

Northern Ireland consumer perceptions of reformulation of food



August 2018

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1 Executive summary

Background and methodology

In January 2018, Food Standards Agency (FSA) commissioned 2CV and Community Research to conduct independent research exploring Northern Ireland (NI) consumers' perceptions of product reformulation (to reduce levels of sugar, saturated fat, salt) and reduction in portion size by the NI food industry. Research focused on seven higher priority food categories from the Eatwell Guide which are included in Public Health England's (PHE) sugar reduction programme: breakfast cereal, morning goods (e.g. croissants, scones, pancakes etc), ice cream, yoghurt, cake, pudding and biscuits. These have been identified to be among the categories which contribute most to children's sugar intakes. A strong evidence base was required to inform FSA's engagement and partnerships with industry, as well as the FSA's own consumer messaging and communications support to NI small and medium sized food businesses (SMEs).

A multi-method and staged approach was used, combining traditional and experimental research techniques. Qualitative focus groups and digital diaries explored what informs consumer perceptions and the real-world context in which people make decisions about what food they eat and buy. This was followed by quantitative engagement with consumers to measure acceptance, purchase intent and the impact of framing on acceptance. The methodology drew on best-practice behavioural science thinking to get closer to consumers' actual purchase behaviour.

Research Findings

There was broad acceptability of the reformulation initiative

NI consumers broadly accepted the need for product reformulation, seeing it as a move in keeping with current health trends and with potential benefits for themselves and their family. It sat well with their aspirations for healthy living. Resizing products was also accepted, in principle, due to the perception of wider social benefits even though individuals felt that they themselves would lose out.

Acceptance existed regardless of what consumers believed the rationale for it was

NI consumer acceptance of product reformulation existed no matter who consumers believed was driving it. Acceptance was significantly lower, however, when people were told that it was driven by industry than when told it was driven by government or when not told anything at all. Qualitative research confirmed that NI consumers are wary of industry motives surrounding health marketing and this led consumers to doubt the ultimate consumer benefit of reformulation.

Acceptance rested on three conditions: product taste, value and health must remain

NI consumer acceptability of reformulation, both reformulated recipes and reduced sized products, rested on three conditions – that the new products matched old ones in terms of taste, value and the perceived healthiness or allergy risks posed by replacement ingredients. These consumer priorities are

all well-evidenced through previous FSA research, namely FSA NI Food Labelling 2016¹, Our Food Future (2016)² and FSA Strategy 2015-2016 (2014)³.

Acceptability was higher for reformulated products than resized ones

NI consumers were more accepting of reformulated than resized products, both reduced overall size and reduced portions sizes. This is because reformulated products were not expected to compromise consumers' key condition of value. Whereas, acceptability of resized products was generally lower as people believed consumers were losing out at manufacturers' gain.

The research showed that the acceptability of an overall reduced size product was the lowest of all options as the consumer benefit was least clear. People did not see themselves eating any less (no health benefit), they foresaw difficulty with meal-planning ("*[Product] size change is not a good option as this is a good size for a full meal*") and most importantly the value condition was forfeited as they would get less for their money.

Communication and engagement activities will be key to building consumer trust

While this research demonstrated that there was broad acceptability, NI consumer concerns surrounding the taste, value and health of products will need to be addressed at roll-out and longer-term communications to guarantee the initiative's success. Qualitative research revealed that creating a "positive buzz" around the initiative will be important for providing this reassurance. It further highlighted the need for messages and engagement activities to come from a wider perspective, and wider number of stakeholders, than just the food industry as this will help to allay concerns about questionable motives.

A multi-pronged approach to communication was identified as necessary, encompassing changes to the retail environment, product information and public education and engagement. Brand communications and marketing were considered important but other actions will be needed to shape consumer behaviours and shift attitudes, confronting public scepticism.

The research has shown that clear and noticeable information signalling product changes will be important for creating trust and for reassuring consumers that their three conditions – taste, value and health – are being met. Participants of the research also welcomed the fact that clear labelling created consumer choice, something they valued. Consumer support was highest for information shown on front of packs. However, as we also see in previous research, consumer demand for product labelling can be contradictory; they say they want information but in reality are not paying close attention. We also know that feeling 'overwhelmed' by health claims and marketing can drive down consumer trust and lead to disengagement. It will therefore be important to consider the right balance between transparency and overload.

¹ 'Understanding Northern Ireland Consumer Needs Around Food Labelling', FSA research report prepared for FSA by TNS BMRB (July 2016)

<https://www.food.gov.uk/research/research-projects/understanding-northern-ireland-consumer-needs-around-food-labelling>

² 'Our Food Future', FSA research report prepared in partnership with TNS BMRB (February 2016)

<https://www.food.gov.uk/sites/default/files/media/document/our-food-future-full-report.pdf>

³ 'FSA Strategy 2015-16', research report prepared for FSA by TNS BMRB (March 2014)

<https://acss.food.gov.uk/sites/default/files/fsa-strategy-research-report.pdf>

Participants of qualitative sessions, viewed the retail environment as the logical place for engagement initiatives such as in-store demonstrations, taste tests and information stands – given the questions people have surrounding product reformulation, being able to engage with new products prior to purchase could help allay doubts, create positivity and raise general awareness in turn prompting word of mouth recommendations?

Wider public messaging and a proactive government voice are also valuable

This research clearly demonstrates the risk that consumers will reject product reformulation if they believe the initiative is being led by industry. A supporting public voice is therefore critical to build consumer trust in the initiative and make the consumer benefits of reformulation clear.

Recent FSA Trust research supports this proactive government role and points to the value it has for building trust in the wider food sector, including brands. The public want to know that someone is looking out for consumers' interests and holding industry to account (FSA Trust 2018).

FSA Trust findings, March 2018, research conducted for FSA by 2CV and Community Research

- While trust in the food system is generally higher than other sectors, it is still fragile and the 'trust bond' people have with food brands and the wider system can easily be shaken.
- People value a proactive government that is seen to hold industry to account and safeguard consumer interests.

2 Introduction

2.1 Background and context

In January 2018, the FSA commissioned 2CV and Community Research to conduct independent research to explore NI consumers' perceptions of product reformulation (to reduce levels of salt, sugar, fat) and reduction in portion size by the food industry in NI among identified categories of food from the Eatwell Guide.

This was identified as a gap in the evidence base through the Eating Well Choosing Better steering group. The FSA Eating Well Choosing Better programme is a 4-5 year initiative which aims to make the healthier choice the easier choice for NI consumers. The Eating Well Choosing Better programme, which is included in the draft Programme for Government delivery plan, leads on a number of workstreams including those with small and medium sized manufacturers and with the retail sector in NI to increase the availability of healthier foods. The programme complements and aligns with the reduction and reformulation programme which is overseen by Public Health England on behalf of the Department of Health and Social Care and has been developed following publication of the Childhood Obesity Plan⁴. FSA needed a strong evidence base to inform future engagement with industry and support on-going conversations and potential partnerships.

Research was also needed to inform FSA's own consumer messaging as part of the Eating Well Choosing Better programme and to help FSA provide support to SMEs around communication and information provision for their consumers.

2.2 Research objectives

To explore consumer perceptions and acceptability of product reformulation (reduction in sugar, saturated fat, salt / decrease in portion size) by the food industry in NI.

Key Objectives:

- Determine consumer perceptions of the reasons the food industry may choose to reformulate or reduce the portion size of their products (including consumer awareness of government initiatives on reducing sugar, saturated fat, salt and portion size, and how this features over the consumer perception of the food industry reducing portion sizes as a cost-saving measure)
- Determine how acceptable consumers find reductions in portion size and product reformulation (reduction in sugar, saturated fat, salt)

⁴ 'Childhood obesity: a plan for action'.

The government's plan for action to significantly reduce childhood obesity in England by supporting healthier choices (published August 2016). <https://www.gov.uk/government/publications/childhood-obesity-a-plan-for-action>

- Identify what information, if any consumers would like to see on packaging / labels / in the media of food and drink that has been reformulated/where portion size has been reduced
- Explore shopping behaviour in relation to food products that have been reformulated/ where portion size has been reduced

In particular, the research focused on 7 higher priority food categories: breakfast cereal, morning goods (e.g. croissants, scones, pancakes etc), ice cream, yoghurt, cake, pudding and biscuits. These have been identified to be among the categories which contribute most to children’s sugar intakes, included in Public Health England’s (PHE) sugar reduction programme.

2.3 Research methodology

A multi-method and staged approach was chosen for this study, combining traditional and cutting-edge research techniques: qualitative focus groups, digital diaries and quantitative scenario-testing. The bespoke approach was designed specifically to meet FSA’s objectives of understanding *actual*, not just claimed, behaviour.

Figure 1 Research methodology



Stage 1: Qualitative scoping

The qualitative stage consisted of five focus groups with NI consumers (six to eight people per group) in Belfast and Portadown. Respondents were split by life-stage, gender, socio-economic group and attitudes relating to food high in fat, sugar and salt, and healthy eating.







The discussion flow was as follows: typical shopping habits; attitudes to nutrition and health; awareness of health issues and health in the news; spontaneous and prompted views of product reformulation and portion size reduction; reflective evaluation of product reformulation and portion size reduction (benefits and concerns); ideal future communications and engagement on product reformulation and portion size reduction.

Qualitative sessions informed the design of the quantitative survey and provided an early read on consumer perceptions, acceptance levels, conditions for acceptance and information needs.

Stage 2: Deep dive mobile

The mobile ethnography captured *actual* eating and shopping behaviour. Forty participants used 2CV’s bespoke digital research app “2CV Momento” to log their attitudes and behaviour across a two-week period. Participants were set a structured series of tasks designed to explore both claimed and actual behaviour, submitting a mix of photos, text, voice-notes and videos to demonstrate their behaviour.

Figure 2 Digital research tasks

'Cold State' Tasks (Claimed Behaviour)			'Hot State' Tasks (Actual Behaviour)		
Introduction to participants	Food Purchase Attitudes & Behaviours	'Food in the News' Awareness	Cupboard Audit	Food Shop Mission	A Typical Food Shop
					
<i>Participant introductions & initial questions about attitudes towards food + food purchasing</i>	<i>Exploring claimed drivers of food purchase choice + HFSS specific purchasing behaviour</i>	<i>Establishing awareness/engagement with related news coverage & any impact on behaviour</i>	<i>An understanding of general consumption habits with media-rich evidence</i>	<i>Exploring in-the-moment attitudes towards reformulation incl. acceptability and preferences</i>	<i>Demonstrating food choice & exploring what cues/information are being used to inform choice</i>

Stage 3: Quantitative survey and experimental scenario-testing

The quantitative element comprised a 15-minute online survey with 305 nationally representative consumers in NI. Within this, there were a number of elements:

- **Current eating habits** and importance, ease and barriers to buying healthier options in the 7 priority categories (listed above)
- **Spontaneous awareness** of anything related to reducing the sugar, saturated fat, salt content in pre-packed or processed food
- **Quick response questions using behaviour science-inspired 'swiping' tool.** Reflecting a real-life shopping scenario as closely as possible, with this approach we were able to understand intuitive feelings about a respondent’s likelihood to buy various food product changes (reduced sugar, reduced fat, reduced overall portion size and reduced individual portion sizes). Consumers also gave spontaneous and prompted concerns about product changes and perceived advantages
- **Scenario-testing to understand the impact of framing** – how do consumers respond depending on who they think is driving food product improvements? With an experimental approach, consumers were prompted with one of three scenarios:
 - The government is asking food businesses to make their products healthier
 - Some food manufacturers and retailers are making their products healthier
 - No introduction to the idea

Consumers were then asked: spontaneous perceptions, positivity about changes to products bought and broader positive and negative perceptions about food changes.

Stage 4: Integrated analysis and reporting

Throughout the research process, the project team met regularly to analyse the data, share emerging insights and identify key themes. Regular analysis sessions allowed the preliminary qualitative stages to closely inform the design of the quantitative questionnaire and, ultimately, ensured that findings from each stage were triangulated and a common narrative thread identified.

This report details findings from the digital, qualitative and quantitative research phases. It draws these together and where appropriate identifies whether findings relate to one or other specific phase. Whilst the report is therefore an evidence base that records what the research found – the behaviours, attitudes and responses of research participants – there are also passages which reflect the interpretations and informed judgements of the research team who carried out the work.

A note on different types of research

While there are many different ways to conduct research, methodologies broadly fall into one of two camps: qualitative or quantitative. For this study we chose to employ both types in order that we could both *quantify and measure* people’s behaviours and attitudes as well as *explore and understand* why they hold these attitudes and what *motivates* them.

Qualitative and quantitative approaches to research differ greatly, from the type of information they collect to the way the research is conducted and the nature of the evidence base they yield.

Qualitative sample sizes are generally much smaller than quantitative ones as the emphasis is on depth of exploration rather than breadth. While quantitative sample sizes tend to be several hundred people, qualitative sample sizes can range from as few as six people (e.g. for an in-depth ethnographic study) to 100 (e.g. for a citizen forum or deliberative study).

What does this mean for reading this report?

When we report on qualitative findings we are often reporting on the strength of feeling as expressed by both individuals and groups. In quantitative research, we are looking for majority and minority views, and statistically significant differences.

- **Quantitative research** – designed to measure and generalise behaviours and attitudes. The quantitative findings throughout this report are therefore primarily referenced in the form of numerical data e.g. numbers and percentages.
- **Qualitative research** – used to provide understanding of an audience or subject. It uncovers reasons, opinions and motivations underlying people’s decisions and behaviours. Emphasis is on exploration not measurement. The qualitative findings detailed in this report are therefore referenced using words, descriptions and quotes to describe meaning.

3 Main findings

3.1 Awareness and perceptions of reformulation

3.1.1 Existing concerns about eating more healthily

The research showed that there were existing concerns about healthy eating, with consumers saying that healthier food options are important to them. Within the seven priority food categories (breakfast cereal, morning goods, ice cream, yoghurt, cake, pudding and biscuits), healthier options were seen to be most important for breakfast cereal (85%) and yoghurt (77%).

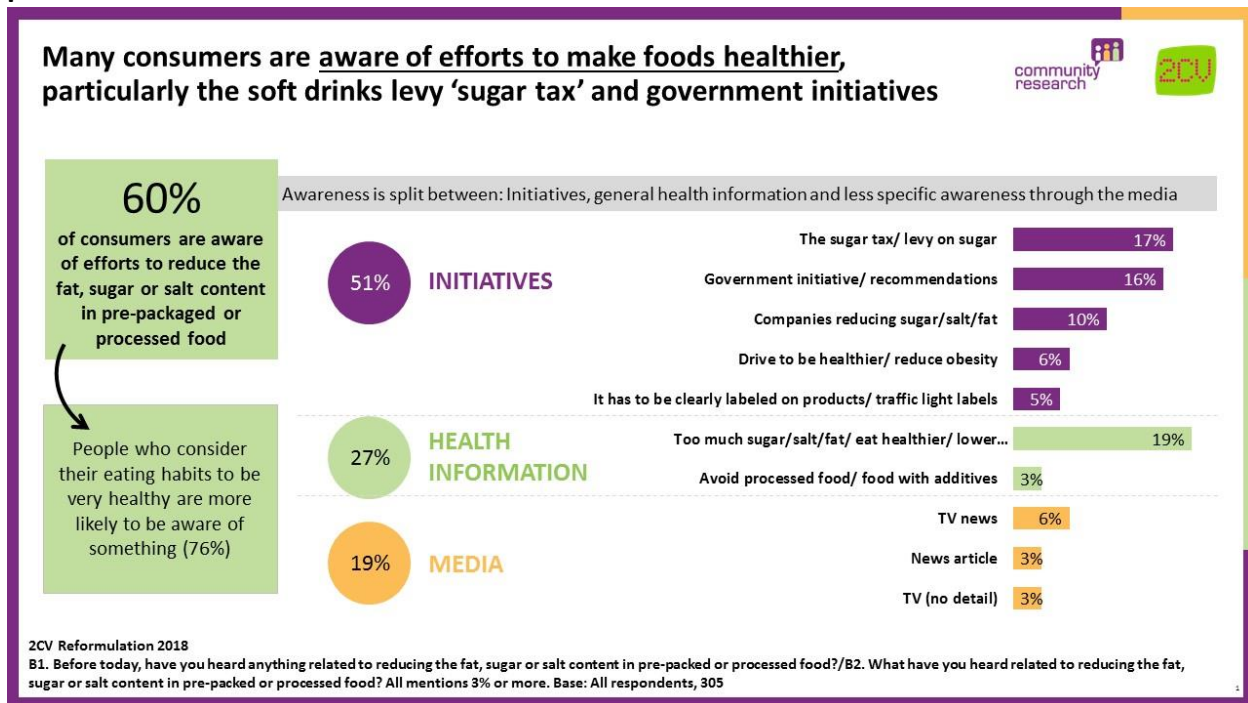
Health concerns were particularly intensified in relation to children’s health, with consumers reporting changes of habit once they have children and many parents saying that they pay close attention to what they feed their children. Participants who submitted “digital diaries” further told us that health news stories can often have a bigger impact on purchasing food for their children than for themselves.

There were also concerns that many foods aimed at children contained more ‘bad’ and so-called ‘unhealthy’ ingredients than they should; parents want to do something to help their children eat more healthily but can feel helpless. Those with children or grandchildren were more likely to think that healthier options are important for morning goods (59%), biscuits (53%) and puddings (47%) than those without children.

3.1.2 Awareness of efforts to reduce fat, sugar and salt content

Many NI consumers had an existing awareness of efforts to reduce the fat, sugar and salt content in pre-packaged or processed food. Overall, 60% of consumers had heard something about efforts to reduce fat, sugar and salt content. Among those who had already heard about these efforts, 51% mentioned initiatives. The most commonly mentioned initiative was the soft drinks industry levy (17%). (Note: research was conducted prior to the introduction of the soft drinks industry levy in April 2018 and associated news coverage including references to reformulation, although after the initial announcement in April 2017).

Figure 3 Awareness of efforts to reduce the fat, sugar or salt content in pre-packaged and processed food



However, in qualitative sessions we found that awareness of the specific idea of reformulation as an initiative was not well known or top of mind.

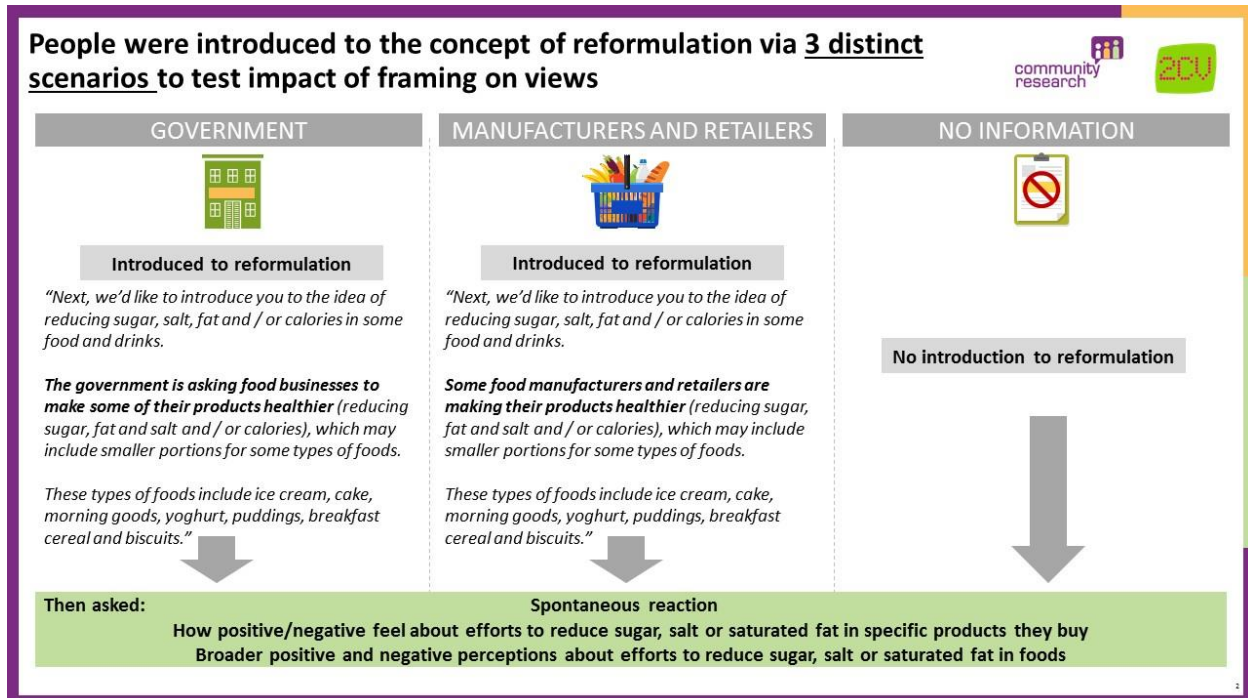
Consumers are becoming increasingly aware of diet and the implications that it causes for long-term health, through news stories, health campaigns and media coverage including reality TV and documentaries. There is also awareness of the rise of food brands such as Deliciously Ella. However, this research demonstrates awareness of high fat, sugar and salt foods is less top of mind among consumers in NI, outweighed by other diet related messaging such as cancer risks and 5 a day.

Among those who had heard something about efforts to reduce the fat, sugar or salt content in pre-packaged or processed food, most believed the government to be responsible. When asked who they believe is driving these efforts, 80% thought that the government is responsible, with 40% naming the Food Standard Agency specifically and 66% saying the 'government' more generally. Supermarkets were named as responsible by 11% of consumers. Groups more likely to think that the change is driven by supermarkets were younger consumers (22% of 16-34 year olds) and C2DEs (17% compared with 6% of ABC1s).

3.1.3 Acceptance of reformulation

Consumers were introduced to the idea of reformulation via three scenarios. In an experimental approach, the quantitative sample was split so that consumers saw one scenario: that the government is asking food businesses to make some of their products healthier; that some food manufacturers and retailers are making their products healthier; or no introduction to reformulation.

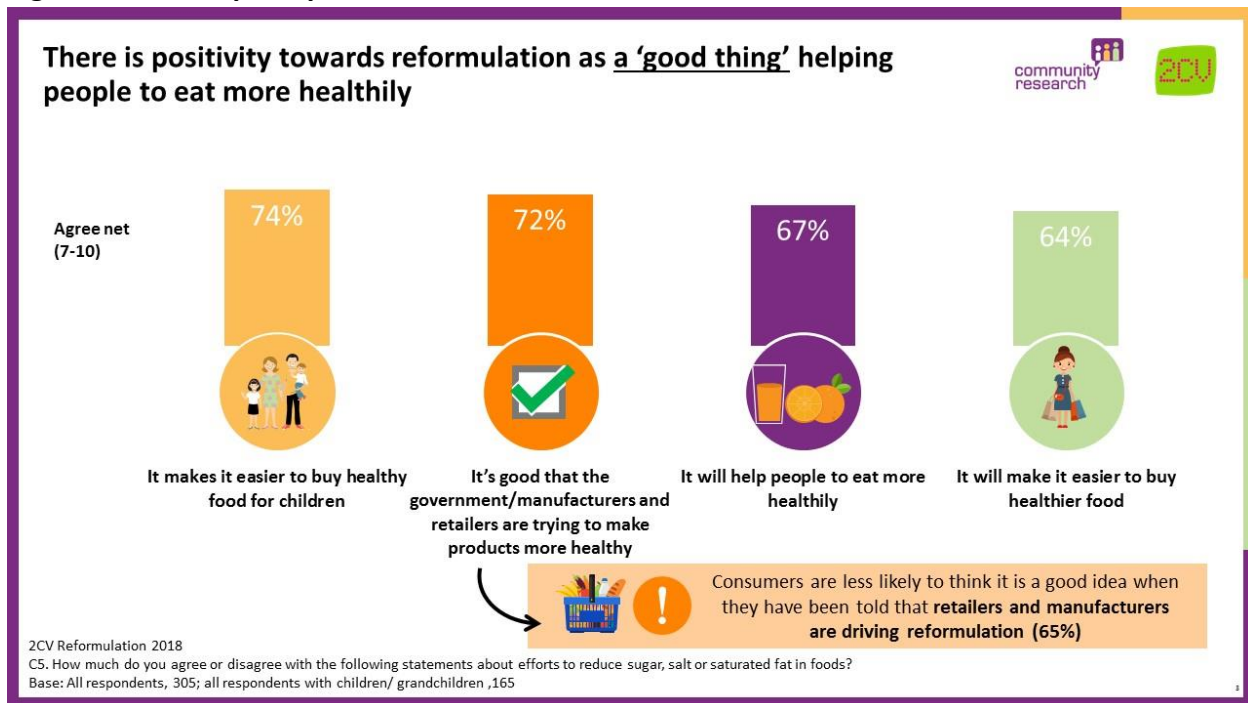
Figure 4 Reformulation scenario testing



The research showed that NI Consumers broadly accept reformulation, seeing it as a move in keeping with current health trends and with potential benefits in terms of buying for both themselves and their family. It sits well with aspirations for healthy living, although this is not always a reality.

Acceptance for food reformulation exists regardless of what people believe the rationale for it is or who they think is driving it. However, agreement that 'It's good that the government/manufacturers and retailers are trying to make products more healthy' was significantly lower when people are told that it is driven by industry (65%) than when told that it is driven by government (72%) or when not told anything at all (79%).

Figure 5 Positive perceptions of reformulation

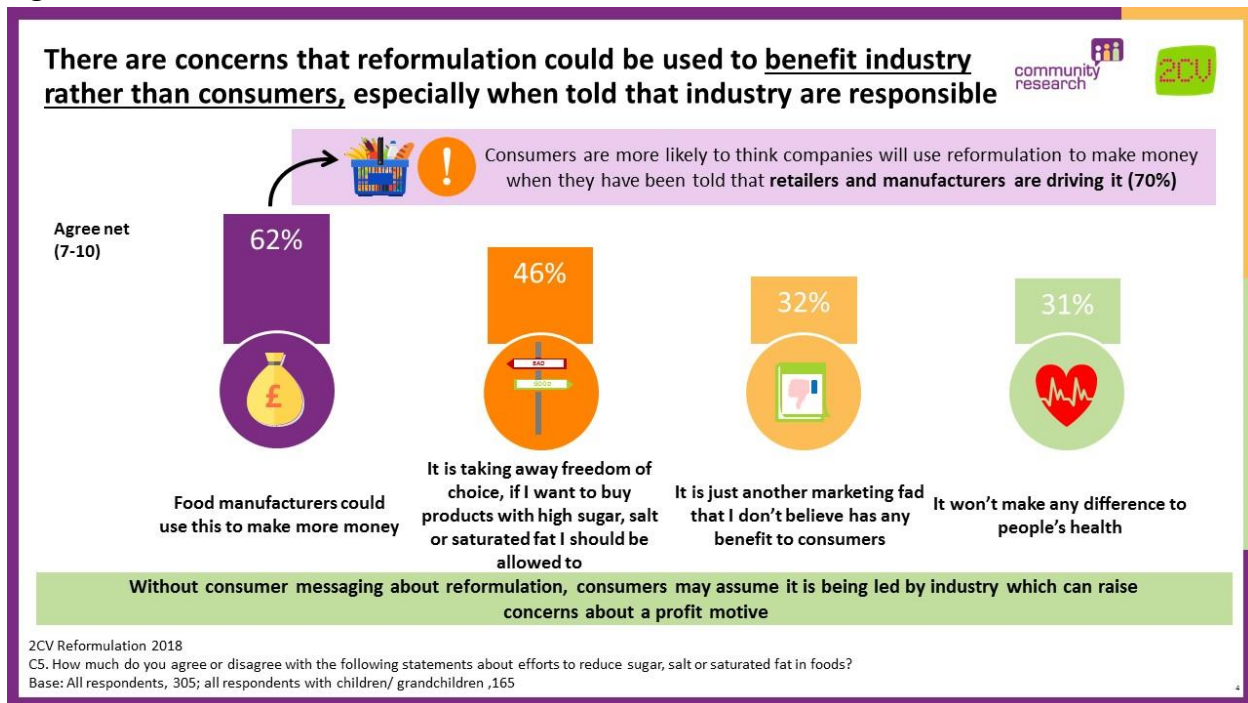


Regardless of what people were told about the rationale for reformulation, most were positive about efforts to make the products they buy healthier. On average, 62% said that they were positive about efforts to reduce sugar, salt and saturated fat in the specific products they buy in the key categories (with no significant differences by product or by reformulation scenario).

However, there were some concerns that reformulation could be used to benefit industry. Spontaneously, 10% of consumers had concerns about price and 12% that companies could use this to make more profit by offering smaller products when told that manufacturers and retailers are the driving force behind the initiative. Top of mind concerns about these issues were significantly lower when told that the initiative is government driven, with only 3% mentioning concerns about price and 2% concerned about companies making profit.

Agreement that 'food manufacturers could use this to make more money' was significantly higher when consumers were told that is the initiative is driven by industry (70%) than when told that it is driven by government (62%) or when not told anything at all (56%).

Figure 6 Consumer concerns about reformulation



Qualitative research confirmed that consumers are wary of industry motives surrounding health marketing and that this can lead to doubt about the ultimate consumer benefit of the initiative.

In qualitative sessions and digital diaries, there were spontaneous concerns that reformulation may be anti-consumer choice, with 46% in the quantitative research agreeing that 'it is taking away freedom of choice'. Qualitatively, some perceived it as being related to the 'nanny state' and could reject the concept on these grounds.

People are averse to losing things, so there was also some resistance to the idea of favoured products changing: consumers expressed a wish to have a choice between the original and adjusted products. There was some concern about feeling 'robbed' of their treat foods and worries that they would not get the same pleasure from reformulated alternatives. This sentiment tended to be more pronounced for more treat-like food e.g. ice-creams, desserts, chocolate as the pleasurable experience and positive emotions related to these foods were stronger.

3.2 Acceptability of reformulation

3.2.1 Overall likelihood to purchase

Many consumers welcomed the increase in easy, affordable healthier options when shopping, as healthier and freshly made options can be associated with being premium. This leads consumers to accept both reformulated standard products and healthy alternatives. Reformulated products hold appeal because consumers like the idea of being able to buy old favourites without guilt or the need to switch to something different and thereby take a risk.

Consumers were asked how likely they would be to buy changed products for each of the 7 priority food categories that they purchase (breakfast cereal, morning goods, ice cream, yoghurt, cake, pudding and biscuits). Consumers were asked about scenarios where they visit a shop to purchase the product and notice that their usual product has been changed. There were 4 scenarios of how each product could have changed:

- Lower sugar
- Lower fat
- Smaller overall size (e.g. fewer biscuits in pack)
- Smaller portion size (e.g. smaller biscuit size)

Overall, likelihood to purchase reformulated or resized products was high, with an average of 73% across categories who said they would still purchase the product. Likelihood to purchase was lowest for smaller overall size (67%, compared with 76% for lower sugar, 76% for lower fat and 72% for smaller portion size). Acceptability of overall reduced size was lowest as the consumer benefit is least clear; people do not see themselves eating any less (no health benefit), they foresee difficulty with meal-planning (“*[Product] size change is not a good option as this is a good size for a full meal*”) and most importantly value is impacted as they get less for their money.

Acceptability of reformulation (both reformulated and resized products) rested on three conditions – that the new products matched old ones in terms of the **taste, value and perceived healthiness of replacement ingredients** (i.e. that they are no worse for people than the originals). These consumer priorities are all well-evidenced through previous FSA research, namely FSA NI Food Labelling 2016⁵, Our Food Future (2016)⁶ and FSA Strategy 2015-2016 (2014)⁷.

⁵ ‘Understanding Northern Ireland Consumer Needs Around Food Labelling’, FSA research report prepared for FSA by TNS BMRB (July 2016)

<https://www.food.gov.uk/research/research-projects/understanding-northern-ireland-consumer-needs-around-food-labelling>

⁶ ‘Our Food Future’, FSA research report prepared in partnership with TNS BMRB (February 2016)

<https://www.food.gov.uk/sites/default/files/media/document/our-food-future-full-report.pdf>

⁷ ‘FSA Strategy 2015-16’, research report prepared for FSA by TNS BMRB (March 2014)

<https://acss.food.gov.uk/sites/default/files/fsa-strategy-research-report.pdf>

Ensuring the taste and health properties of reformulated products are safe-guarded is key to acceptance and there are some consumer concerns that either or both may be affected.

Figure 7 Attitudes towards food and food shopping



For resized products (smaller overall size or smaller portion size), value was key: consumers who said they would not buy a resized product spontaneously gave this as their top reason for not purchasing (62% for smaller overall size and 44% for smaller portion size). The secondary concern for resized products was wanting or liking the current size, with concerns about portions now being too small.

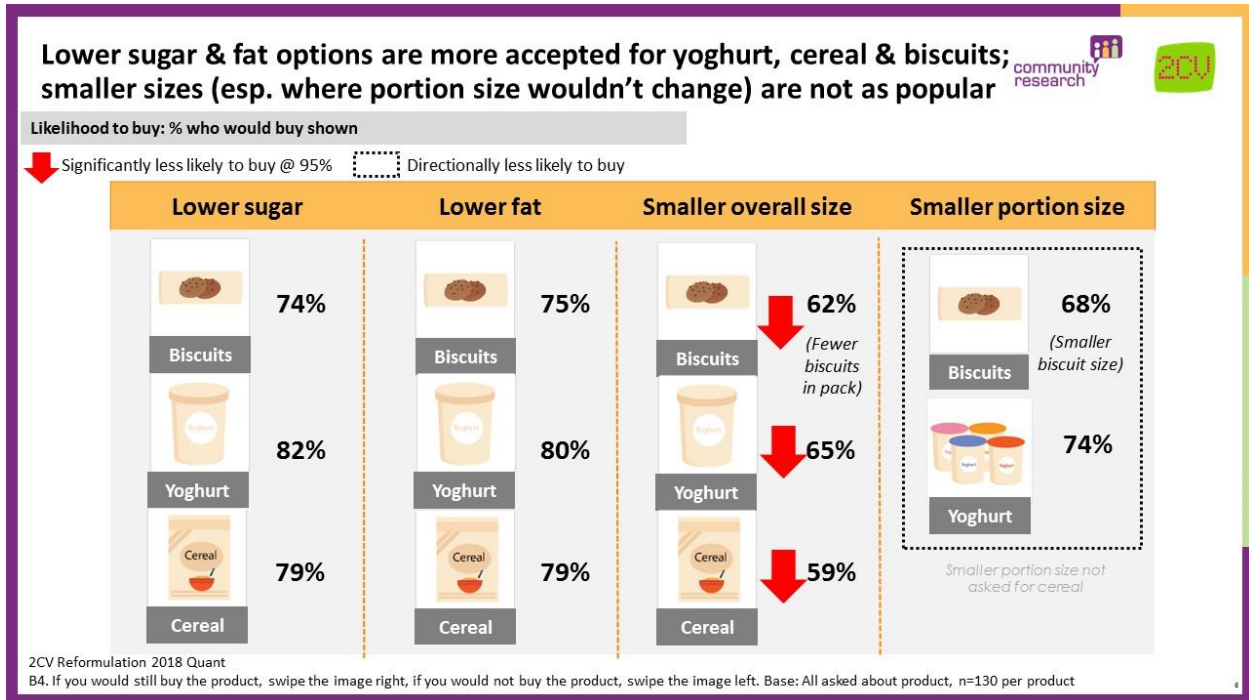
For reformulated products (lower sugar or fat), the primary concern was taste, with 63% spontaneously giving this as a reason to not purchase reduced sugar projects and 57% for reduced fat products. Taste was a particular concern when buying for children, with concern that children would reject reformulated products if there is a detectable difference in taste. Concerns also existed around the ingredients and healthiness of reformulated products, particularly in terms of sugar and fat substitutes. While value was less of a concern for reformulated products, there was still some concern on prompting that reduced fat or sugar products could be more expensive.

Note: qualitative research showed that the associated costs of reformulation / resizing products carried by industry were not top-of-mind for people and the associated consumer benefits were not sufficiently valued to be worth paying for.

3.2.2 Difference in likelihood to purchase by category

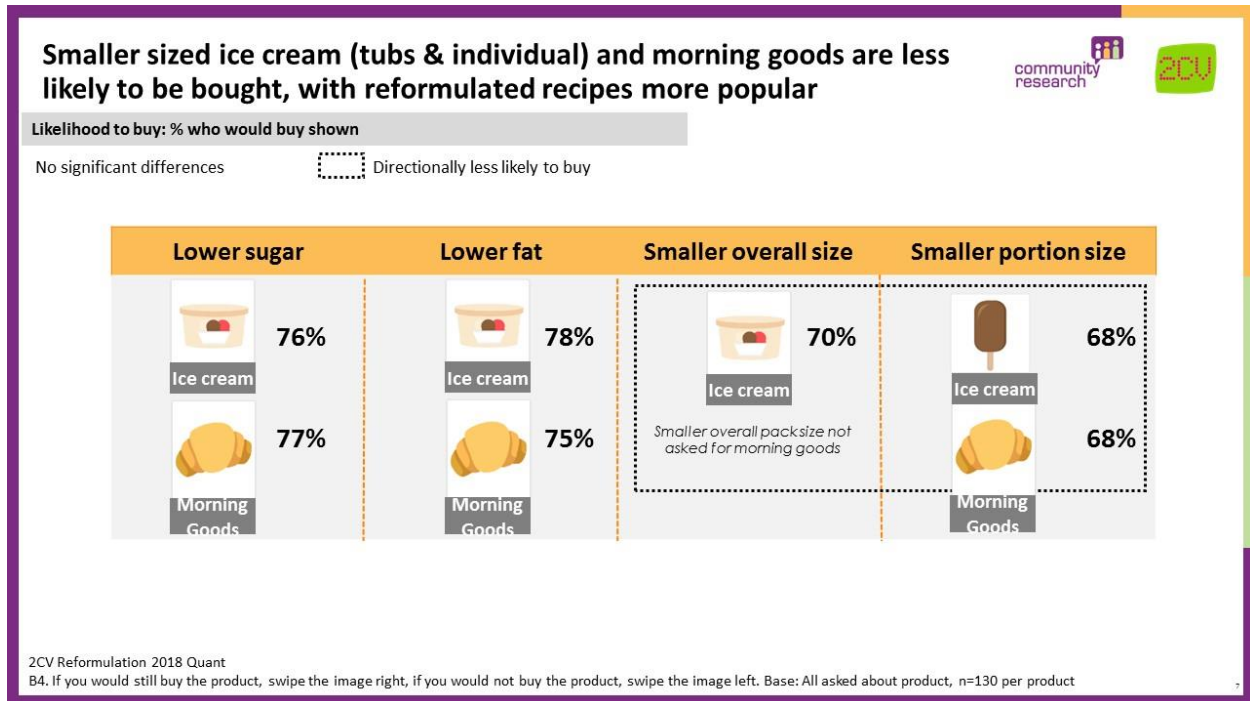
The rejection of smaller overall size was strongest for products where a reduced overall size is unlikely to impact the portion size for each serving – biscuits, yoghurt and cereal.

Figure 8 Likelihood to purchase biscuits, yoghurt and cereal



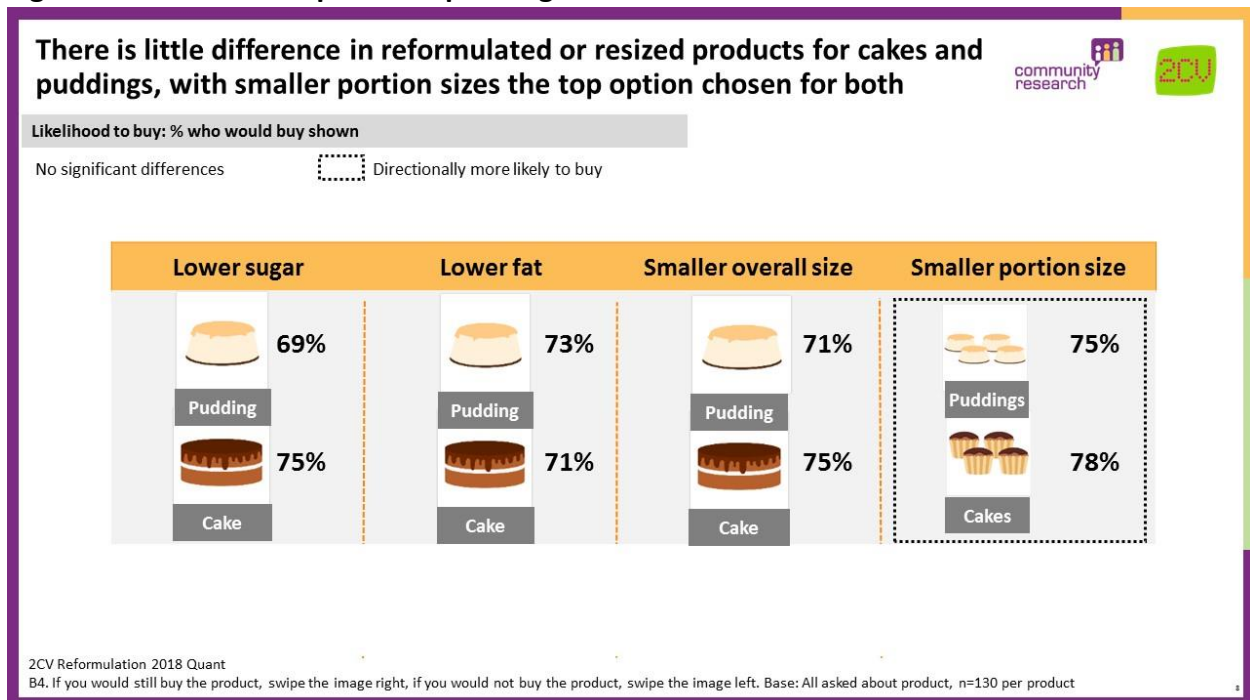
For smaller size products, 62% said they would still buy smaller overall size biscuits, 65% for yoghurt and 59% for cereal.

Figure 9 Likelihood to purchase ice cream and morning goods



For ice cream and morning goods, smaller sized products (either overall size or individual portion size) were directionally less likely to be bought than reformulated products, although not statistically significant.

Figure 10 Likelihood to purchase pudding and cake



For puddings and cakes, there was no significant difference in likelihood to buy across the 4 reformulation/ resizing scenarios with 69%-75% saying they would still buy pudding and 71%-78% that they would still buy morning goods, although directionally smaller portion size had the highest likelihood to buy for both products.

3.3 Implications for engagement and communications

While both quantitative and qualitative phases showed that consumers broadly accepted reformulation and were open to purchasing low sugar, fat and salt alternatives, qualitative sessions demonstrated that successful uptake and long-term engagement will depend on how well concerns surrounding taste, value and health properties are addressed. This research has therefore shown that **consumers need to see and feel the benefits of reformulation** or they will reject it.

As with any behaviour change process, there is no silver bullet. The success of reformulation will take time and commitment from multiple stakeholders. Consumers explicitly reported this during qualitative sessions; they expected action across both industry *and* government. Furthermore, they recognised that their personal decisions were only part of the story and that individual change can and *should* be prompted by wider social change. They believed that influential public and private sector organisations carried a degree of moral responsibility for consumer healthy-eating behaviours.

“I think this is really important. They should be doing this. To be honest though when I’m in the shop I just want to be in and out....I’m not really thinking. Especially if my son’s with me...You look for things to help you decide.”

Focus Group, Belfast

The research shows that therefore a multi-pronged approach to behaviour change is key: communications, education and environment changes are all important for encouraging acceptance and informing purchase decisions. In the face of consumer concerns surrounding the taste, value and health of foods, it is important to generate a positive ‘buzz’ around the initiative and highlight the consumer benefits.

Messages and engagement activities will also need to come from a wider group of stakeholders than purely industry (i.e. manufacturers and retailers) given the level of doubt consumers in the research voiced about profit motives and industry safeguarding its interests over consumers’.

3.3.1 Communications: product information is important

The research shows that clear and open brand communications and product information will be important for creating trust in reformulated and resized alternatives. Across the research, from initial qualitative sessions through to digital research and ultimately in quantitative testing, consumers clearly

stated their appetite for noticeable changes to product labels. In particular, front of pack labels as these were most likely to catch consumers' attention and inform their decisions.

Minor changes to product labels signalling what has been changed is considered important by the respondents that took part in this research for three reasons:

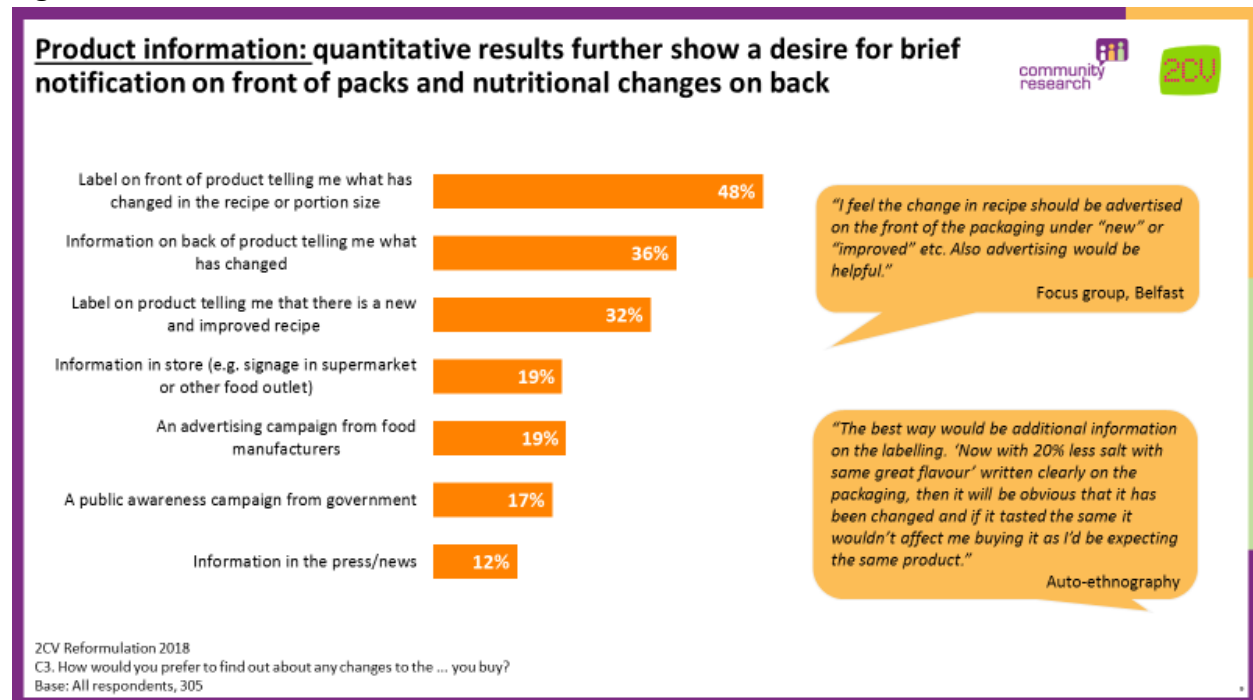
- 1) **Consumer trust and transparency.** By highlighting changes brands demonstrate that they are treating consumers with openness and respect, which helps build consumer trust and avoids the risk that people feel misled if they find out that recipe or size changes have been made "in silence".
- 2) **Reassurance around taste, value and the health of food.** Consumers want to know that any new product will deliver in terms of the taste, value and health of products and that these are not being compromised. Clear information about what has changed helps provide reassurance and allay consumer doubts that could otherwise lead to rejection.
- 3) **Consumer choice.** The perception of being in control and having freedom of choice is prized by consumers. Food choices can be emotional and highly personal (FSA Trust 2018); people value the decisions they make and do not like to think they are being influenced or 'nannied' over food. This is unsurprising – rarely will people admit to wanting less choice – but the important thing is that even the *perception* of choice can be a driver of acceptance. Therefore, flagging that there has been a change makes people feel informed and that they are making an active choice, which is empowering.

"The best way would be additional information on the labelling. 'Now with 20% less salt with same great flavour' written clearly on the packaging, then it will be obvious that it has been changed and if it tasted the same it wouldn't affect me buying it as I'd be expecting the same product."

Auto-ethnography

The quantitative research showed that the desire to be informed and the stated need for simple and **clear notifications on product labels is consistent across product categories.** It does not matter whether people are buying ice cream, yoghurt or a pack of biscuits, it is clear from this research that informed consumer choice is a valuable thing. When asked for a list of options how they would prefer to find out about changes to the products they buy, 48% of people wanted to see a label on the front of products telling them what has changed in the recipe or portion size.

Figure 11 Product information



The fact that there is appetite for explicit communication of changes that may be obvious to the eye, such as a reduced portion size, indicates how much people value brands being honest and transparent about the changes they are making.

There was also notable support from this research for information on the back of products telling people what has changed (36%) and for a label on the product telling people that there is a new and improved recipe (32%).

The qualitative research confirmed that feeling informed is not just a nice-to-have but can actively prompt purchase decisions and make reformulation more acceptable. Particularly for health-conscious shoppers who tended to be more motivated by information signalling a reduction in sugar, salt or fat.

"If it had good communication on the box stating it had reduced its sugar level then I would definitely try it."

Auto-ethnography

When shopping, consumers operate at a low-conscious level. They reportedly rely on mental shortcuts and habit for efficiency of decision-making. A short and simple message, clearly visible on the front of product packs is therefore important to cut through the consumer 'bubble' mindset and help prompt quick purchase decisions. Consumers told us they use convenient 'proxies' to quickly assess if a product is good, as in healthy, or not. For example, labelling that includes words like 'balanced diet', 'free range' or 'organic' are used by consumers as shorthand for 'healthy' or 'healthier'. This is even true in the cases where a product contains significant levels of sugar, like organic cake, but is perceived to be

healthier because of the word ‘organic’. Green traffic lights also signal a healthy choice and there is much positivity towards the introduction of traffic light labels on product packs.

However, we know from this and previous FSA research that consumer demands for product labelling can be contradictory. People *say* they want information but in reality generally do not pay close attention. We also know that consumers can feel overwhelmed by health claims and constant marketing can knock consumer trust and lead to disengagement. Previous FSA research including Consumer needs around food labelling (2016) and FSA Trust (2018) confirm this finding.

Getting the message and the claim right will be fundamental as consumers need to trust brands to make genuine health claims. Currently, claims like ‘Low in X’ or ‘No X’ are met with scepticism. From this research, consumers believe they are too good to be true and assume a one in one out rule for ingredients, making the claim disingenuous. In this research, consumers were not aware that there is legislation governing health claims.

“If it’s low in X it’s high in something else”

Auto-ethnography

“If they take out the sugar, what are they replacing it with?”

Focus group, Belfast

It will therefore be important to consider the right balance between transparency (something has changed) and overload when communicating. Brands should consider the **hierarchy of information needs** consumers have and if there are existing elements on front of pack labels that could be de-prioritised to make space for messages about reformulation without compromising information consumers do currently find useful (e.g. traffic lights).

While parents and grandparents see helping their children and grandchildren to be healthier as an advantage of buying reformulated or resized products, a **subtler approach to communications may be required when it comes to children.**

Despite the attraction to parents of healthier foods for children, and a common belief that many children’s foods currently on the market are more unhealthy than they should be, parents with young children ultimately just want them to eat. Parents told us in the qualitative sessions that ‘healthy’ branding can sometimes put kids off certain products. Therefore, getting the look and feel of the message right on product labels that kids are likely to see will be important. Parents want to be alerted to a change, but without their children necessarily seeing or knowing about any changes.

“For me not advertising would be best as my son might notice the ad and refuse to eat it. Perhaps email or literature on it would be best.”

Auto-ethnography

“If it says ‘low sugar’ there’s no way he’ll eat it though!”

Through this research we have identified a set of **best practice communication principles** to inform FSA messaging and business guidance. These principles are intended to complement, not supplement, the formal legislative requirements that reformulation communications must comply with.

- ✓ Point to the fact reformulation is **part of a wider initiative** e.g. a recognisable stamp – this raises awareness that it is not industry-led and may help to counter public scepticism.
- ✓ **Be clear and concise** – consider the need to balance transparency about the new product with the risk of information overload and potentially prioritise signalling the new recipe/new size over other information.
- ✓ Give **reassurance about taste, value and the health of food** to counter concerns and underline the consumer benefit of the new product.
- ✓ **Don't overstate the 'healthy' message** as consumers are wary and pragmatic ("How healthy can chocolate be?!" Auto-ethnography).
- ✓ Consider a **subtle/different approach for products aimed at/popular with children** given parents are attracted to healthier options but also wary of 'putting children off'.

3.3.2 Changes to retail environment

People shop quickly and make on-the-spot decisions often guided by habit. Changes to shop environments, eye-catching aisle and at-shelf signage can all influence consumer choices that are made instinctively and mindlessly. Past evidence shows, for example, that end of aisle displays increase sales by up to 50%⁸.

"Best way to advertise for me would be on the shelf or on the actual package."

Auto-ethnography

"I always notice the special offer things they put at the end of the aisle – they could do more with that to catch your attention."

Focus group, Belfast

Consumers expected government to work in partnership with retailers and manufacturers to roll-out these kinds of initiatives. Research participants wanted to see government-industry partnerships help make their individual decisions easier and create the right conditions for them to change their own behaviours. Participants in the qualitative phase cited multiple examples of how changes to the retail environment have previously impacted their behaviour and in-store routine, suggesting opportunities for similar disruption to habits may exist.

⁸ [Sugar Reduction: The evidence for action](#)

“It’s like the way the fresh stuff is at the front – that makes a difference the minute I walk into the shop I want to pick it up!”

Focus group, Belfast

“I just think you shop so quickly and if I have my kid with me I’m barely paying attention so I need something to guide me!”

Focus group, Belfast

Consumer suggestions for environment changes gathered through qualitative engagement include:

- ✓ At-shelf and aisle signage that clearly signpost people to healthier and reformulated products
- ✓ Aisle / shop layouts that clearly segregate unhealthy and healthy options
- ✓ End of aisle stands showcasing new products

The retail environment was also seen by consumers as the logical place for engagement initiatives such as in-store demos, tastes tests and information stands – given the questions people have surrounding reformulation, being able to engage with new products prior to purchase can help allay doubts, create positivity and raise general awareness in turn prompting word of mouth. Practical activities in stores *show* people that the reformulation initiative is trustworthy and that there is a genuine consumer benefit behind it, reducing risk of rejection.

Engagement activities are also important because they help address consumers’ key conditions.

- They prove to people that reformulated products **taste good** – letting people try for themselves;
- They allay concerns about the **potential health / safety properties** of new products through explanations and expert guidance;
- They demonstrate openness and willingness to answer consumer questions, showing people that **industry cares** and that there is a consumer benefit, that new products have *value* to consumers.

Consumer suggestions for engagement activities gathered through qualitative engagement include:

- ✓ In-store tastings showcasing reformulated products
- ✓ Cooking demos
- ✓ Information stands with leaflets
- ✓ Recipe ideas for new and existing products

3.3.3 Wider public education and messaging

Finally, there is an important role for public education and a proactive government voice to build public trust in the initiative and **make the consumer benefits of reformulation clear**. The quantitative research clearly showed the risk that consumers will reject reformulated products if they believe the initiative is being led by industry, so this supporting public voice is critical. People need to know that consumer benefit is driving the cause and want wider public education and engagement as confirmation.

Recent FSA Trust research supports this proactive government role and points to the value it has for building trust in the wider food sector, including brands. The public want to know that someone is looking out for consumers’ interests and holding industry to account (FSA Trust 2018).

How the reformulation initiative is framed clearly impacts consumer perceptions, how positive or negative they feel towards it and ultimately how acceptable they find it. As the following table shows, framing reformulation as a partnership involving different players in the food industry has potential to prompt greater acceptance and motivation to act (i.e. purchase new products).

Framed as a partnership:	Framed as from industry:
<ul style="list-style-type: none"> ☺ Public health interest ☺ Helping me be healthier without compromising my favourite foods ☺ Supported more widely than just the big brands 	<ul style="list-style-type: none"> ☹ Profit interest ☹ A marketing fad/trick to make me think I’m eating healthier ☹ Another thing to overwhelm me and make it harder to eat healthily ☹ Making healthy something premium

Boosting wider trust in food system will be important for ensuring reformulation is well-received and gathers public support. Recent FSA work exploring drivers of trust in the food system (FSA Trust 2018) revealed the importance of ‘trust bonds’ – a social contract between consumers and organisations operating in this space.

FSA Trust findings, March 2018

- Trust relies on a social assessment of intention: does an organisation intend to do me well?
- People need to feel that their interests are being looked out for (hence why taste, value and health claims are key).
- While trust in the food system is generally higher than other sectors, it is still fragile and the ‘trust bond’ people have with food brands and the wider system can easily be shaken.
- People value a proactive government that is seen to hold industry to account and safeguard consumer interests.

Consumers want to know that ‘someone’ is working behind the scenes to prevent:

- “Manipulative” marketing, which makes consumers question motivations in the food sector - *“Is it all profiteering?”*
- Information overload, as this leads to concerns about transparency and good intentions – *“deliberate complexity”*
- Contradictory health messages, as this leads to scepticism - *“everything either cures or causes cancer!”*
- Over-claim from brands, which are seen as disingenuous and potentially harmful – *“It’s like if [brand name] says “it’s healthy”!”*
- Brands and retailers acting unethically, as this shakes trust in their intentions – *“there’s way too much packaging now”*

3.4 Final considerations

3.4.1 Changing health and eating behaviour is complex and takes time

As with any behaviour change objective, **understanding the barriers to change is important**. Whilst a full exploration of this was beyond the scope of this project, it is worth lingering on them as the FSA consider the implications of this research and next steps.

Barriers to behaviour change	
Public distrust	Too much ‘noise’ and inconsistent information: <i>“Everything either causes cancer or is a cure for cancer!” (Auto-ethnography)</i>
Lived experience	Some simply don’t believe tasty food can be healthy food: <i>“appealing food often isn’t healthy”(Auto-ethnography)</i>
Aspirations not reality	<i>“We all know what’s healthy and unhealthy but doing something about it is a different thing” (Auto-ethnography)</i>
Distance from issue	Obesity happens to other people (and in the extreme!): <i>“Being air-lifted out of your house because so obese!” (Auto-ethnography)</i>
Optimism bias	People can feel they have diet under control so no need to change: <i>“Treats at weekends”, “Cook fresh if possible” (Focus group, Belfast)</i>

While reformulation is not a silver bullet and is not intended to address all of these barriers to behaviour change, managed and communicated effectively it can help shape consumer attitudes and encourage trust in healthier options.

3.4.2 Upsetting the treat landscape could have unintended consequences

People have well-established habits and routines around food – when they “treat” themselves versus when they are “good”. With the appeal of reformulated products comes the **potential that products may lose treat status** and prompt some to eat *more* of these foods. Ability to eat more of a favourite food was a stated advantage in both the qualitative and quantitative research (across types of reformulation or resizing, on average 12% said an advantage would be that they can buy it more frequently if the product is healthier).

Upsetting the balanced diet people believe they have could have unintended negative consequences as people start to eat more treat products. This will be an important consideration for anyone working to ensure that reformulation leads to better public health outcomes.

“We only eat this at weekends as a treat. If they changed the recipe to make it healthier that would be great! It would encourage me to buy it more.”

Auto-ethnography

“This would ease the guilt of eating these and I know they aren’t that healthy, it would also encourage me to buy these for throughout the week whilst I am dieting rather than just having them as a treat on a Saturday night!”

Auto-ethnography

Communications that make clear **new products are still treats, just healthier ones**, could help mitigate the risk of encouraging unhealthy behaviours. Pointing consumers towards more ‘classic’ health foods may also be important.

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Appendix 2: Qualitative sample overview

Stage 1: Qualitative scoping focus groups

Five 90 minute focus groups with six to eight participants per group.

- Participants were split into two cohorts based on attitudes to nutrition and food labelling: 'Unsupported and Confused' and 'Engaged and Knowledgeable'. Attitudinal questions were used to identify which cohort individuals belonged to.
- All participants were recruited to either be the main shopper or jointly responsible for household shopping.

Breakdown of sample by group:

	Segment	Gender	SEG	Lifestage	Location
1	"Unsupported and Confused"	Female	To fall out	Family (at least one child under 11)	Urban - Belfast
2	"Engaged and Knowledgeable"	Female	To fall out	Family (at least one child under 11)	Rural - Portadown
3	"Unsupported & Confused"	Male	To fall out	Family (at least one child under 11)	Rural - Portadown
4	"Engaged and Knowledgeable"	Male	To fall out	Family (at least one child under 11)	Urban - Belfast
5	"Unsupported & Confused"	Mixed	To fall out	Pre-family	Urban - Belfast

Stage 2: Deep dive mobile 'Digital diaries'

40 fresh participants took part in a 2-week mobile ethnography exercise, logging their food and shopping attitudes and behaviours via 2CV's bespoke digital research app "2CV Momento" (see Appendix 3 for more detail).

- Participants were recruited to reflect a good mix of attitudes, use and knowledge of nutritional labelling information. Soft quotas were set on the following characteristics:
 - Importance of high fat, salt, sugar & calories to inform shopping decisions (<5 who say it is not important; <15 who say it is very important)
 - Frequency of looking at nutritional label information (mix of frequencies)
 - Understanding of food labelling around HFSS and calories (mix of confidence levels)

Breakdown of sample:

Lifestage	Gender	SEG	Location
15 x Younger Family (at least one child <11)	60% female, 40% male across the sample	BC1/C2DE weighted 15/25 in favour C2DE across the sample	At least 7 x Urban
			At least 7 x Rural
15 x Older Family (at least one child 11+)			At least 7 x Urban
			At least 7 x Rural
5 x Empty Nesters			At least 2 x Urban
			At least 2 x Rural
5 x No kids (Pre Family)			At least 2 x Urban
			At least 2 x Rural

Appendix 3: “2CV Momento”

2CV Momento is 2CV’s bespoke digital research app. It is an intuitive, engaging and non-invasive mobile research app that allows us to go in-depth and study people’s thoughts and feelings at specific *moments* in time. “Momento” ensures that we collect in-the-moment responses without disrupting natural behaviours or placing participants in an unnatural research setting. The result is a very rich and pure qualitative dataset.

How does it work?


Similar to any research methodology, the research team designs a structured series of tasks and questions, in this case, to explore claimed and actual behaviours relating to food and nutrition. Participants download the Momento app to their mobile phones and are subsequently sent messages and notifications reminding them to complete tasks and take part. Participants are able to upload a range of audio-visual material, including voicenotes, photos and videos as well as written text responses, documenting their experiences, thoughts and behaviours.

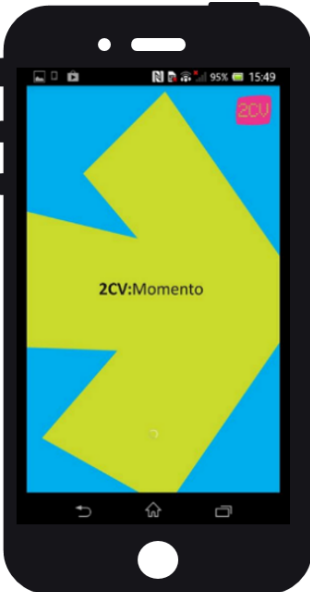
Once the fieldwork period is complete, the research team listens back to and downloads the uploaded data and conducts analysis using qualitative analysis techniques.

Tasks can be completed in participants’ own space and time over the course of a two-week period on either a mobile phone or computer. Participants are incentivised and, where necessary, supported to undertake tasks.

Try it for yourself!

2CV Momento | Try it for yourself





We know how important it is for software to speak for itself – there’s no replacement for diving in and trying it yourself.

We’ve put together a little demo project so you can try out the participant experience of participating in a Momento project.

STEP 1
Download the app for your phone:
[Android](#)
[IOS](#)

STEP 2
Once you have downloaded and opened the app, create a new account and when prompted, enter the project code: **MOOD**
(ALL CAPS - case sensitive)

STEP 3
Read the project intro instructions and explore as you wish!