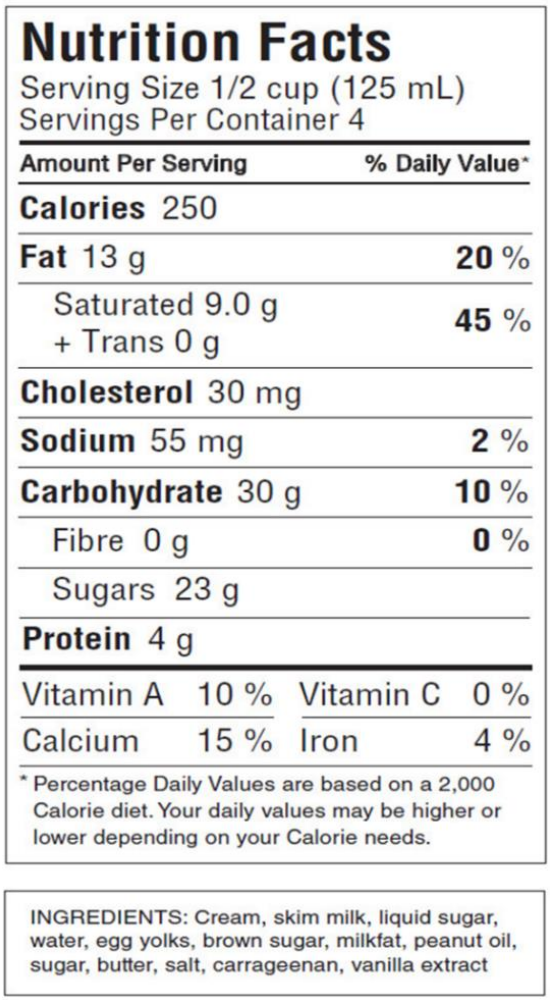
Some high school or less	**1**
High school diploma or equivalent	**2**
Registered Apprenticeship or other trades certificate or diploma	**3**
College, CEGEP or other non-university certificate or diploma	**4**
University certificate or diploma below bachelor's level	**5**
Bachelor's degree	**6**
Postgraduate degree above bachelor's level	**7**

OCCUPATION

9. Which of the following categories best describes your current employment status? Are you…

Working full-time (35 or more hours per week)	**1**
Working part-time (less than 35 hours per week)	**2**
Self-employed	**3**
Unemployed, but looking for work	**4**
A student attending school full-time	**5**
Retired	**6**
Not in the workforce (full-time homemaker, full-time parent, or unemployed and not looking for work)	**7**
Other employment status. Please specify.	**8**

INTRO2. Health Literacy Screening Tool (6 Questions)



Nutrition Facts

Serving Size 1/2 cup (125 mL)
Servings Per Container 4

Amount Per Serving	% Daily Value*
Calories 250	
Fat 13 g	**20** %
Saturated 9.0 g + Trans 0 g	**45** %
Cholesterol 30 mg	
Sodium 55 mg	**2** %
Carbohydrate 30 g	**10** %
Fibre 0 g	**0** %
Sugars 23 g	
Protein 4 g	

Vitamin A	10 %	Vitamin C	0 %
Calcium	15 %	Iron	4 %

* Percentage Daily Values are based on a 2,000 Calorie diet. Your daily values may be higher or lower depending on your Calorie needs.

INGREDIENTS: Cream, skim milk, liquid sugar, water, egg yolks, brown sugar, milkfat, peanut oil, sugar, butter, salt, carrageenan, vanilla extract

This information is on the back of a 500-ml container of ice cream.

1. If you eat the entire container, how many calories will you eat?
a. 250 Calories
b. 300 Calories
c. 500 calories
d. 1000 Calories (correct)
e. I do not know

2. If you are allowed to eat 60 grams of carbohydrates as a snack, how much ice cream could you have?
a. ½ cup (125 mL)
b. 1 cup (250 mL) (correct)
c. 2 cups (500 mL)
d. 4 cups (1000 mL)
e. I do not know

3. Your doctor advises you to reduce the amount of saturated fat in your diet. You usually have 42 g of saturated fat each day, which includes one serving of ice cream. If you stop eating ice cream, how many grams of saturated fat would you be eating each day?
a. 9 grams
b. 15 grams
c. 33 grams (correct)
d. 42 grams
e. I do not know

4. If you usually eat 2,500 calories in a day, what percentage of your daily value of calories will you be eating if you eat one serving of ice cream?
a. 5%
b. 10% (correct)
c. 20%
d. 250%
e. I do not know

5. Pretend that you are allergic to the following substances: penicillin, peanuts, latex gloves and bee stings. Is it safe for you to eat this ice cream?
a. Yes
b. No (correct)
c. I do not know

6. (Ask only if the participant responds "No" to question 5) Why not?
a. Contains egg
b. Comes from bees
c. Contains peanut or peanut oil (correct)
d. Contains ingredients that may be harmful
e. I do not know

NVS SCORE CALCULATION

[PROGRAMMER NOTES: Health literacy level based on the score to the NVS test.]
Score by giving 1 point for each correct answer (maximum 6 points).
Score of 0-1 suggests a high likelihood (50% or more) of limited literacy.
Score of 2-3 indicates the possibility of limited literacy.
Score of 4-6 almost always indicates adequate literacy.

Label	Value	
Score 0 – 3 = Marginal Health Literacy	1	ELIGBLE FOR GR 1; 3; 5; 7; 9
Score 4 – 6 = Adequate Health Literacy	2	ELIGIBLE FOR GR 2; 4; 6; 8; 10

PSPC POR1
Have you ever attended a discussion group or taken part in an interview on any topic that was arranged in advance and for which you received money for participating?

Yes	1
No	2 **GO TO Q1**

PSPC POR2
When did you last attend one of these discussion groups or interviews?

Within the last 6 months	1 **THANK AND TERMINATE**
Over 6 months ago	2

PSPC POR 3
Thinking about the groups or interviews that you have taken part in, what were the main topics discussed?
RECORD:_____ **THANK/TERMINATE IF RELATED TO FOOD PACKAGING**

PSPC POR4
How many discussion groups or interviews have you attended in the past 5 years?

Fewer than 5	1
Five or more	2 **THANK AND TERMINATE**

STEP 2 (WEB) - CONSENT FORM

Project Researchers:

Elizabeth Mansfield, PhD, RD, Bureau of Nutritional Sciences, Food Directorate, Health Canada, Ottawa, Ontario
Rana Wahba, MSc, RD, Bureau of Nutritional Sciences, Food Directorate, Health Canada, Ottawa, Ontario
Jacynthe Lafreniere, PhD, RD, Bureau of Nutritional Sciences, Food Directorate, Health Canada, Ottawa, Ontario

Funding Organization:

Health Canada, Ottawa, Ontario

Why are we inviting you to participate in this project?

- We know that many people find it hard to understand food labels. We are conducting this research study to help make food labels easier for people to understand and use.

How will we do this?

- Some packaged foods and beverages have much higher levels of sugars, sodium and saturated fat. Some may also have high amounts of added vitamins and minerals and other ingredients such as caffeine and herbals (for example: ginseng).
- We want your help to determine how best to label foods so that you can tell these foods apart from other packaged foods.
- You will be asked to take part in an online discussion group. The moderator will ask you to look at examples of food labels on packaged foods and answer some questions. This should take no more than 90 minutes.
- The discussion will be audio-recorded. The audio recording will be transcribed and saved as a digital word document. The audio-recordings will then be erased.

Where will we be doing these discussion groups?

- Discussion groups will be held virtually at (**INSERT SPECIFIC DATE AND TIME**). You will need a high-speed internet connection, a computer or a tablet device equipped with a camera and a microphone to participate.

Can I be in the project?

- Yes, you can if….
    - You are willing to take part in an online discussion group.
    - You can speak and read French or English and you can understand everything on this page.
    - You are at least 14 years old.

What if I start the project and then want to stop? Can I do that?

- Yes. Once you start, you can stop at any time. You won't have to explain why you want to stop.
- If you decide to stop, all of the interview information we have collected from you will be kept and used for the purpose of this research.

Are there any risks to being in the project?

- Answering questions about food labels can be hard. It requires reading the labels plus some math and a little writing.
- Some people may have difficulty using an electronic device to participate in a discussion group.
- Some people may feel uncomfortable being recorded.

Do I get any benefit from being in the project?

- You will be helping us learn how to improve our food labels.
- As compensation for your participation in the discussion group, you will receive $100.

Privacy

- We encourage participants to keep all the information shared in the discussion group confidential. However, we cannot guarantee confidentiality.
- Only project researchers will have access to the discussion group information.
- The only thing that will have your name and personal information on it will be the consent form that you will sign. This information will be kept by the market research company and will not be shared with the Health Canada research team.
- All research information will be kept for a period of 7 years once the study has been completed.

What will we do with the results of the project?

- The results of this study will be used by the project researchers to improve labelling of foods.
- The results of this study will be used in a research report and presentation by project researchers. Your name will not be used in any of these documents.
- When the project is over, we can send you a one page summary report if you give your contact information (email or mailing address).

Your rights

- You might have questions about your rights as a person in this project. You might also want to confirm that this project has been approved and is safe for you to be in.
- If you have any questions about this research, you can contact:
  Elizabeth Mansfield, Health Canada
  Telephone: 343-542-4654
  Email: beth.mansfield@canada.ca

- If you have questions about your rights as a research participant, you may contact:
  Manager, Research Ethics Board of Health Canada
  Telephone: (613) 941-5199
  Email: hc.reb-cer.sc@canada.ca

Privacy Notice

The personal information you provide to Health Canada is governed in accordance with the *Privacy Act*. We only collect the information we need to conduct the research project "Consumer Perceptions of Supplemented Food Labelling" under Section 4 of the Department of Health Act.

Purpose of collection: We require your personal information to determine your eligibility and record your consent to participate in this research study that will inform labelling policy, guidance documents, and development of labelling tools for supplemented foods. If you request a copy of the research study, your contact information will be used to provide one to you.

Other uses or disclosures: Your personal information will not be shared. In limited and specific situations, your personal information may be disclosed without your consent in accordance with subsection 8(2) of the *Privacy Act*.

For more information: This personal information collection is described Health Canada's Health Related Research class of personal information, available online at https://www.canada.ca/en/treasury-board-secretariat/services/access-information-privacy/access-information/information-about-programs-information-holdings.html)

Your rights under the *Privacy Act*: In addition to protecting your personal information, the *Privacy Act* gives you the right to request access to and correction of your personal information. For more information about these rights, or about our privacy practices, please contact Health Canada's Privacy Coordinator at 613-948-1219 or hc.privacy-vie.privee.sc@canada.ca. You also have the right to file a complaint with the Privacy Commissioner of Canada if you think your personal information has been handled improperly.

Do you consent to participate in this research? *Your consent indicates that you understand the conditions of participation in this research study found below and that you have had the opportunity to have your questions answered by the project researchers.*

- ☐ **Yes (continue)**
- ☐ **No (STOP)**

Participant Name: _____

Date: _____

If the participant is under the age of 16, parental consent is required. Please complete the following:

Do you give consent for this youth's participation in this research? *Your consent indicates that you understand the conditions of participation in this research study found below and that you have had the opportunity to have your questions answered by the project researchers.*

- ☐ **Yes (continue)**
- ☐ **No (STOP)**

Parent or Guardian Name (if applicable): _____

Date: _____

I would like to receive a one page summary report of this research: ☐ Yes ☐ No

If yes, I would like to receive this by:

☐ **Email**

☐ **Mail**

Copy of Consent for Participant - You are being given a copy of this informed consent to keep for your records.

INVITATION

Thank you. We would like to invite you to participate in an online discussion group that will be led by an experienced professional facilitator and will for a maximum of 90 minutes.

Someone from our company will contact you by phone to provide you with the date, time and log in information to participate in the discussion group and to validate your consent and availability. Please provide your name, phone number, and email address where we can reach you in the evening as well as during the day?

Name:
Phone number (during the day):
Phone number (during the evening):
Email address:

STEP 3 (PHONE) - VALIDATION

Hello/Bonjour, I'm _____ of Leger, a marketing research company. May I speak with (**INSERT FULL NAME OF THE PARTICIPANT**).

Hi, I'm _____ of Leger. You recently completed a short online questionnaire and gave your consent to participate in a discussion group we are organizing on behalf of Health Canada. The objective of the discussion group is to collect opinions and perceptions of food labels to help inform Health Canada's nutrition labelling regulations.

We are preparing to hold a few discussion groups with Canadians. These discussion groups will be conducted "online" and will be led by a research professional with up to eight participants. All opinions will remain anonymous and will be used for research purposes only in accordance with laws designed to protect your privacy. You don't need to be an expert to participate. We don't have anything to sell and we don't advertise and it's not an opinion poll on current events or politics.

Your participation is voluntary. All information collected, used and/or disclosed will be used for research purposes only and the research is entirely confidential. We are also committed to protecting the privacy of all participants. The names of the participants will not be provided to any third party. May I continue?

[INTERVIEWER NOTE: IF ASKED ABOUT PRIVACY LAWS, SAY: "The information collected through the research is subject to the provisions of the Privacy Act, the legislation of the Government of Canada, and to the provisions of relevant provincial privacy legislation.]

The discussion group will take place online on the (**INSERT DATE/TIME**) and will be a maximum of **1.5 hours**. You will be compensated **$100** for your time.

Q0
Are you available to participate in this focus group at **INSERT DATE/TIME**?

Yes	1
No	2 **THANK AND TERMINATE**

Q1.
In the discussion group you will be asked to share and discuss your opinions and perceptions of nutrition information on food labels with other participants in English. Please note that you do not need to be an expert to participate. You may also be asked to read during the meeting.

How comfortable do you feel in such an environment?

Read the answer choices.

Very comfortable	1
Somewhat comfortable	2
Not very comfortable	3 **THANK AND TERMINATE**
Not at all comfortable	4 **THANK AND TERMINATE**

INVITATION SCRIPT

Thank you. We'd like to invite you to participate in the discussion group.

The discussion group will take place at [XX], on____XX____ (date/time) __XX__.

Just a quick reminder that you will need a computer, a high-speed Internet connection, a WebCam and a microphone in order to participate in the online discussion group. You cannot participate using a mobile phone.

Representatives from Health Canada and research analyst may observe the discussion group, but will not have access to any of your personal information. Do you consent to participate in this discussion group ?

Yes	1
No	2 **THANK AND TERMINATE**

Now I have a few questions that relate to privacy, your personal information and the research process. We will need your consent on a few issues that enable us to conduct our research. As I run through these questions, please feel free to ask me any questions you would like clarified.

We need to provide the **online platform** and **session moderator** with the names and profiles of the people attending the discussion group because only the individuals invited are allowed in the session and the facility and moderator must have this information for verification purposes. Please be assured that this information will be kept strictly confidential. **GO TO P1**

P1) Now that I've explained this, do I have your permission to provide your name and profile **to the online platform and moderator?**

Yes	1 GO TO P2
No	2 **THANK AND TERMINATE**

P2) A recording of the discussion group session will be produced for the research project purposes. The recording will only be used by **the team of people working on the project at Léger and Health Canada** to assist in preparing a report on the research findings.
Do you agree to be recorded for research purposes only?

Yes	1 COMPLETE THE INVITATION
No	2 **Read information below and P2A**

It is necessary for the research process for us to record the discussion group session as the researcher needs this material to complete the report.

P2a) Now that I've explained this, do I have your permission for recording the discussion group?

Yes	1 COMPLETE THE INVITATION
No	2 **THANK AND TERMINATE**

As we are only inviting a small number of people to take part, your participation is very important to us. If for some reason you are unable to participate, please call so that we can get someone to replace you. You can reach us at ____ at our office. Please ask for ____.

To ensure that the discussion group runs smoothly please :

- Make sure you are connected to the Internet and logged on 15 minutes in advance of the group
- Turn off your cellular phone to avoid disruptions during the discussion group.
- Make sure your WebCam is ON and functional
- Wear your reading glasses, if necessary, to be able to review the material presented on your computer screen.
- Make sure you are in a room with good lighting

We will send your login information to the online discussion group to your email address. Please confirm receipt of this information when it reaches you.

Your email address : _____

Thank you very much!

A.3 Screening Guide – Indigenous Participants

DISCUSSION GROUPS DESCRIPTION (Indigenous Groups)

The groups will be held online.

The objective is to recruit 8 participants per focus group.

	DATE / HEURE	PARTICIPANTS PROFILE
GROUP 11 8 participants	February 15	**Group with indigenous people in the North** • Adults over 18 (good distribution) • Gender: good mix • *Language spoken: English* • *Indigenous people* • *Northern territories: Yukon, NWT, Nunavut* • *Marginal* health literacy
GROUP 12 8 participants	February 15	**Group with indigenous people in the North** • Adults over 18 (good distribution) • Gender: good mix • *Language spoken: English* • *Indigenous people* • *Northern territories: Yukon, NWT, Nunavut* • *Adequate* health literacy

For each participant, collect the following information:

Participant name:	
Phone number at home:	
Cell phone:	
Email address:	
Recruitment date:	Recruiter :
Group #:	Confirmation (date):

RECRUITMENT PROCESS

Recruitment of Indigenous Participants

Recruitment of participants from northern territories indigenous groups will be done in three steps. The steps are detailed below along with the objective of each step.

Step 1 (web-based step) – Screening and profiling
The objective of the first step is to profile participants on a series of demographic indicators and determine their NVS score. The information gathered during this first phase will allow us to validate the eligibility of participants and determine the focus group session to be assigned according to the respondent's profile.

Step 2 (web-based) (continued from step 1) - Consent
The objective of the second step is to obtain the consent of the participants. Information about the objectives of the research, the use of results, the client, the risks of participating, confidentiality, and the rights of the participants are presented to the respondents. Informed consent is then solicited from the respondents to continue the recruitment process.

Step 3 (telephone step) – Validation and log-in information
The third step of recruitment consists of validating the respondent's contact information (email address used to communicate login information), his or her availability at the scheduled date and time of the group. This step allows the sharing of information for the log in to access the online discussion group platform.

STEP 1 (WEB) – SCREENING AND PROFILING

Leger is preparing to hold a few research sessions with people like yourself. The format of the research is an "online" focus group discussion led by a research professional with up to eight participants. The research's objective is to collect feedback from Canadians to help inform government actions and decisions about food packaging.

The focus group would take place online and will be a maximum of **1.5 hours**. You will be compensated **$150** for your time.

A1. **Are you interested in participating?**

Yes	1	**CONTINUE**
No	2	**THANK AND CONCLUDE**

I would now like to ask you a few questions to see if you meet our eligibility criteria to participate.

A2. To participate in the online discussion group you will need to use **a computer with** a **high-speed Internet connection,** a **WebCam** and **a microphone**. **You cannot participate by using a mobile phone**. Are you able to participate under these conditions?

Yes	1	**CONTINUE**
No	2	**THANK AND CONCLUDE**

PROFILING

INTRO1.

1. Do you or anyone in your immediate family work or have you ever worked in …?

Marketing Research	1 **THANK AND CONCLUDE**
Marketing and Advertising	2 **THANK AND CONCLUDE**
Public relations, communications	3 **THANK AND CONCLUDE**
Media (newspapers, television, radio, etc.)	4 **THANK AND CONCLUDE**
Telecommunications	5 **THANK AND CONCLUDE**
None of the above	9

Sex

2. Are you…?.

… a man	1
… a woman	2
Other	3

Province

3. In which province or territory do you live?

British Columbia	1	THANK AND CONCLUDE
Alberta	2	THANK AND CONCLUDE

Saskatchewan	3	THANK AND CONCLUDE
Manitoba	4	THANK AND CONCLUDE
Ontario	5	THANK AND CONCLUDE
Quebec	6	THANK AND CONCLUDE
New Brunswick	7	THANK AND CONCLUDE
Nova Scotia	8	THANK AND CONCLUDE
Prince Edward Island	9	THANK AND CONCLUDE
Newfoundland	10	THANK AND CONCLUDE
Northwest Territories	11	GR 11; 12
Yukon	12	GR 11; 12
Nunavut	13	GR 11; 12

Language

4. What is your ***first official language spoken***?

French	1	THANK AND CONCLUDE
English	2	GR 11; 12

AGE.

5. What age category do you fall into?

13 or younger	99	THANKS AND CONCLUDE
14 to 17	0	THANKS AND CONCLUDE
18 to 24	1	
25 to 34	2	
35 to 44	3	
45 to 54	4	
55 to 64	5	
65 and over	6	

EDUCATION.

6. What is the highest level of education you completed?

Some high school or less	**1**
High school diploma or equivalent	**2**
Registered Apprenticeship or other trades certificate or diploma	**3**
College, CEGEP or other non-university certificate or diploma	**4**
University certificate or diploma below bachelor's level	**5**
Bachelor's degree	**6**
Postgraduate degree above bachelor's level	**7**

OCCUP.

7. Which of the following categories best describes your current employment status? Are you…

Working full-time (35 or more hours per week)	**1**
Working part-time (less than 35 hours per week)	**2**
Self-employed	**3**
Unemployed, but looking for work	**4**
A student attending school full-time	**5**
Retired	**6**
Not in the workforce (full-time homemaker, full-time parent, or unemployed and not looking for work)	**7**
Other employment status. Please specify.	**8**

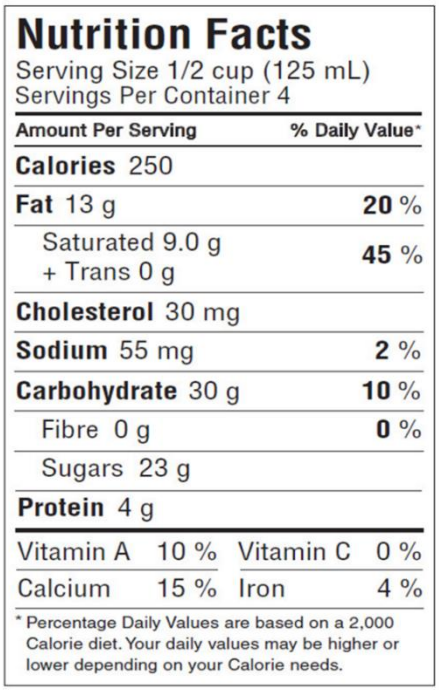
MINO

8. Do you identify as an Indigenous person (First Nations, Inuit or Métis)?

Yes	1	GR 11; 12
No	2	THANK AND CONCLUDE
I prefer not to answer	99	THANK AND CONCLUDE

INTRO2. Health Literacy Screening Tool (6 Questions)

This information is on the back of a 500-ml container of ice cream.



Nutrition Facts

Serving Size 1/2 cup (125 mL)
Servings Per Container 4

Amount Per Serving	% Daily Value*
Calories 250	
Fat 13 g	**20** %
Saturated 9.0 g + Trans 0 g	**45** %
Cholesterol 30 mg	
Sodium 55 mg	**2** %
Carbohydrate 30 g	**10** %
Fibre 0 g	**0** %
Sugars 23 g	
Protein 4 g	

Vitamin A	10 %	Vitamin C	0 %
Calcium	15 %	Iron	4 %

* Percentage Daily Values are based on a 2,000 Calorie diet. Your daily values may be higher or lower depending on your Calorie needs.

INGREDIENTS: Cream, skim milk, liquid sugar, water, egg yolks, brown sugar, milkfat, peanut oil, sugar, butter, salt, carrageenan, vanilla extract

1. If you eat the entire container, how many calories will you eat?
a. 250 Calories
b. 300 Calories
c. 500 calories
d. 1000 Calories (correct)
e. I do not know

2. If you are allowed to eat 60 grams of carbohydrates as a snack, how much ice cream could you have?
a. ½ cup (125 mL)
b. 1 cup (250 mL) (correct)
c. 2 cups (500 mL)
d. 4 cups (1000 mL)
e. I do not know

3. Your doctor advises you to reduce the amount of saturated fat in your diet. You usually have 42 g of saturated fat each day, which includes one serving of ice cream. If you stop eating ice cream, how many grams of saturated fat would you be eating each day?
a. 9 grams
b. 15 grams
c. 33 grams (correct)
d. 42 grams
e. I do not know

4. If you usually eat 2,500 calories in a day, what percentage of your daily value of calories will you be eating if you eat one serving of ice cream?
a. 5%
b. 10% (correct)
c. 20%
d. 250%
e. I do not know

5. Pretend that you are allergic to the following substances: penicillin, peanuts, latex gloves and bee stings. Is it safe for you to eat this ice cream?
a. Yes
b. No (correct)
c. I do not know

6. (Ask only if the participant responds "No" to question 5) Why not?
a. Contains egg
b. Comes from bees
c. Contains peanut or peanut oil (correct)
d. Contains ingredients that may be harmful
e. I do not know

NVS SCORE CALCULATION

[PROGRAMMER NOTES: Health literacy level based on the score to the NVS test.]
Score by giving 1 point for each correct answer (maximum 6 points).
Score of 0-1 suggests a high likelihood (50% or more) of limited literacy.
Score of 2-3 indicates the possibility of limited literacy.
Score of 4-6 almost always indicates adequate literacy.

Label	Value	
Score 0 – 3 = Marginal Health Literacy	1	**ELIGBLE FOR GR 11**
Score 4 – 6 = Adequate Health Literacy	2	**ELIGIBLE FOR GR 12**

PSPC POR1
Have you ever attended a discussion group or taken part in an interview on any topic that was arranged in advance and for which you received money for participating?

Yes	1
No	2 **GO TO Q1**

PSPC POR2

When did you last attend one of these discussion groups or interviews?

Within the last 6 months	1 **THANK AND CONCLUDE**
Over 6 months ago	2

PSPC POR 3

Thinking about the groups or interviews that you have taken part in, what were the main topics discussed?

RECORD: _____ **THANK/TERMINATE IF RELATED TO FOOD PACKAGING**

PSPC POR4

How many discussion groups or interviews have you attended in the past 5 years?

Fewer than 5	1
Five or more	2 **THANK AND CONCLUDE**

Please review the following information related to this research and complete the consent section before moving forward.

STEP 2-(WEB) CONSENT FORM

Project Researchers:

Elizabeth Mansfield, PhD, RD, Bureau of Nutritional Sciences, Food Directorate, Health Canada, Ottawa, Ontario
Rana Wahba, MSc, RD, Bureau of Nutritional Sciences, Food Directorate, Health Canada, Ottawa, Ontario
Jacynthe Lafreniere, PhD, RD, Bureau of Nutritional Sciences, Food Directorate, Health Canada, Ottawa, Ontario

Funding Organization:
Health Canada, Ottawa, Ontario

Why are we inviting you to participate in this project?
We know that many people find it hard to understand food labels. We are conducting this research study to help make food labels easier for people to understand and use.

How will we do this?

- Some packaged foods and beverages have much higher levels of sugars, sodium and saturated fat. Some may also have high amounts of added vitamins and minerals and other ingredients such as caffeine and herbals (for example: ginseng).
- We want your help to determine how best to label foods so that you can tell these foods apart from other packaged foods.
- You will be asked to take part in an online discussion group. The moderator will ask you to look at examples of food labels on packaged foods and answer some questions. This should take no more than 90 minutes.
- The discussion will be audio-recorded. The audio recording will be transcribed and saved as a digital word document. The audio-recordings will then be erased.

Where will we be doing these discussion groups?

- Discussion groups will be held virtually at (**INSERT SPECIFIC DATE AND TIME**). You will need a high-speed internet connection, a computer or a tablet device equipped with a camera and a microphone to participate.

Can I be in the project?

- Yes, you can if….
    - You are willing to take part in an online discussion group.
    - You can speak and read French or English and you can understand everything on this page.
    - You are at least 14 years old.

What if I start the project and then want to stop? Can I do that?

- Yes. Once you start, you can stop at any time. You won't have to explain why you want to stop.
- If you decide to stop, all of the interview information we have collected from you will be kept and used for the purpose of this research.

Are there any risks to being in the project?

- Answering questions about food labels can be hard. It requires reading the labels plus some math and a little writing.
- Some people may have difficulty using an electronic device to participate in a discussion group.
- Some people may feel uncomfortable being recorded.

Do I get any benefit from being in the project?

- You will be helping us learn how to improve our food labels.
- As compensation for your participation in the discussion group, you will receive $150.

Privacy

- We encourage participants to keep all the information shared in the discussion group confidential. However, we cannot guarantee confidentiality.
- Only project researchers will have access to the discussion group information.
- The only thing that will have your name and personal information on it will be the consent form that you will sign. This information will be kept by the market research company and will not be shared with the Health Canada research team.
- All research information will be kept for a period of 7 years once the study has been completed.

What will we do with the results of the project?

- The results of this study will be used by the project researchers to improve labelling of foods.
- The results of this study will be used in a research report and presentation by project researchers. Your name will not be used in any of these documents.
- When the project is over, we can send you a one-page summary report if you give your contact information (email or mailing address).

Your rights

- You might have questions about your rights as a person in this project. You might also want to confirm that this project has been approved and is safe for you to be in.

If you have any questions about this research, you can contact:

- Elizabeth Mansfield, Health Canada
  Telephone: 343-542-4654
  Email: beth.mansfield@canada.ca

If you have questions about your rights as a research participant, you may contact:

- Manager, Research Ethics Board of Health Canada
  Telephone: (613) 941-5199
  Email: hc.reb-cer.sc@canada.ca

Privacy Notice

The personal information you provide to Health Canada is governed in accordance with the *Privacy Act*. We only collect the information we need to conduct the research project "Consumer Perceptions of Supplemented Food Labelling" under Section 4 of the Department of Health Act.

Purpose of collection: We require your personal information to determine your eligibility and record your consent to participate in this research study that will inform labelling policy, guidance documents, and development of labelling tools for supplemented foods. If you request a copy of the research study, your contact information will be used to provide one to you.

Other uses or disclosures: Your personal information will not be shared. In limited and specific situations, your personal information may be disclosed without your consent in accordance with subsection 8(2) of the *Privacy Act*.

For more information: This personal information collection is described Health Canada's Health Related Research class of personal information, available online at https://www.canada.ca/en/treasury-board-secretariat/services/access-information-privacy/access-information/information-about-programs-information-holdings.html)

Your rights under the *Privacy Act*: In addition to protecting your personal information, the *Privacy Act* gives you the right to request access to and correction of your personal information. For more information about these rights, or about our privacy practices, please contact Health Canada's Privacy Coordinator at 613-948-1219 or hc.privacy-vie.privee.sc@canada.ca. You also have the right to file a complaint with the Privacy Commissioner of Canada if you think your personal information has been handled improperly.

Do you consent to participate in this research? *Your consent indicates that you understand the conditions of participation in this research study found below and that you have had the opportunity to have your questions answered by the project researchers.*

- ☐ **Yes (CONTINUE TO INVITATION)**
- ☐ **No (THANK AND CONCLUDE)**

Participant Name: _____

Date: _____

Copy of Consent for Participant - You are being given a copy of this informed consent to keep for your records.

INVITATION

Thank you. We would like to invite you to participate in an online discussion group that will be led by an experienced professional facilitator and will for a maximum of 90 minutes.

Someone from our company will contact you by phone to provide you with the date, time and log in information to participate in the discussion group and to validate your consent and availability. Please provide your name, phone number, and email address where we can reach you in the evening as well as during the day?

Name:
Phone number (during the day):
Phone number (during the evening):
Email address:

STEP 3 (PHONE) - VALIDATION

Hello/Bonjour, I'm _____ of Leger, a marketing research company. May I speak with (**INSERT FULL NAME OF THE PARTICIPANT**).

Hi, I'm _____ of Leger. You recently completed a short online questionnaire and gave your consent to participate in a discussion group we are organizing on behalf of Health Canada. The objective of the discussion group is to collect opinions and perceptions of food labels to help inform Health Canada's nutrition labelling regulations.

We are preparing to hold a few discussion groups with Canadians. These discussion groups will be conducted "online" and will be led by a research professional with up to eight participants. All opinions will remain anonymous and will be used for research purposes only in accordance with laws designed to protect your privacy. You don't need to be an expert to participate. We don't have anything to sell and we don't advertise and it's not an opinion poll on current events or politics.

Your participation is voluntary. All information collected, used and/or disclosed will be used for research purposes only and the research is entirely confidential. We are also committed to protecting the privacy of all participants. The names of the participants will not be provided to any third party. May I continue?

[INTERVIEWER NOTE: IF ASKED ABOUT PRIVACY LAWS, SAY: "The information collected through the research is subject to the provisions of the Privacy Act, the legislation of the Government of Canada, and to the provisions of relevant provincial privacy legislation.]

The discussion group will take place online on the (**INSERT DATE/TIME**) and will be a maximum of **1.5 hours**. You will be compensated **$150** for your time.

Q0
Are you available to participate in this discussion group at **INSERT DATE/TIME**?

Yes	1
No	2 **THANK AND CONCLUDE**

Q1. In the discussion group you will be asked to share and discuss your opinions and perceptions of nutrition information on food labels with other participants in English. Please note that you do not need to be an expert to participate. You may also be asked to read during the meeting.

How comfortable do you feel in such an environment?

Read the answer choices.

Very comfortable	1
Somewhat comfortable	2
Not very comfortable	3 **THANK AND CONCLUDE**
Not at all comfortable	4 **THANK AND CONCLUDE**

INVITATION SCRIPT

Thank you. We'd like to invite you to participate in the discussion group.

The discussion group will take place at [XX], on ____XX____ (date/time) __XX__.

Just a quick reminder that you will need a computer, a high-speed Internet connection, a WebCam and a microphone in order to participate in the online discussion group. You cannot participate using a mobile phone.

Representatives from Health Canada and research analyst may observe the discussion group, but will not have access to any of your personal information. Do you consent to participate in this discussion group ?

Yes	1
No	2 **THANK AND TERMINATE**

Now I have a few questions that relate to privacy, your personal information and the research process. We will need your consent on a few issues that enable us to conduct our research. As I run through these questions, please feel free to ask me any questions you would like clarified.

We need to provide the **online platform** and **session moderator** with the names and profiles of the people attending the discussion group because only the individuals invited are allowed in the session and the facility and moderator must have this information for verification purposes. Please be assured that this information will be kept strictly confidential. **GO TO P1**

P1) Now that I've explained this, do I have your permission to provide your name and profile **to the online platform and moderator?**

Yes	1 GO TO P2
No	2 **THANK AND TERMINATE**

P2) A recording of the discussion group session will be produced for the research project purposes. The recording will only be used by **the team of people working on the project at Léger and Health Canada** to assist in preparing a report on the research findings.

Do you agree to be recorded for research purposes only?

Yes	1 COMPLETE THE INVITATION
No	2 **Read information below and P2A**

It is necessary for the research process for us to record the discussion group session as the researcher needs this material to complete the report.

P2a) Now that I've explained this, do I have your permission for recording the discussion group?

Yes	1 COMPLETE THE INVITATION
No	2 **THANK AND TERMINATE**

As we are only inviting a small number of people to take part, your participation is very important to us. If for some reason you are unable to participate, please call so that we can get someone to replace you. You can reach us at ____ at our office. Please ask for ____.

To ensure that the discussion group runs smoothly please :

- Make sure you are connected to the Internet and logged on 15 minutes in advance of the group
- Turn off your cellular phone to avoid disruptions during the discussion group.
- Make sure your WebCam is ON and functional
- Wear your reading glasses, if necessary, to be able to review the material presented on your computer screen.
- Make sure you are in a room with good lighting
-

We will send your login information to the online discussion group to your email address. Please confirm receipt of this information when it reaches you.

Your email address : _____

Thank you very much!

A.4 Discussion Guide

Moderator's guide- FINAL ENGLISH

Objectives:

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 label on SFs high in saturated fat, sugars or sodium.

Introduction and explanation

WELCOME AND PRESENTATION

Hello everyone and welcome to this discussion group. I hope everyone is doing well. Let me introduce myself, my name is _____ and I am _____ at Léger Marketing. Léger Marketing is a public opinion and consumer research firm. Some of you probably already know Leger Marketing from our surveys and our presence in the various media across the country. In addition to surveys, we organize discussion groups, like this one, on a variety of different topics.

PRIMARY AIM

Léger Marketing is conducting discussion groups for Health Canada to help inform labelling regulations for supplemented foods. We want to have a discussion with you on your opinions and perceptions of supplemented food labels.

RULES OF DISCUSSION

Other colleagues participating in this study will listen to this discussion group. Some colleagues at Health Canada and some analyst colleagues at Leger will take notes during the discussion group, even if you cannot see them.

Discussion groups are designed to encourage open and honest discussion. My role as moderator is to guide the discussion and encourage everyone to participate. I will also ensure that the discussion stays on topic and stays on schedule.

Your role is to answer questions and express your opinions. We want to hear everyone's opinions in a discussion group, so don't hold back if you have a comment even if you think your opinion may be different from others in the group. Others may share your point of view. Everyone's opinion is important and should be respected.

I would also like to emphasize that there are no wrong answers. We are simply looking for your opinion. This is not a test of your knowledge.

It is also important that you speak loud enough so that everyone can hear you and that you speak one at a time so that I can follow the discussion.

Finally, we are video recording the discussion group for analysis purposes. The recording will only be viewed by the individuals working on this project to help them write a project report for Health Canada. The recordings will not be circulated in any other way without your explicit consent.

RESULTS CONFIDENTIALITY

- The discussions we will have this evening will remain confidential at all times.
- Your name will never be mentioned in the project report.
- Information is being collected for the project purposes only.

Do you have any questions before we get started?

Ice-breaker Task:

To start off, let's talk about food. Introduce yourself by sharing your 1st name and a favorite food or meal with the group.

We are now going to get started with the purpose of bringing you together today.

Because we will be discussing labelling of foods we thought that we should start off by looking at a food label together.

IMAGES of Orange Twist (FOP = front of pack; BOP=back of pack)

1. Image FOP+BOP: *Here is an example of the front and back of a beverage called Orange Twist.*
2. Image FOP of the can: *Here is the front of the beverage; I am going to zoom in and show you a close up of this information*
3. Image FOP with close-up on claims and common name: *The front food label has the common name of the food (JUICE) and claims about the food: 50% less sugars, 100 calories per can.*
4. Image BOP: *Here is the back of the beverage; I am going to zoom in and show you a close up of this information*
5. Image BOP with the Nutrition Facts table: *This is the Nutrition Facts table*
6. Image BOP with the list of ingredients: *This is the list of ingredients*

7. Image FOP+BOP: *Here is the front and back of the Orange Twist beverage. Would anyone like to share what piece(s) of label information they like to use when making food choices?*

- Go back to image close-ups as needed during the discussion

Moderator encourages participants to share their information with the group.

Part 1: Introduction to Supplemented Foods

The goal of Part 1 is to introduce the concept of supplemented foods and the 3 levels of the labelling approach for SFs. A. Level 1 is a SF that is not high in saturated fat, sugars or sodium and has NO cautionary labelling B. Level 2 is a SF that is not high in saturated fat, sugars or sodium and has cautionary labelling C. Level 3 is a SF that is high in saturated fat, sugars or sodium and has cautionary labelling

Today we would like to talk about some new types of foods and drinks with added ingredients that you may have seen in stores.

Some of these new foods have added ingredients that might be familiar to you – such as vitamins and minerals. Examples include:

Start animation for slide.

CLICK (1) *waters with added vitamins,*

CLICK (2) *sport drink mixes with added minerals,*

CLICK (3) *bars with vitamins.*

Other ingredients may be less familiar and include foods or beverages with

CLICK (4) *herbal ingredients (such as this beverage with ginseng);*

CLICK (5) *and bioactive ingredients (such as bars with caffeine);*

or foods and beverages with amino acids such as

CLICK (6) *this Shaklee bar supplemented with* an amino acid, leucine*).*

*Health Canada has decided to call foods and beverages that contain these types of added ingredients "**supplemented foods**".*

Health Canada has developed nutrition labels to help Canadians identify these foods and distinguish them from regular foods. Some of these supplemented foods may also need to provide guidance to consumers on appropriate and safe use of these products.

Health Canada wants your feedback on these nutrition labels to help Canadians make informed supplemented food choices. Let's take a look at some examples of these Supplemented Foods (SFs) and their nutrition labels.

Task A - The goal of this task is to highlight the **Supplemented food facts table (SFFt)**.

IMAGE Elan VitaMin Boost (FOP+BOP)

*Here is an example of a beverage showing the front and the back of the container (*Image FOP + BOP*). I am also going to zoom in on the information. Let's take a minute to look at the label information and then I will ask you some questions.*

Take 10 seconds per image: (Image order for **VitaMin Boost)**:

1. *FOP + BOP*
2. *FOP*
3. *Close-up on claims and common name*
4. *BOP*
5. *Close-up on SFFt*
6. *Close-up on List of ingredients*
7. *FOP + BOP*

Question 1: *Is there any information on this beverage that tells you if it is a supplemented food?* **Answers could include: claims on the front highlighting supplemental ingredients (SIs) and the Supplemented Food Facts table (SFFt) on the back**

You may use the image close-ups as needed to discuss

Probing questions:

- **Display image of the FOP of the beverage:** *What does the information on the front of the package tell you about the beverage?*
- *Do you need other label information to confirm that it is a supplemented food? If so, what other information?*
- **Display image of the SFFt of the beverage:** *What does the Supplemented Food facts table tell you about the beverage?*

Question 2: *What information tells you what the supplemental ingredients in this beverage are?* **Answers could include the claim on the FOP) and the "Supplemented with" section of the SFFt**

You may use the following image close-ups as needed:

- Close-up on claims and common name
- Close-up on SFFt
- Close-up on List of ingredients

Probing questions:

- *How familiar to you are the supplemental ingredients?*
- *How healthy do you think this supplemented food is? Why?*
- *What makes it (healthy or not healthy)?*

Task B: The goal of this task is to highlight the FOP **Supplemented Food Product Identifier (SFPI)** and the BOP **cautionary labelling**.

IMAGE Burst Beverage (FOP + BOP)

Here is another beverage showing the front and the back of the container (Image FOP + BOP). *I am also going to zoom in on the information. Let's take a minute to look at the label information and then I will ask you some questions.*

Take 10 seconds per image: (Image order for **Burst)**:

1. *FOP + BOP*
2. *FOP*
3. *Close-up on SF symbol*
4. *Close-up on claims and common name*
5. *BOP*
6. *Close-up on SFFt*
7. *Close-up on caution*

8. *Close-up on List of ingredients*
9. *FOP + BOP*

Question 1: *How do you know if this is a supplemented beverage?* **Answers include the SFPI (FRONT) and the SFFt (BACK)**

You may use the following image close-ups as needed:

- Close-up on SFPI
- Close-up on claims and common name
- Close-up on SFFt
- Close-up on caution
- Close-up on List of ingredients

Probing questions for the SFPI on the FOP
Display Close-up on SFPI:

- *What does that tell you about the product?*
- *What do you think the exclamation mark means?*
- *Why would an exclamation mark be on the front of the beverage label?*
- *What does "Health Canada" at the bottom of the product identifier mean to you?*

Question 2: *Is there anyone who should not drink this beverage? Why or why not?* **Probing questions for the cautionary labelling:**

- *Would you consume the product? Why, why not?*
- *What label information tells you why someone should not consume this product?*
- *Why do you think the label says they should not consume this product?*

SHOW IMAGE FOP + BOP

Question 3: *How healthy is this beverage?*

- *Is this a healthy beverage? Why? Why not?*
- *How would you describe this beverage to a friend or family member if they asked you about it?*

Task C: The goal of this task is to highlight the front of pack **SFPI and "High in" FOP nutrition symbol** and the back of pack **SFFt** and **cautionary labelling** to generate discussion on perceptions and appropriate use when a "High in" FOP nutrition symbol is introduced in addition to cautionary labelling

IMAGE Crave Oats & Honey

*Here is a bar, showing the front and the back of the package (*Image FOP+BOP*). You see two back images because bars have a flap and there is information on both sides of the flap.*

I am now going to zoom in on the information on the front and back of the bar. Let's take a minute to look at the label information and then I will ask you some questions.

Take 10 seconds per image: (Image order for **Crave)**:

1. *FOP + BOP 1 + BOP 2*
2. *FOP*

3. *BOP 1*
4. *Close-up on SFFt*
5. *Close-up on SIs in SFFt*
6. *Close-up on caution*
7. *BOP 2*
8. *Close-up on List of ingredients*
9. *FOP + BOP 1 + BOP 2*

Question 1: *How healthy a food choice is this bar?*

Probe on the labelling they mention in their answer

- *What label information helped you to decide how healthy (or not) the bar is?*
- *How believable/credible is this information?*

You may use the following images as needed:

- FOP
- Close-up on SFFt
- Close-up on caution
- Close-up on List of ingredients

Question 2: *Is there any label information that gives you guidance or cautions for use of this bar?*

Probe on the cautionary labelling:

- *What label information tells who should not consume this product?*
- *Why do you think the label says they should not consume this product?*
- *Is there any label information that tells you how much of this product you can consume?*
- *Would you consume the product? Why, why not?*

Task D: The goal of this FINAL task is to review the overall labelling approach and determine the important pieces of information that consumers might use when making a SF choice.

IMAGE Everton Chocolate Bar

*Here is a bar, showing the front and the back of the package (*Image FOP + BOP*).*

I am now going to zoom in on the information on the front and back of the bar. Let's take a minute to look at the label information and then I will ask you some questions.

Take 10 seconds per image: (Image order for Everton Bar)

1. *FOP + BOP 1 + BOP 2*
2. *FOP*
3. *BOP 1*

4. *Close-up on SFFt*
5. *Close-up on SIs in SFFt*
6. *Close-up on caution*
7. *BOP 2*
8. *Close-up on List of ingredients*
9. *FOP + BOP 1 + BOP 2*

Question 1: *Overall, which pieces of information are the most important to you when trying to decide whether or not to choose this food?*

- *Why is that piece(s) of information important to you when making a food choice?*

You may use the following image close-ups as needed:

- FOP
- Close-up on SFFt
- Close-up on caution
- Close-up on List of ingredients

Question 2: *If someone asked you to tell them about this bar, how would you describe it to them?*

- *If that person was* (**choose to probe on: caffeine sensitive, pregnant or breastfeeding, regular supplement user**) *would you include any more information in your description?*

- *If yes, what else would you say? If no, why not?*

Part 2: Polling questions

To generate a final understanding of what the "Supplemented Food" labelling means to consumers.

You are now going to see some food pictures on your screen one after another. For each picture, one piece of information will be highlighted with a circle. Use your mouse or touchpad to click in the box beside any of the statements that describes what that piece of information tells you. Click all that apply. Only you will be able to see what you choose.

Here is a bar with a black circle around a piece of label information on the front of the bar. Use your mouse or touchpad to click in the box beside any of the statements that describes what that piece of information tells you. Click all that apply.

Image 1. FOP of a SF (CRAVE BAR) with an SFPI: circle around the SFPI

¨ This tells me that certain individuals should not eat this bar
¨ This tells me the type and amount of supplemental ingredients in this bar
¨ This tells me that there is cautions of use for this bar
¨ This tells me that this bar is a supplemented food

Here is the same bar with a black circle around a piece of label information on the BACK of the bar. Use your mouse or touchpad to click in the box beside any of the statements that describes what that piece of information tells you. Click all that apply.

Image 2. BOP of a SF (CRAVE Bar): circle around the SIsin the SFFt

¨ This tells me that certain individuals should not eat this bar
¨ This tells me how much of the bar I can eat

- ¨ This tells me the type and amount of supplemental ingredients in this bar
- ¨ This tells me that this bar is a supplemented food

Here is the same bar with a black circle around another piece of label information on the BACK of the bar. Use your mouse or touchpad to click in the box beside any of the statements that describes what that piece of information tells you. Click all that apply.

Image 3. BOP of a SF (CRAVE BAR): circle around the cautionary labelling

- ¨ This tells me that certain individuals should not eat this bar
- ¨ This tells me how much of the bar I can eat
- ¨ This tells me the type and amount of supplemental ingredients in this bar
- ¨ This tells me that this bar is a supplemented food

Here is a beverage with a black circle around a piece of label information on the front of the beverage. Use your mouse or touchpad to click in the box beside any of the statements that describes what that piece of information tells you. Click all that apply.

Image 4. FOP of a SF beverage (Berry Fusion): circle around the "High in" FOP nutrition symbol

- ¨ This tells me that it is a healthy beverage
- ¨ This tells me the type and amount of supplemental ingredients in this beverage
- ¨ This tells me that this beverage is a supplemented food
- ¨ This tells me that this beverage is an unhealthy beverage

Here is a beverage with a black circle around a piece of label information on the front of the beverage. Use your mouse or touchpad to click in the box beside any of the statements that describes what that piece of information tells you. Click all that apply.

Image 5. FOP of a SF beverage with "High in" FOP nutrition symbol and a SFPI (KINSAKI): circle around the SFPI

- ¨ This tells me that certain individuals should not drink this beverage
- ¨ This tells me that there are cautions about the use of this beverage
- ¨ This tells me that this beverage is a supplemented food
- ¨ This tells me that Health Canada has approved this beverage

Here is the same beverage with a black circle around a piece of label information on the back of the beverage. Use your mouse or touchpad to click in the box beside any of the statements that describes what that piece of information tells you. Click all that apply.

Image 6. BOP of a SF beverage with "High in" FOP nutrition symbol and a SFPI (KINSAKI): circle around the cautionary labelling

- ¨ This tells me that certain individuals should not drink this beverage
- ¨ This tells me how much of this beverage I can drink
- ¨ This tells me the type and amount of the supplemental ingredients in this beverage
- ¨ This tells me that this beverage is a supplemented food

LAST Questions (NO IMAGES)

Polled scaled response (Always – sometimes - Never)

- SFs are healthier than regular foods/beverages
- SFs have added ingredients that are good for me
- The SF label gives me the information I need to decide whether or not to consume a SF

Thank you for your participation!

A.5 Mock Package Labelling Information

Tasks	SF Brand Name	Supplemental Ingredients	Front-of-package Symbols	Marketing Claim	Nutrient Content Claim	Health Claim	Caution Statements
Task 1 (pregnant / breastfeeding and youth groups)	**Vitamin Boost**	Vitamin D (2 µg) Magnesium (20 mg)	N/A	Refreshing	Source of Vitamin D and Mg	Vitamin D and Magnesium help build bones and teeth	N/A
Task 1 (all other groups)	**Vitamin Boost**	Pantothenate (35 mg) Magnesium (20 mg)	N/A	Flavoured with ginseng	Contains pantothenate and magnesium	Pantothenate and magnesium are factors in energy metabolism and tissue formation	N/A
Task 2	**Burst**	Glycine (100 mg) Cysteine (50 mg)	Supplement Food Product Identifier		High in Vitamin C	Vitamin C is an antioxidant that helps protect your cells	Not recommended for those under 14 years old. Not recommended for pregnant or breastfeeding women.
Task 3	**Crave**	Vitamin A (300 µg) Vitamin C (50 mg) Vitamin E (10 mg)	"High in" Front-of-package nutrition symbol Supplement Food Product Identifier	Crunchy & Flavourful! Oats & Honey	Source of Vitamin C, a dietary antioxidant	N/A	Not recommended for those under 14 years old. Do not eat more than 2 bars per day. Do not consume this product with other supplemented foods or supplements that have the same supplemental ingredients.
Task 4	**Everton's Chocobar**	Caffeine (100 mg) Riboflavin (25 mg) Niacinamide (200 mg) Vitamin B_6 (20 mg) Vitamin B_{12} (150 µg)	"High in" Front-of-package nutrition symbol Supplement Food Product Identifier	Sweet & Energizing	High Caffeine Content	N/A	Not recommended for those under 14 years old, for pregnant or breastfeeding women or for individuals sensitive to caffeine. Do not consume this product with other supplemented foods or supplements that have riboflavin, niacinamide, vitamin B_6, vitamin B_{12} and/or caffeine. Do not eat more than 1 bar per day.