QUALITATIVE RESEARCH WITH CONSUMERS

FOOD LABELLING ISSUES
ANZFA

C01033 December 2001
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1 STRUCTURE OF THIS REPORT

The report is divided into three parts:

1. Executive Summary
   - A concise overview of the aims, methodology, and key findings.

2. Research Results
   - A detailed presentation and interpretation of the results, and implications of those findings for the second stage of research.
   
   There are three sources of data from which the results and recommendations are drawn:
   - Qualitative discussion groups (the primary information source);
   - Individual written exercises, undertaken in the focus groups (see Appendix C)
   - Quantitative in-store survey of shoppers.

   It should be noted, however that this stage of the research was essentially a qualitative project, and the main report reflects this. The in-store survey was not drawn from a nationally representative sample and the percentage of consumers interviewed in-store out of the total number of shoppers in each store at the time of the survey is unknown. For this reason, quantified findings have been drawn upon where they add weight or further insight to the qualitative findings. A more detailed interpretation of the in-store survey results, including the presentation of data in table format, is presented separately in Section 16.

3. Data Tables
   - A full set of Data Tables from the quantitative survey is provided in a separate document, together with the Survey Questionnaire. The Data Tables present a comprehensive listing of all survey data in questionnaire sequence, for the total sample and broken down by various demographic and behavioural sub-groups.
EXECUTIVE SUMMARY
2 BACKGROUND AND OBJECTIVES

2.1. Background to the research

The ANZFA Act establishes the mechanisms for the development of joint food regulatory measures (a food standard or a code of practice) and creates the Australia New Zealand Food Authority as the agency responsible for the development and maintenance of a joint Australia New Zealand Food Standards Code.

The Australia New Zealand Food Authority (ANZFA) is an independent bi-national organisation that has the role, in collaboration with other organisations, to protect the health and safety of the people in Australia and New Zealand through the maintenance of a safe food supply.

Hence, one of the principle objectives behind the development of new food standards include to ensure that labels are easy to interpret and that they deliver information that is easy to understand and use, thereby enabling consumers to make informed choices about the foods they purchase.

Although food standards are developed by the Australia New Zealand Food Authority, responsibility for enforcing and policing these standards rests with the States and Territories in Australia and the New Zealand government in New Zealand. Each government has one or more agencies responsible for food surveillance within their health administration charged with the task of ensuring the requirements of the Food Standards Code are met. The Australian Quarantine Inspection Service (AQIS) is responsible for enforcing the Code for imported foods in Australia.

The current joint Food Standards Code was gazetted in December 2000 and is in the process of being implemented or adopted by industry over a two-year transition period.

The Section 10 Objectives of the Authority in developing food regulatory measures and variations of food regulatory measures

(a) the protection of public health and safety; and
(b) the provision of adequate information relating to food to enable consumers to make informed choices; and
(c) the prevention of misleading or deceptive conduct.

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1 Based on Final Tender Document
2 These are the current objectives as listed in the ANZFA Act, as amended in 2000 and are similar to those used in the review of the Australian and New Zealand regulations that were in the Act previously.
In developing food regulatory measures and variations of food regulatory measures, the Authority must also have regard to the following:

(a) the need for standards to be based on risk analysis using the best available scientific evidence;
(b) the promotion of consistency between domestic and international food standards;
(c) the desirability of an efficient and internationally competitive food industry;
(d) the promotion of fair trading in food.

In response to suggestions by the Australian National Audit Office, ANZFA wishes to develop a means to provide quantitative evaluation about the impact of the new code, how well the regulatory arrangements are working, and the level of monitoring and enforcement activity.

The preliminary research findings in this report are to assist with informing and developing that process, as well as to contribute to the design of following research phases.
2.2. Overall research plan

Two research phases are planned: (A) a component of exploratory qualitative research followed by (B) a quantitative assessment of the effectiveness of the implementation of the joint Code.

PHASE A: Exploratory qualitative research:
The first research phase is itself divided into two parts, namely (1) consumer research and (2) stakeholder research. The various components of the qualitative research program are illustrated below:

PART 1:
Consumer Research

- Qualitative research in Australia and New Zealand
- In Situ Observation / Feedback Interviews

PART 2:
Stakeholder Research

- Food industry interviews
- Health professional forums
- GPs
- Enforcement Agency forums and interviews
PHASE B: Quantitative phase:

Each of the above mentioned qualitative research parts will provide guidance with the development of a survey instrument that will be used in the quantitative phase of the program, which, it is anticipated, will follow.

It is intended that the quantitative phase will measure the effectiveness of the implementation of the joint Code.

This report covers the findings of Part 1 of Phase A of the qualitative research, that is, the consumer research.

2.3. Research objectives for this component of research

This research component was solely focused on achieving input from consumers, and hence the key objective of this qualitative research was to:

Explore consumer awareness, knowledge and understanding of food labels and behaviour towards food labelling.

The findings for the consumer research are presented herein. Further detail is included in the methodology section.

The specific objectives of the stakeholder research are outlined in the proposal and are not repeated here.
3 METHODOLOGY

Both qualitative and quantitative research was undertaken at this phase of the research.

**Qualitative research** (the primary component) in the form of 18 discussion groups was conducted with consumers – twelve groups in Australia and six groups in New Zealand.

And, at the same time, a small **quantitative survey** was conducted by intercept interview in selected supermarkets and this comprised observation of shopper product selection behaviour followed by structured interview.

Both research components are discussed in more depth in the sections following.

3.1. **Qualitative research – discussion groups**

All group participants were the main (or equal main) shopper in their household.

3.1.1. **Group stratification**

Groups were stratified by:

- **Age:** Food choices and shopping behaviour are known to vary by age, hence age is an important variable to consider when enhancing group rapport. Participants were therefore covered in three major divisions:
  1. Young (under 35)
  2. Mid (35-49)
  3. Older (50+)

- **Health consciousness:** Respondents were pre-screened (via the group recruitment questionnaire) into four segments based on their level of concern about health issues when purchasing food. The four segments were:
  1. Those with **special health needs:** that is, the respondent or a member of their household suffered from a food-related allergy or medical condition (eg diabetes; coeliac disease, heart disease, high blood pressure);
  2. **Health-conscious food shoppers:** that is, respondents who would regularly choose the healthy alternative (eg low fat; no sugar; etc);
  3. ‘Conscientious’ food shoppers: ie “I try to choose nutritious foods but cost and convenience generally come first”; and
  4. Those who are less concerned about health issues when considering food purchases.
- Socio-economic status: based on information collected at recruitment, with regard to income and education levels, participants were allocated into:
  1. Upper SES;
  2. Mid SES; and
  3. Lower SES.

- Sex: Given the low incidence of male ‘main (or equal) household food shoppers’, an even mix of males and females in each group was not feasible. To increase group synergy, interviewers were instead instructed to recruit groups that were either all female, or had at least three males per group (to avoid the chances of having one male in an otherwise all-female gathering). In total, seven (7) men participated in the research (out of a total of 133).

- Location: It was agreed with ANZFA that conducting research in all States / Territories in Australia was neither necessary nor cost-effective, and therefore the final research locations were Western Australia (Perth, Bunbury and Busselton); New South Wales (Sydney, Coffs Harbour and Lismore) and New Zealand (Auckland, Wellington, Ashburton and Christchurch). These locations ensured that there was mix of different sized centres, both in terms of size of State / City, but also in terms of rural versus urban centres, included in the research design.

- Cultural / ethnic factors: Preliminary discussions with ANZFA indicated that it was not necessary to conduct specific groups with people from culturally and linguistically diverse (CALD) or Indigenous backgrounds. Therefore CALD and Indigenous people were only included in the ‘mainstream’ population in the focus groups to the extent that this occurred without special interference. The exception to this was in New Zealand where a specific group of Maori consumers was conducted because they are a significant proportion of the population. This group was held in Wellington.

3.1.2. Recruitment

Recruitment of participants was undertaken by NCS Pearson in WA, J&S Research in NSW and NFO CM Research in New Zealand, using their group recruitment databases. Participants were selected on the basis of their responses to the recruitment questionnaire developed to record the demographic and other detail described in the section about group stratification.

A total of 133 people participated in the qualitative research.

3.1.3. Discussion guide and group materials

The discussion guide was developed by NFO Donovan Research in consultation with ANZFA, taking into account the issues that had been identified as needing to be covered with consumers.
Photographs used in the discussions for the purpose of illustrating various label features, and stimulating discussion were kindly provided by ANZFA. These contained a mix of new and old examples of the provisions of the new Code.

A copy of the discussion guide used is included in Appendix A, and the food product photographs are in Appendix D.

3.1.4. Group procedure

The groups were structured in approach. A series of self-completion sheets were developed to collect individual opinions about labelling in general, prior to the commencement of discussions. These tasks served two purposes. Firstly, it allowed researchers to have some record of individual reactions to issues, prior to the ideas being discussed in a group setting, and before people altered their perceptions based on general consensus or majority opinion. Second, the individual tasks helped to focus participants from the very general issues about food and shopping (the broader context) to specific types of labels and the more detailed context in which they are used.

Responses to these exercises were analysed and are reported on in the text where relevant.

Groups ran for two hours and participants were paid $50 (NSW and NZ) or $35 (WA) for their attendance.

3.2. Shopper observation and intercept interviews

This was a quantitative survey with interviewing undertaken in Australia by NCS Pearson and in New Zealand by NFO CM Research, in selected supermarkets.

The observation of product selection behaviour and selection of respondents for interviewing utilised a specific methodology that does not involve representative sampling of consumers. The objective of this part of the research was to provide a quantitative indication of the salience and use of labels in product selection, at the point of sale.

Shoppers were observed by the interviewer whilst they were selecting grocery items from the seven different packaged food types (meat; bakery/bread; spreads; biscuits; breakfast cereals; tinned foods; or snack foods). Observation took place only to the extent to which it was used to identify eligible shoppers for interviewing (based on the amount of attention they paid to food labels when choosing a product).
3.2.1. Questionnaire

The questionnaire was developed by NFO Donovan Research in consultation with ANZFA.

A copy of the questionnaire is included in Appendix B.

3.2.2. Interview locations

Observation and interviewing took place at the following locations:

WA:
- Coles Booragoon (Garden City Shopping Centre, Risely St, Booragoon, Perth)
- Woolworths Karrinyup (Karrinyup Shopping Centre, Karrinyup Rd, Karrinyup, Perth)

NSW:
- Coles Maryland (Stockland Mall Shopping Centre, 42 Pitt St, Maryland, Sydney)
- Coles Chatswood (Westfield Shopping Centre, 1 Anderson St, Chatswood, Sydney)
- Woolworths Paramatta (Westfield Shopping Centre, Campbell St Paramatta, Sydney)
- Woolworths Frenchs Forest (Forest Way Shopping Centre, Cnr Russell Ave & Forest Way, Frenchs Forest, Sydney)

NZ:
- Countdown Pakaranga, Auckland
- Thorndon New World, Wellington

Our thanks are given to the personnel from Coles and Woolworths who kindly assisted in selecting suitable stores and to all staff who cooperated in the project.

3.2.3. Interview dates

In Australia interviewing took place between Thursday October 25 and Sunday October 28th, 2001. In New Zealand all interviews were conducted on Friday 26th October, 2001.

The following number of interviews were completed:

<table>
<thead>
<tr>
<th>Region</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>NSW</td>
<td>159</td>
</tr>
<tr>
<td>WA</td>
<td>44</td>
</tr>
<tr>
<td>NZ</td>
<td>53</td>
</tr>
</tbody>
</table>
4 SUMMARY OF FINDINGS

4.1. Awareness and Use of Food Labels

Consumers generally had a good appreciation of the range of information that is available on packaged foods. Their use of this information was two fold:

- **Primarily**, to assist in determining product choice while shopping – to make judgements about products based on the brand, price/value, ingredient and nutritional content versus taste;

- **To learn more** about the product, in order to seek reassurance that it is a ‘safe’ choice. A ‘safe’ choice is determined at an individual level, which can include assessment of the country of origin, date mark, how it has been produced or treated’ with regards to organic labelling and genetic modification, and whether the ingredient and nutritional content meets their needs.

Almost all participants reported reading labels on at least one product, but most do so only when the are contemplating buying a new product for the first time, or when an alternative brand is on special.

**Most** people read labels in the store, at the point of selection, prior to the purchase of a product they haven’t tried before – either a new product on the market, or a product they don’t usually buy that is on special. However, many consumers report feeling ‘rushed’ and ‘pressured’ to make a quick product selection in the store and not get in the way of other shoppers, which limits their capacity to study labels in detail. **Avid label readers would put the purchase off** till another visit when they had more time, or were without their children. This may be one way of reducing any perceived ‘risk’ associated with a rushed product purchase.

Occasionally labels are read retrospectively, at home, either during meal preparation, while eating at the table, or when cleaning out the pantry.

**The importance of and interest in label reading is to a great extent determined by life stage**, rather than purely age. Parents of young children are much more interested in reading labels than those without children or those with grown up children, particularly regarding the use of the nutrition information on a product. A person’s **health consciousness** is also clearly a determining factor – those with self or medically-determined health priorities are again more label-attentive.

The usefulness and importance of different labels varies by food product. Apart from price and brand information, the ingredients list, the nutrition information
panel, date marks, nutrition claims, and food additive information are rated as the most important types of labels for the following products:

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>1st MOST IMPORTANT</th>
<th>NEXT MOST IMPORTANT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dairy foods</td>
<td>Date Marking</td>
<td>NIP, Food Additives</td>
</tr>
<tr>
<td>Breakfast Cereals</td>
<td>Ingredient List</td>
<td>NIP, Nutrition Claims</td>
</tr>
<tr>
<td>Confectionary</td>
<td>Ingredient List</td>
<td>NIP, Date Marking</td>
</tr>
<tr>
<td>Savoury Snacks</td>
<td>Ingredient List</td>
<td>NIP, Food Additives</td>
</tr>
<tr>
<td>Frozen Sweet / Savoury Food</td>
<td>NIP</td>
<td>Date Marking, Food Additives</td>
</tr>
<tr>
<td>Tinned F &amp; Veg</td>
<td>NIP</td>
<td>Ingredient List, Food Additives</td>
</tr>
<tr>
<td>Bakery/Bread</td>
<td>Date Marking</td>
<td>Ingredient List, NIP</td>
</tr>
</tbody>
</table>

4.2. Nutrition Labels

Consumers’ knowledge and understanding of nutrition information is piecemeal, mostly gathered from the media (television, newspapers and magazines) and word of mouth.

There was a lot of misunderstanding, confusion and a lack of confidence about how to use and interpret the Nutrition Information Panel (NIP) however this dissatisfaction is as much a reflection of people’s frustrated misunderstanding about specific nutrition information, for example the relationship between energy, fat, carbohydrates and sugar as it is about the label itself.

This general misunderstanding about nutrition appears to exist amongst consumers, at least those involved in this research, irrespective of age or socio-economic factors, life stage and/or health consciousness. Nutrition is one of those topics that everyone thinks they know quite a lot about (and are ready to articulate what they believe to be true), yet when it comes right down to it, what they do know isn’t really that comprehensive. Having said this, there was a general trend amongst younger people and people recruited into the higher SES groups, who appear to be generally better informed about nutrition information; nonetheless they were still likely to voice inaccurate information as ‘fact’ and/or admit to being confused by other nutrition theories.

Most shoppers tended to have one or two ‘pet’ nutrients they check and then they ignore the rest, with only a minority saying they assess the whole NIP (and this is usually for breakfast cereal). Fat content was usually monitored by people when choosing foods for themselves (or their partner) whereas sugar content was evaluated by parents buying food for their children. The in-store survey found that 70% of shoppers used the NIP to look for the fat content information and 53% to look for the sugar content.
The majority of people who were (or would have been) interested in using the NIP found at least parts of it difficult to read or interpret. The main problems stemmed from confusion over:

- what the nutrient names actually mean, and discerning between them;
- using the ‘per serve’ or ‘per 100g’ assessment columns;
- over-use of technical or scientific language instead of ‘plain English’;

Participants were divided in their preferences for information to be presented per 100g (%) or per serve, the overall preference tended to be for per 100g as this was viewed as easier to work with. Nonetheless, having both was viewed as an acceptable format and of value in different circumstances.

People who consciously try to make healthier food choices often use their own rules or thresholds for key nutrients such as fat, sugar, salt and fibre. However for the vast majority who don’t have a benchmark against which to compare a new product, the ability to compare against a number of products is a very important step in establishing one. Most people struggle to ascertain what is legitimately ‘low / lower’ or ‘high / higher’ in fat/salt/sugar etc and therefore a ‘good’ choice.

Furthermore, participants appear to use many different ‘rules of thumb’ to speed up their product selection choices. These included rules about the acceptable amount of fat or sugar (the 10% rule, less than 30gs of fat); assumptions about probability of low fat products being high in sugar, rules about avoiding food additive numbers etc. It is clear that consumers (at least those in this research) use such mental shortcuts to process the myriad of different pieces of information they have about food and nutrition, and streamline what is most useful or most relevant for their own needs.

Consumers generally liked the nutrition claims on packages because they were a quick and easy way to decide between two products without having to read the entire label. Many participants admitted that the presence of nutrition claims on the front of the package did influence their decision to purchase.

However, there was also a belief amongst some that the products themselves might often not be any more of what is claimed than a similar alternative brand, and that reference to the more detailed nutrition label was essential to certify the manufacturers claims, because of an underlying feeling that manufacturers often try to dupe you. People were most sceptical about fat free and lite claims, and were well aware of the fat/sugar trade off where products labelled as low in fat were instead high(er) in sugar.
4.3. **Ingredient Labelling**

There was *widespread recognition and understanding of the term 'ingredients list'* and all participants were able to locate the list on the food example they had in front of them. About half of the participants knew that the ingredients were arranged by quantity from most to least.

For those people who were interested in monitoring the amount of a particular ingredient in a product, or in comparing the perceived 'value' of two similar products, there was a preference for **percentage labelling**. It was clear, amongst this group of shoppers, that percentage labelling could become a very useful 'tool' for making value judgments between products. However, based on the fact that so many people were unable to spontaneously recognise a benefit for percentage labelling until it was explained to them, a considerable amount of consumer education would need to be provided for its potential use to be maximised.

The **food additive numbering system** was well recognised by all participants in the research. Attitudes towards the numbering system were that it was undesirable; people perceived that the numbering system either referred to additives that were only 'bad', or the numbers were 'meaningless'.

4.4. **Country of Origin Labels**

When discussed in it's own right, the majority of participants thought country of origin labelling was very important, and quite a few said that it is the first thing they look at. The in-store survey data did not support this view as strongly, however, country of origin information was a significant consideration for spreads and tinned food.

<table>
<thead>
<tr>
<th>There are two main reasons for wanting to know country of origin information:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Being able to identify the source of the product; and</td>
</tr>
<tr>
<td>2. Supporting the local economy.</td>
</tr>
</tbody>
</table>

The main problem with country of origin labelling appears to be the many and varied forms of the statement, and the meaning of what they claim. ‘Made in Australia/New Zealand’ type labels were viewed as confusing, and people called for a standardisation of these terms.

4.5. **Date Marking**

All participants were aware of date marking and used it regularly, and almost all were aware that there were two different markings – 'best before' and 'use by'. Date marking was felt to be useful and important for all food products, and
especially so for perishable goods such as dairy foods, eggs, bread and meat. It was also agreed across all groups that date marks were generally reliable.

4.6. Genetically Modified, Irradiated and Novel Foods

Genetic Modification

Whilst no-one could categorically state that they knew exactly what genetic modification is or how it is done, there was a feeling that whatever it is, it is intrinsically bad. The issue is extremely emotive yet there is a great deal of misunderstanding and misinformation about genetic modification.

The concern over the use of GM illustrates the level of general apprehension about the food supply and the perceived importance of maintaining stringent control over it. Most people agreed that they would try to avoid consuming GM foods, and would rely on labels in order to do so. It should be noted that the timing of this project, and this finding predates mandatory GM labelling.

Consumers expressed an absolute right to know about any GMOs included in any products. It was generally thought by most people that even if a product was not specifically labelled as ‘GMO-free’ it would not be genetically modified. That is, they would expect any product that contained genetically modified organisms to be clearly labelled that this was the case. There were mixed views and preferences as to whether a ‘GMO Free’ label was more helpful than not. It was at the point of seeing the example provided that the lines of demarcation between what is and is not readily identified as GM by consumers became blurred.

The effect of the term ‘GMO-free’ on purchases would need to be tested further. Although people did state their expectation that all GM foods would be labelled, they also acknowledged the potential likelihood that they would use the term GMO-free as a differentiator when purchasing, ie the alternative product might be the same but the GMO-free attribute could effectively swing the balance.

Irradiated Foods

There was even less awareness and more misunderstanding about irradiated foods. The word ‘irradiation’ is almost synonymous with ‘radiation’ [also connoting ‘nuclear’] and is consequently suspected to be unsafe or bad for you.

Much would need to be done by ANZFA to educate people about exactly what irradiation means, how irradiated foods compare safety-wise and nutritionally to similar products preserved in other ways, and what the potential benefits are before it would be acceptable to consumers at large.
4.7. Reliability of Food Labels and the Role of the Government/ANZFA

There is a dichotomous attitude towards the governance of food labelling. There is a feeling that the amorphous "government" stringently controls what goes into our food, etc and there is a lot of faith that the food we eat is subject to the strictest tests to ensure it is safe for consumption. There is an over-riding belief that the food system in Australia and New Zealand is safe, and this sense of trust is extended to food labels. People generally have faith that the labels will be fairly accurate and reliable - as long as the governing body continues to check the products to ensure compliance. In this way there is a belief in 'good' governance.

However, this trust is attributed to the assumption that safety (and label reliability) is regulated by a higher independent authority, rather than food manufacturers. Where people believe (or see evidence that) manufacturers are not compelled to provide certain product information in a standard, consistent way (such as nutrition information and Australian made information) there is increasing scepticism about the reliability and accuracy of this information on all products.

**Awareness of ANZFA**

In Australia awareness of ANZFA was low. Awareness was higher in New Zealand, however this could be due to recent media coverage about the Food Standards Code at the time the research was undertaken.

Nonetheless, most people were aware that there was some kind of governing ("government") body that looks after such things, and there was a great deal of support for the existence of such an organisation. In this regard, there was strong endorsement in Australia, and general endorsement in New Zealand for the 'government' to undertake such a role. **Participants thought it essential that there be a ‘watchdog’ organisation to keep the manufacturers honest, and ensure safety standards were set and maintained.**

Positive endorsement of the government’s involvement also extended to the commissioning of this research, which was viewed in a very positive light.

4.8. Implications of the Research

The results have significant implications for the methodological approach taken for the evaluation of the implementation and impact of the new Food Standards Code. These implications are highlighted in Section 17 at the end of this report.
RESULTS
PREFACE:

This project represented a qualitative research study. A total of 18 focus groups were conducted, involving over 130 respondents.

As such, this research is not able to provide statistically reliable projections of consumers’ opinions and behaviour, nor is it able to provide conclusive comparisons between sub-groups. That is not the role of qualitative research; a quantitative representative survey of consumers is required to establish such measures. What qualitative research is designed to do is:

- Identify issues that are salient to consumers;
- Elicit the level of understanding that consumers have of different food labels, and sources of misunderstanding / confusion;
- Identify specific beliefs and attitudes about the food labelling system, and uncover the reasons behind those attitudes;
- Obtain an understanding of how consumers use different food labels, in different settings and contexts;
- Elicit the broad spectrum of experiences that consumers have had with different food labels, and provide an understanding of how these experiences have helped shape consumers’ perceptions of different food labels and the food labelling system.

Following accepted best practice for reporting qualitative research, this report:

- Focuses on views, opinions and experiences that were fairly consistent across the groups;
- Does not document isolated, or ‘one off’ comments, which have the potential to be misleading, and can distort the overall conclusions. In the few instances where reporting an isolated comment is deemed appropriate, it is clearly identified as a peripheral view, and not representative of ‘mainstream’ opinion / experience.

In the main, findings between participants in Australia and New Zealand were consistent. Where obvious or important differences were found, such as in regards to country of origin and genetically modified issues, they have been reported as such. However, as the majority of groups were conducted in Australia, there is greater breadth of evidence available, in terms of illustrative comments and examples, from this component of the research. It should be noted that any illustrative comment or example has only been used if it reflects a general finding between Australia and New Zealand (unless otherwise stated).
5 FOOD LABELS IN THE WIDER CONTEXT

Each of the discussion groups began with a few general questions about the level of attention people pay to food labels, their use of food labels, and the perceived degree of influence labels have on their food purchases. The findings presented in this section are drawn from these discussions, group written tasks, as well as the in-store quantitative survey. Some of the information is included in this section not because it presents findings that are necessarily new, but because it helps to set the lifestyle and shopping context in which the research results are found.

5.1. Salience and Awareness of Food Labels

Consumers generally had a good appreciation of the amount and extensive range of information that is available on packaged foods.

Perceived value of labels

Most people in the qualitative research felt that it was a good idea to have most of the information that is on the labels. Even though they themselves might not use it most acknowledged that other consumers might find it very useful.

Very few held the opinion that there was too much information on food packages, however many felt that particular information presented was confusing or difficult to understand (see Section 5-10 Specific Food Labels).

There was also some concern that there appeared to be, from participants perceptions, no standard format for food labels, and in particular nutrition labelling. This perception existed despite the fact that the old Code and the NZ Food Regulations both provide standardisation for food labels including a standard format for nutrition information panels, although this was not a mandated requirement. One would expect this concern will be alleviated to some extent as the adoption by manufacturers of the new Food Standards Code becomes more widespread and nutritional panels are present on a much wider range of foods.

The quantitative results indicate that during product contemplation, ingredient and nutrition related information is as salient as price/value for money issues and brand names. When consumers were asked if they were looking for any particular information on the pack of the product they selected, specific brand information was mentioned first most often (23%). The next three most salient items were price (17%), a specific ingredient (15%) and then general ingredients (14%), followed by a nutrient claim (7%) and specific nutritional information (6%). However the reader is reminded that these results are not
drawn from a representative sample of shoppers. Further detail of these results is provided in Section 16.

5.2. Use and Influence of Food Labels

Only very few people do not ever read labels at all.

Generally speaking, participants recruited on the basis that they were 'less concerned' about the health or nutritional value of foods they choose paid less attention to food labels than those who consciously tried to make healthy choices. Those in the first group typically said they "hardly look at them [labels]". This may have been a result of their genuine lack of interest in choosing healthy foods, or the perceived need for concern or attention to health. Lack of concern may have also been compounded by a lack of interest in or dislike for shopping in general.

However, further clarification of what they were saying revealed that most people do check the labels occasionally "when I have time":

"You say you read the labels, but only when you've got time. If you've only got two hours and you've got to pick the kids up, go to netball, pay the bills and do your shop, you can't ..."

"I never look at the labels. Once I've checked once I just buy the same things."

"Me too. Once I realise what I want to buy I just go straight for that."

"Once I read it all. But that was years ago. Now I'm happy with the product I just walk in and grab it. But originally I did read it all."

"When there's new products, I look at the labels to see what's around." [+55, country, low SES, conscientious]

But after the product has been established as OK, then many don't check it again unless some further development takes place (ie like a comparable product arrives on the market), at which time a reassessment might occur.

"If it's something I haven't bought before I always check it out. When I first came to Australia, when I was getting used to all the brands here, [I used to check] but now I sort of know what I want [I don't]." [Under 35, metropolitan, conscientious]

"If it is a new product that I haven't seen I would compare it with the old product to see that I am getting the most healthy product" [35-49, conscientious]
It was generally expressed by all those who read labels that they do so as and when they needed to. That is, once they had established what product they were going to buy (by reading the label and comparing to other products), then they would usually just buy by brand and not re-read every time. There were several occasions on which most said they would check the label and they were:

(1) If there was a similar product on special then they might compare to their usual brand; or

(2) If there was a new product on the market, which happens frequently in many product categories, then they would read the label quite closely.

“If I find something new and I've got time to go through the list, then I do.” [under 35, country, less concerned].

“If it's something new – my son is allergic to rice powder – then I always check to see if it's OK” [under 35, country, less concerned].

This was true for people in all groups, irrespective of health consciousness or health requirement. However for health conscious shoppers, or those with special dietary needs, the information on food labels greatly influenced the choice of products they buy and there was a tendency to check more regularly.

“Well, I mean for instance I’m usually trying to shop under a fairly restrained budget, so if I’m looking at what they call home brands, I’ll look at that very closely, I’ll look at where it’s actually made and the origin (where it’s coming from) and say it’s tuna, because I eat a lot of tuna, I’ll look as to whether it’s in oil or brine or water, salt content. It’s got to be low in salt. Depends on what you’re buying” [50+, metropolitan, special needs].

**Quantified findings amongst in-store label readers**

Brand and price, whilst each in their own right appear to be the primary drivers of product choice, are equally as important as ingredient and nutrition information. **In short, these four items are the most salient considerations at the point of product selection.**

Interestingly, while price and brand name were most top of mind during product selection, their degree of influence, relative to ingredient and nutrition information (when it was used) as well as many other label types is **less.**

More detail on the quantitative findings are presented in Section 16, however it is noted at this point that ingredient and nutrition information are often reported as a combined response as well as separately because the qualitative research indicated that **many consumers use ingredient lists as a source of nutrition information.**
Where labels are read

Most people (want to) read labels, and in particular nutrition labels in the store or supermarket, prior to the purchase of a product they haven’t tried before – either a new product on the market, or a product they don’t usually buy that is on special. However, many consumers report feeling ‘rushed’ and ‘pressured’ to make a quick product selection in the store and not get in the way of other shoppers, which limits their capacity to study labels in detail. Avid label readers would put the purchase off till another visit when they had more time, or were without their children.

There were a handful of people who said they studied the nutrition information panel in more detail at home, during meal preparation (for example, reading the jar or packet while stirring or waiting for something to boil) or while eating a meal (for example reading a breakfast cereal box while eating breakfast). This means that although there would be less opportunity for comparison between products, there is the added benefit of being able to read some of the more detailed text which often contains additional nutritional information and claims that are on the packages (an opportunity for increasing consumer nutrition knowledge?).

Occasionally, date marks are used at home when assessing the suitability of a tinned product that has been in the cupboard for some time, or to do a pantry sort.

5.3. Lifestyle, Health and Demographic Factors

Lifestyle changes

It was agreed that people generally did read labels more at some points of life than others. Label reading was said to increase in pertinence either when one became pregnant, had children or if a family member developed a specific health issue that required a change in diet.

"Before, I never used to read labels, but when I got pregnant I started to check out how much folate I was getting. So I think it all depends on what stage of life you're at." [Under 35, conscientious]

"There's a lot of things there [on the cereal label] that are helpful to people who have young children, who are growing quickly or pregnant mothers, etc, but are not so critical to those of our age group." [55+, metropolitan, special health needs]

Most parents reported that once you needed to try to find healthy foods for kids to eat (to fight against their insatiable desire for food that is bad) then you were constantly reading the labels to do that. Having children was discussed as a voluntary change to patterns (ie you decided that's what you needed to do) whereas the altered diet as a result of a health issue was often likely to come at the direction of your doctor.
However, the presence of children also worked against one’s propensity to read labels, at least while shopping with children, which limited, if not eliminated one’s capacity.

**Health**

Those with special health needs and health conscious shoppers are more regular label readers and have more knowledge of nutrition issues. These people feel a higher level of 'competence' using and interpreting labels, nonetheless they still appear to possess a lot of misinformation, and their knowledge and understanding of how to use labels is by no means complete.

Parents with children at home, people with special health needs and health-conscious people should be viewed as the primary users of nutrition and other food labels.

**Age**

From this research it is difficult to ascertain what impact age independent of parent status, has on people’s use of labels. Younger people appeared no more informed about or interested in reading labels or nutrition information than any other age group. However, having more recently completed school, some were more able to recall nutrition information learned in high school home economics lessons.

Similarly, while some older people appeared to be less concerned about food labels, others were active label readers. Those less concerned either felt that they were sufficiently attentive already, or that they used their many years of food shopping experience to guide their purchasing. They had the knowledge and wisdom that comes from life experience. They were not comparing food labels to make healthier choices because they felt they were already healthy and this wasn’t necessary. With probing, it became clear they knew quite a lot about labels, but it wasn’t something they were consciously aware of.

Those who were more label-attentive were usually more health conscious and had a pre-existing interest in reading labels for health/medical reasons.

**Income and Education Levels**

Differences that emerged between groups stratified on income and education levels also differed on other significant factors such as health consciousness and location. The impact of income and education levels was therefore difficult to assess from the qualitative research, given the interplay of other important demographic and attitudinal variables upon which participants were selected. Generally, those from more disadvantaged backgrounds tended to show less concern and interest about food label information, and thus used it less.
However, people from higher SES groups were just as likely to expound incorrect label information, or to misunderstand or misinterpret labels. It is recommended that the influences of income and education be measured in the quantitative study to follow.

**The Maori Participants**

Because of their significant representation in the New Zealand population and the ready availability of a Maori researcher, one focus group was conducted with Maori people. Due to budget restrictions, it was only possible to conduct one of seven groups with Maori people. The group was co-moderated with a non-Maori New Zealand researcher, who conducted the other New Zealand groups.

The Maori group was aged under 35 and most were in their early twenties. They tended to make food purchasing decisions based on price and taste (i.e. what tastes good to them). Some participants perceived that low sugar and low fat foods wouldn’t taste as good as those with more sugar or fat. When it came to the question “where do you get information about what food is good for children and what is not?”, generally the view was if the food was acceptable for adults, then it was acceptable for children also:

“*It is not hurting me so surely it won’t hurt them*”

Generally this group had low levels of awareness about healthy choices and little interest in the topic.

Whilst only one Maori group was conducted, and thus only a non-representative ‘snap shot’ view can be drawn, we offer some comments about the differences between this group and the non Maori (NZ) groups below.

Overall, the characteristics of disadvantage were clustered in the Maori group – low income, low education, youthfulness/lack of life experience, limited communication skills, and a health attitude of “less concerned”. However it is unknown if, for instance had the Maori group been a group of educated, high income, aged 35 –49 years who were health conscious, that the Maori picture would have been entirely different and probably indistinguishable from a non Maori group with the same health attitude of the same age.

For these reasons, the comments or findings of the Maori group are not distinguished separately from the non-Maori groups and are represented in the report where their views were consistent with that of all other groups.
5.4. **Credibility and Reliability of Food Labels**

People in the health conscious and special health needs groups tended to be slightly sceptical about the reliability of food labels, possibly because they used them more and had greater exposure to incomplete or contradictory nutrition information.

However, in general most participants believed that food labels were fairly reliable, only because food manufacturers are policed (by government authorities).

"I tend to think that you've got to believe them because if they did lie they would be in so much trouble."

"They might not tell a lie, but they don't tell the truth." [55+, metropolitan, special health needs]

Manufacturers, who were said to be basically only trying to sell a product, were regularly accused of trying to 'dupe' consumers in a number of ways:

- Altering the size / contents of packages so that it could not easily be price compared to its competitor (in all groups there was mention of the changing content / size of packaged goods, that is the size of the unit going down and the price staying the same or going up);

  "It is labelled, but you don't notice. It's when you get it home and can compare to the last time you bought it you discover that it weighs less." [55+, metropolitan, special health needs]

  "This is what's happening over the years [deterioration of standards]. It's not the same as what it was even four years ago. The content might have dropped 20 grams or something like that, but you have to read the label to find out, because the tin's often the same size."

  "They do that with the margarine. They sell it in 500g tubs and then they bring out a 375g one and you see it and you think it's cheap. It's not until you get it home that you realise it's a different size." [+55, country, low SES, conscientious]

- Changing the ingredients of a new product after the initial introductory period, to those of a lower quality in order to save costs once people are convinced to buy;

  "I remember once many years ago buying a new cleaning product that was excellent. But when I bought it a second time I noticed that it wasn't as good and the ingredients had changed. So I rang the manufacturer and asked and they said oh yes, we've found another
ingredient that is just as good. And I thought, oh sure it is." [55+, metropolitan, special health needs]

Minimising the negative aspects of a product by putting the relevant information in small print;

"Some products do say 'may contain nuts' but if they do it's usually in small writing down where you can hardly find it. But some don't even have it on their package at all." [Under 35, conscientious]

saying something is 'lite' / 'light' but not meaning 'low in fat' meaning instead, light in flavour (olive oil being a case in point).

substituting sugar for fat to make products taste better, and selling it as a low-fat product even though it is now high in sugar. There was clear appreciation of a 'trade-off' amongst some of the more health conscious consumers, and a belief that the consumer had to beware of this.

"I always look at the fat content. But now I look at the sugar, because in order to have low fat they've got to have something, so they substitute it with sugar." [Under 35, conscientious]

As a result, in general there was mixed feelings about the supposed reliability of labelling information, but most people had no cause to not trust the information provided. As one person put it, “what else do we have?”

5.5. Most Important Labels for Different Product Categories

Early in the group procedure, before the influence of the group discussion, participants were asked to complete a written task which required them to rank the three most important types of food label elements for a range of different products. In this way, participants were forced to prioritise the importance of label elements, something they described as ‘hard to do’. Despite this, there was considerable consistency in the results across all groups, which are summarised over the page.
### CATEGORY

<table>
<thead>
<tr>
<th>Conegetor</th>
<th>1&lt;sup&gt;ST&lt;/sup&gt; MOST IMPORTANT</th>
<th>NEXT MOST IMPORTANT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dairy foods</td>
<td>Date Marking</td>
<td>NIP, Food Additives</td>
</tr>
<tr>
<td>Breakfast Cereals</td>
<td>Ingredient List</td>
<td>NIP, Nutrition Claims</td>
</tr>
<tr>
<td>Confectionary</td>
<td>Ingredient List</td>
<td>NIP, Date Marking</td>
</tr>
<tr>
<td>Savoury Snacks</td>
<td>Ingredient List</td>
<td>NIP, Food Additives</td>
</tr>
<tr>
<td>Frozen Sweet / Savoury Food</td>
<td>NIP</td>
<td>Date Marking, Food Additives</td>
</tr>
<tr>
<td>Tinned F &amp; Veg</td>
<td>NIP</td>
<td>Ingredient List, Food Additives</td>
</tr>
<tr>
<td>Bakery/Bread</td>
<td>Date Marking</td>
<td>Ingredient List, NIP</td>
</tr>
</tbody>
</table>

Allergen statements, advisory statements and country of origin information could be perceived, by omission from the table above, as less ‘vital’ but were not, and should not be interpreted as unimportant or not useful. The label elements in the table above are an indication of the information people ‘need to know’ compared to that which they would ‘like to know’. GM labels received very low scores mainly due to people’s low awareness of what they are.
6 NUTRITION LABELS

Towards the end of the general discussion about food labels, many group participants spontaneously raised nutrition labelling issues. Where this topic did not arise spontaneously it was raised by the Moderator as the first specific type of food label for discussion. Photographic examples of the range of the different food labels, including nutrition labels, were used throughout this part of the session to stimulate the discussion and provide consistent points of reference across all of the groups.

6.1. Knowledge of Nutrition Issues

Assessment of peoples’ knowledge about nutrition issues was made through indirect rather than direct questioning. Much of this knowledge (or lack of knowledge) was revealed as participants explained their awareness and use of nutrition labels.

People appeared to have at least a superficial understanding of the terms protein, energy, total fats, and carbohydrates. Saturated fats were perceived as bad fats and if people distinguished between sugars it was in terms of added sugars and naturally occurring sugars.

However, in the main it would be true to say that there is a lot of misunderstanding about nutrition amongst consumers, irrespective of age or socio-economic factors. Nutrition is one of those topics that everyone thinks they know quite a lot about (and are ready to articulate what they believe to be true), yet what they do know isn’t really that comprehensive. Having said this, there was a general trend amongst younger people and people recruited into the higher SES groups, particularly those with special needs or were health conscious, who appear generally better informed about nutrition information. Nonetheless they were still likely to voice inaccurate information as ‘fact’ and/or admit to being confused by other nutrition theories.

However it is generally only those who have received training or people who had consulted a dietitian or undertaken a weight control education-based course such as Weight Watchers) for whom there exists a wider or deeper understanding about nutrition. Younger participants (18-34yrs groups) tended to draw upon information learned in school home economics or health classes, and this information tended to be more accurate.

Often their knowledge is very specific (relating to issues they or a family member might have), and sometimes it is quite evident that some don’t really understand the basic principles of nutrition (ie many don’t know the function of the various nutrients in the body, they just know that you have to either eat them or sometimes avoid eating them to stay healthy). Therefore, whilst a lot of people may not know the role
of such things as niacin and riboflavins (or that they are both B vitamins) they assume that, perhaps because they are mentioned on the cereal box and there is a recommended daily intake, that they need to be consumed.

This is further complicated by the propensity for most people to obtain general health knowledge from a variety of incomplete sources, primarily from television (news stories as well as lifestyle and cooking programs), the newspaper, or from food labels themselves (see Section 13). In this way, their knowledge is often piecemeal. They might say for example that they've been told they should eat fish twice a week because fish has got good oils in it, or they might know there is good fat and bad fat and that fat can cause heart / cholesterol problems; or that you need to control the kilojoules you consume to keep your weight under control; or that you need to avoid sugar if you have diabetes.

There was a lot of misunderstanding, confusion and a lack of confidence about how to use the Nutrition Information Panel (NIP). It is likely however that much of this confusion was an expression of people’s frustrated misunderstanding about specific nutrition information, for example the relationship between energy, fat, carbohydrates and sugar, rather than confusion with the panel itself.

6.2. Perceptions About Nutritional Choices

There is a caveat to buying food based on its nutritional value or how good it is for you and that is taste. There was general agreement that taste was an important factor. If something was good for you but tasted bad you were unlikely to buy it more than once without some other overriding factor (such as your doctor insisted).

And this was especially the case for children. Parents consistently reported that if their children do not like something, they just won't eat it and therefore there is no point in buying it.

"It's like that Dick Smith's Nutrigrain. They just wouldn't touch that one."
[Under 35, country, less-concerned]

Similarly, the view that healthy food is more expensive was expressed in almost every group. The value of a healthy choice was made on a case by case basis by most people, however in the context of the group discussion it was widely accepted that "you paid extra for the healthier products"

“what’s healthiest for you is the most expensive as well” [50+, metropolitan, special needs]
6.3. The Nutrition Information Panel (NIP)

6.3.1. Awareness of the NIP

Almost all people in all groups agreed that they had previously seen the NIP on many packaged food products.

Most people could spontaneously name two or three things that were in the NIP, but awareness of all seven nutrients is low across all participants. Not surprisingly, people in the ‘health-conscious’ and ‘special needs’ groups had a better knowledge of the range of nutrients included in the NIP. Awareness of the NIP did not appear to vary by location (metropolitan vs country) but lower education and income groups tended to have fewer (but still some) people who were overly interested in the nutrition information.

The most well known nutrient was fat, followed (in approximate order of mention) by sugar, carbohydrate, energy, protein and sodium. More informed participants made mention of other minerals such as potassium and vitamins such as folate, niacin, and riboflavin.

Sugar was less well understood. More aware participants (more health conscious) were aware that there was naturally occurring sugars (such as dried fruit) and added sugar, however this group were not the majority. Most were confused by the use of the different terms (sugar, added sugar, total sugar, natural sugars) and saw this distinction as another deliberate attempt by food manufacturers to confuse people.

6.3.2. Use and Understanding of the NIP

Level of Use

Use of the NIP was very much determined by the health interest, demographic and lifestyle factors discussed earlier that determine people’s interest in and capacity to read labels in general. However there were very few who had not ever used a NIP, and most used it periodically when buying a product for the first time. Those who did not use the NIP were more likely to be those recruited into the ‘less concerned’ about healthy or nutritional food groups, as well as the Maori group in New Zealand. These people would be likely to say they would only use the NIP “if they have to”, that “taste comes first”, or that “it doesn’t worry me – it is all food”.

However there was generally at least one person in each group who would describe themselves as ‘avid’ readers: “every time I pick up an item I read the label . . .”.

The NIP was very important for people with medical conditions, where successful management of the dietary needs depended on avoiding or limiting particular nutrients. This was also true for the few people who restricted nutrients on religious grounds.

“I always use them. I have a liver problem and I can’t eat fat. Fat makes me very ill. I am looking for information about saturated fat all the time” [30-49yrs, metropolitan NZ, special needs].

Most shoppers tended to have one or two ‘pet’ nutrients they check and then they ignore the rest, with only a minority saying they assess the whole NIP (and this is usually for breakfast cereal).

"I feel good having checked at least one thing – the salt." [Under 35, conscientious]

The items of nutrition information that were primarily used by most consumers in the groups were:

- total fat;
- total energy (kilojoules; usually referred to as ‘calories’ by older women) used mostly by dieters and those controlling their weight;
- sugar;
- carbohydrates;
- salt

Fat content was usually monitored by people when choosing foods for themselves (or their partner) where as sugar content was evaluated by parents buying food for their children. The in-store survey confirmed this finding, with 70% of shoppers who used the NIP looking for the fat content information and 53% looking for the sugar content in the NIP. 25% of shoppers also mentioned looking for the saturated fat content; a piece of information not mentioned specifically by consumers in the groups.

Most of the mothers of young children were very conscious of the amount of sugar they give their children (more so than themselves). Their concerns revolved around their children’s health, including issues such as weight gain and generally developing a ‘sweet tooth’ as well as tooth decay.

For people who did use the NIP, they felt that it should be on all products, including junk food, as illustrated by the conversation between the three health-conscious young people below:

“Junk food doesn’t have a nutritional panel which I find annoying. I know you shouldn’t eat junk food anyway!”

I like to make the best ‘fat’ choices.
Yes. You’re going to eat a chocolate bar not matter what so I’d like to eat the lowest fat chocolate bar”.

NIPs were also viewed as necessary on all imported products where participants were only aware of the NIP being printed in a foreign language, where a NIP exists.

Consumers were unaware of the present requirements upon food manufacturers with regards to NIPs and interpreted the ‘ad hoc’ use and inconsistent presentation of NIPs as something food manufactures did to assist sales or get a marketing ‘edge’. The new Food Standards Code includes a prescribed format for the NIP, therefore there will be no inconsistencies in the presentation of the NIP when the new code comes into full operation at the end of this year.

The in-store survey quantified shoppers awareness and use of the NIP. When asked if they looked at the NIP, 34% said that they did. Of those, 88% said that it influenced their product choice a lot. For 10% of label readers, the NIP was the thing that most influenced their product selection. The NIP was ‘top of mind’ amongst shoppers who bought breakfast cereals than it was for any other product category included in the survey.

Making Sense of the NIP

Confidence and competence in using the NIP was mixed. Frequent NIP users, irrespective of age, thought they were able to use the NIP to assess the suitability of a new product for their own nutritional needs. However, these people were the minority, and even amongst them there were information gaps and disagreement over nutrition information.

The majority of people who were (or would have been) interested in using the NIP found at least parts of it difficult to read or interpret. The main problems stemmed from confusion over:

- what the nutrient names actually mean, and discerning between them;
- using the ‘per serve’ and ‘per 100g’ assessment columns;
- over-use of technical or scientific language instead of ‘plain English’;

These problems are addressed in turn, with illustrative quotes used to contextualise the difficulties people have.

What do the nutrient names mean?

Group discussions often became the ground for debate about what was meant by the more common nutrient names. Many people were confused about the differences between energy, carbohydrate, sugar and fat. Some correctly understood that energy was sourced from carbohydrate, sugar and/or fat, but therefore wondered why all nutrients had to be listed – these people felt there was
too much information. Others were confused whether sugar was the same as carbohydrate, a type of carbohydrate, or a different nutrient all together.

Some people wanted as little information as possible – an all-round indicator of whether the food was ‘a good choice’ is what these shoppers were after. Although these people wanted to make a healthy choice, they felt that the amount and complexity of the information made it all too hard. However, others based their selections on the detail – added sugar compared to just ‘sugar’, or saturated versus ‘total fat’.

This research has highlighted that people’s preferences are diverse, and despite the different forms of nutrition labelling provided (claims, panels, % labels), how impossible it is to design labels that meet everyone’s needs, because people are operating from vastly different levels of nutrition knowledge and understanding. However, much of peoples’ confusion also stemmed from the inconsistency in the way NIPs are presented. Specific examples of this included:

- The use of different terms/language to describe the same nutrients:
  - fat was listed as ‘fat’, ‘total fat’, or broken down into a subtotal for ‘saturated fat’, and sometimes other fats;
  - carbohydrate was listed as ‘total carbohydrate’, or broken down into a subtotal for ‘total carbohydrate’ and ‘total sugar’ or just ‘sugar’ or ‘added sugar’ and ‘natural sugar’.

  “It says per serve the fat is 0.6g and the carbohydrates . . .you see, I get confused with that too – carbohydrates total which is 22.1g and the sugars are 6.7g. You see I get confused with that. . . I get confused between the carbohydrate and the sugars . . . but carbohydrates is supposedly sugar isn’t it? Isn’t carbohydrate sugar? [50+, metropolitan, special needs]

- The use of bolding or colour blocking for some nutrients and not others. People with a low level of understanding interpreted the bolding as ‘total’ figures and unbolded nutrients listed underneath as a breakdown of that nutrient, leading to confusion about definitions and differences between nutrients (fat and carbohydrate for example);

Per Serve vs per 100g

The majority of consumers agreed that the per 100g labelling was useful for comparison between similar items as it allowed the comparison of things that came in different unit sizes.

"At least its standard."

"It’s easier to divide isn’t it?" [50+, metropolitan, special health needs]
"I think I would rather have the per 100g (%) I've probably got more idea of working that one out than per serving" [50+, metro NZ, less concerned]

A few people in each group said they used only the serving size analysis of the nutritional content because that was more practical – they wanted to know exactly how much of the various things they would be getting if they ate the whole unit. Whilst these were mainly the conscientious and health conscious participants, each group had at least one person who referred to the serving size on some occasion.

However, this always brought up discussions of the optimal 'serving size' with some people saying things like:

"What is one person's serving size is another's small snack. My husband eats...".

"The packet says it has two servings in it, but it isn't enough for a man, is it? It just does a fifteen year old." [under 35, Country, less concerned].

"Their idea of per serve isn't necessarily what I'm going to eat" [under 35yrs, metropolitan, health conscious].

"You buy a packet that says serves 4 and you think, yeah in their dreams." [55+, metropolitan, special health needs].

Manufacturers also came under attack for using the serving size labelling to their advantage by making the serving size an odd proportion of the package / unit. It was noted that some packages have a serving size that is a strange fraction of the total unit size, yet the package might not be a resealable container, so one would not reasonably expect to eat only the recommended serving size from one package.

Again, it was said that manufacturers try to make it difficult to compare to their competitors' products by varying the size of the containers just slightly, and the 100g labelling prevents them getting away with it.

Although participants were divided in their preferences for information to be presented per 100g (%) or per serve, the overall preference tended to be for 100g as this was viewed as easier to work with. Nonetheless, having both was viewed as an acceptable format and of value in different circumstances, as illustrated below:

“If you’re comparing then I’d say it’s easier (100g). If it’s 100 grams then you can see percentage wise –ok it’s got 30% fat and this has got 15% but it actually comes down to the ‘per serve’ because that’s what you’re going to eat” [under 35yrs, metropolitan, health conscious].
**Scientific language**

Consumers were consistently frustrated by manufacturers’ use of scientific terms that they did not understand. This criticism was levelled at the ingredients list as well as the NIP and included terms such as:

- **Sodium** - although most people knew that sodium was salt, they preferred to refer to it as salt:
  
  "People don't always know what sodium is, so if they just put salt it would be better." [55+, metropolitan, special health needs]

- **Sugar** and ‘ose’ words such as dextrose, fructose, glucose, sucrose
  
  "They don't have to be health nut or someone with an illness, they just want to know what the total sugar is or the total fat, without all the little bits [fructose, glucose, etc]." [55+, metropolitan, special health needs]

- The use of ‘other’ words such as phelynalanine, for which there probably was no ‘common’ word but they still found intimidating.

- The use of **numbers** instead of additives, colours and preservatives (discussed under food additives in Section 6.3)

At the root of consumers’ confusion was a lack of understanding of **why** technical or scientific language had to be used. This lack of understanding could be addressed as part of a comprehensive consumer education activity.

**Using Rules to Assess a Product**

People who consciously try to make healthier food choices often use their own rules or thresholds for key nutrients such as fat, salt, sugar and fibre. For some, particularly those watching sugar for diabetic and medical concerns, this is referred to as the **'10% rule'** where products had to have less than 10% of sugar in them. The 100g labelling was used for checking that foods were suitable. Ten percent was often used as the ‘acceptable’ threshold for fat also.

"Usually ones up to 5% (fat) I’m quite happy but if it goes up to 10% . . . “

However others used a gram amount of key ingredients, particularly fat, to judge the nutritional acceptability of a product. The daily allowance of 30g of fat was given by some [note: ~30% energy from fat is a nutrition goal that has been commonly raised, but without common understanding that this translates to ~70g of fat per day]. Others used a gram threshold which depended on the product, as illustrated by this older person who had special dietary needs related to her health:

". . . like I sort of look at it and say 'ok, 30g of fat is my limit' and then I'll look at something . . . depending on the product that's got less than 5g of fat in an actual serve” [under 35yrs, metropolitan, health conscious].
[referring to the NIP in front of her] “As far as I’m concerned, I look for the fat in the first instance and it’s got here – per 100g the fat content is 18.3, well I would never buy that. It’s got the sodium 120mg – I wouldn’t have that”.

In the same way, many people can repeat rules for the recommended daily consumption of fruit and vegetables, promoted by government public health campaigns (eg WA Department of Health’s ‘Eat two fruit five veg a day’ campaign’). This suggests that it is the dietary rules such as these that are learnt by rote and are easy to remember. Whilst people do not necessarily regularly put such rules into practice, they are mentioned as being of the greatest assistance to people in making healthier food choices, even though the person might not have much overall understanding about nutrition.

For those who don’t have a benchmark against which to compare, the ability to measure against other similar products is a very important step in establishing one.

**Making Comparisons Between Products**

The vast majority of people don’t know what actually constitutes ‘low or lower in sugar’ or ‘low or lower in fat’, that is they don’t have a ready benchmark (unless they have a health issue, in which case they will mostly have researched suitable products quite extensively and know what is an acceptable limit).

For the majority of (motivated) people the decision about whether a product is lower or higher in these nutrients usually comes from a **comparison between like items, using the per 100g column**. Most people reported having compared two (or more) products side by side at some stage. So one might work out that a particular product is low or high in fat by having two or three such labels side by side.

Comparisons of this nature were also often made with a regularly purchased product, used when an alternative product was on special, or a new brand came onto the market.

The Nutrition Information Panel was also used to **verify a nutrition claim** that consumers felt was questionable, or untrustworthy. Use of nutrition claims is described in detail in the following section.

“You see 97% fat free or whatever, you pick up those ones and see what they have to say for themselves” [under 35yrs, metropolitan, health conscious].
6.4. Nutrition Claims

All participants were aware of a range of different nutrition claims. The following is a list of statements most mentioned by participants as examples of nutrition claims. Please note that some of the ingredients mentioned by participants below are not scientifically defined as nutrients e.g. ‘artificial colours or flavours’.

- Low in fat
- Low in sugar
- No additives
- No/low salt
- Cholesterol free
- Low cholesterol
- 98% fat free
- High in energy
- Good source of iron
- High in fibre
- No artificial colours or flavours
- No added sugar
- Lite
- Free

It should be noted that regulatory authorities would not consider claims about additives, colours or flavours to be nutrition claims. Consumers generally liked the nutrition claims on packages because they were a quick and easy way to decide between two products without having to read the entire label. Many participants admitted that the presence of nutrition claims on the front of the package did influence their decision to purchase.

"Yes. They do influence me."
"Yes."
"Yes. If I was in a rush, I'd pick the product based on the nutrition claims over one without." [Under 35, metropolitan, conscientious]

However, there was also a belief amongst some that the products themselves might often not be any more of what is claimed than a similar alternative brand, and that reference to the more detailed labels was essential to certify the manufacturer’s claims, because of the underlying belief that manufacturers often try to mislead consumers.

"I'd check the claims on the label. I wouldn't rely on the claims."
"I might check the first time, but not every time." [Under 35, metropolitan, conscientious]
“Yeah I do, I look at that [the nutrition claim], that gets my attention then I turn it over and look on the back” [35-49yrs, country, conscientious].

Surprisingly, many people were sceptical about ‘fat free’ claims in particular. It would seem, speaking to participants, that there has been a considerable amount of media attention on this issue in recent times. Most group participants were ‘street wise’ when it came to how much faith they placed in such claims. For
example, some said you had to beware the claim 'lower in fat' because it might be
that it is only lower than that particular manufacturer's other products, not lower
than competitors' products.

"95% fat free. When it's presented that way it sounds like it's low in fat,
but it's not. It's not until you actually read it that you discover that it's not
low in fat. It's lower in fat than the full model, but it's not low in fat." [Under 35, metropolitan, conscientious]

“I used to look for like . . . things that are 98% fat free but I’ve learned
you can put that on but it can be high in sugar content . . . but then I’ll flip
to the nutritional information . . .:” {Under 35, metropolitan, health
conscious].

“Cause they might say it’s low salt but what they think is low is not what
we think is low. Or it might be low in salt compared to something else
that they’ve produced”

“They don’t give you the full picture, you still have to look further” [35-
49yrs, country, conscientious].

It is clear that nutrition claims have some significant credibility issues despite
being regarded as useful by many participants.

The fat/sugar trade off

Some consumers recognised that manufacturers might also put more sugar in a
product to make it taste better and to disguise the fact that it was low in fat. This
concept of the fat/sugar trade off arose at multiple points during the group
discussion – conscious label readers appeared well-versed in assessing this trade
off.

“But sometimes they play games on you – they say low on fat, but if you read
the label they’re high in sugar” [50+, metropolitan, special needs]

“Sometimes you get confused because it’s 98% fat free and you turn it over
and it’s 98% sugar!” [under 35yrs, metropolitan, health conscious].

“. . . when you look at the back you find out it has got piles of sugar in it – it’s
got hardly any fat, but then you’ve got heaps of kilojoules because of the
sugar” [35-49yrs, country, metropolitan].

How Light is Lite ??
Similar criticisms were also cast on ‘lite’ claims, with almost all consumers knowing that this term rarely indicated the product was low in fat or sugar.

“nice light colour!”
“you don’t know what’s light – if it’s the colour or what” [35-49yrs, country, metropolitan].

“I want to know what the difference is in my salad dressing. One says ‘free’ and one says “lite”. There’s a difference. It bugged me when I worked that out.

[Moderator] “What is the difference?”
“I couldn’t tell you right now because I haven’t bought it for a while but one’s more fatty than the other. It’s almost like they’re trying to trick you so you do have to read it”

[Moderator] “How did you work it out?”
“I was just staring there and I picked up both and thought what’s the difference because this [salad dressing] is ‘Greek free’ and this is ‘Greek Lite’. It’s the same company that make it – Kraft. And I thought ‘what’s the difference?’ And I flipped it over and went ‘hang on a minute . . .’” [under 35, metropolitan, health conscious].

This said, many agreed that they would probably still buy a product based on the claims, to save time.

Consumers in the New Zealand groups were particularly distrusting of nutrition claims, and felt that some were confusing or misleading.

“Just because it [the claim] is there doesn’t mean it has got less salt”

National Heart Foundation Tick

In almost all groups, reference was made to the National Heart Foundation’s ‘Tick’. Many people seemed to have seen recent current affairs programs which ‘exposed’ the Tick, highlighting that it cost a lot of money to get the approval to have the tick put on your product, and that there were other products whose manufacturers had not paid to have assessed which were as good as or better than the approved products.

"There are just as many products that are just as good, but they’re not prepared to be blackmailed by the Heart Foundation to get the tick."
"That’s wrong.” [55+, metropolitan, special health needs]

"They paid so much for the tick. But another product that hasn't got the tick is probably sometimes just as good."
"I was more influenced to buy until I found out how they got it then I stopped buying it. when I heard about that, that put me off." [+55, country, low SES, conscientious]

This has led many consumers to be sceptical of the value of the NHF Tick, the undesirable backlash being that some now discount the healthy ‘tick’ products as being poor choices. This view was not widespread in every group, but when discussed did cause some in the group to question the value of nutrition symbols. However some people said they would still buy the Heart Foundation Tick product:

"I do buy the heart tick products, even though I saw the program. I still buy them because in my experience they are the ones low in fat." [Under 35, conscientious]

"I’d still buy it. It’s still been approved, so you know it’s been assessed as being good."

"Sometimes when I forget my glasses I have to rely on that kind of visible marking in order to choose." [+55, country, low SES, conscientious]

Others said they might only compare it to others to identify an alternative.

The use of easy to recognise symbols such as this has implications for the use of other similar labels, such as the GMO-free tag. (See section 9).
Key Findings: Nutrition Labelling

- Consumers’ knowledge and understanding of nutrition information is piecemeal, mostly gathered from the media (television, newspapers and magazines) and word of mouth.

- The Nutrition Information Panel (NIP) is not well understood, a result of their general misunderstanding about specific nutrition information, for example the relationship between energy, fat, carbohydrates and sugar.

- Although this general misunderstanding about nutrition appeared to exist amongst all participants, there was a general trend amongst younger people and people recruited into the higher SES groups, to be better informed about nutrition information. Nonetheless they were still likely to voice inaccurate information as ‘fact’ and/or admit to being confused by other nutrition theories.

- Most shoppers tended to have one or two ‘pet’ nutrients they check and then they ignore the rest, with only a minority saying they assess the whole NIP (and this is usually for breakfast cereal).

- The majority of people who were (or would have been) interested in using the NIP found at least parts of it difficult to read or interpret. The main problems stemmed from confusion over: what the nutrient names actually mean, and discerning between them; using the ‘per serve’ or per ‘100g’ assessment columns; and over-use of technical or scientific language instead of ‘plain English’;

- Participants were divided in their preferences for information to be presented per 100g (%) or per serve, the overall preference tended to be for per 100g as this was viewed as easier to work with. Nonetheless, having both was viewed as an acceptable format and of value in different circumstances.

- People who consciously try to make healthier food choices often use their own rules or thresholds for key nutrients such as fat, sugar, salt and fibre. However for the vast majority who don’t have a benchmark against which to compare a new product, the ability to compare against a number of products is a very important step in establishing one. Most people struggle to ascertain what is legitimately ‘low’ or ‘high’ in fat/salt/sugar etc and therefore a ‘good’ choice.

- Consumers generally liked the nutrition claims on packages because they were a quick and easy way to decide between two products without having to read the entire label. Many participants admitted that the presence of nutrition claims on the front of the package did influence their decision to purchase.

- However, there was also a belief amongst some that the products themselves might often not be any more of what is claimed than a similar alternative brand, and that reference to the more detailed nutrition label was essential to certify the manufacturers claims, because of an underlying feeling that manufacturers often try to dupe you. People were most sceptical about fat free and lite claims, and were well aware of the fat/sugar trade off where products labelled as low in fat were instead high(er) in sugar.
7 INGREDIENT LABELLING

After the discussion about nutrition labelling was exhausted, the Moderator directed the participants’ attention to the ingredient list (if it had not already been raised) and later to the new concept of percentage labelling. The use of the food additive numbering system and allergen and other advisory statements were also discussed. Again, the photographic examples of food labels were used to prompt discussion.

7.1. The Ingredient List

In all of the focus groups there was widespread recognition and understanding of the term ‘ingredients list’ and all participants were able to locate the list on the food example they had in front of them. Around about half of participants knew that the ingredients were arranged by quantity from most to least. This awareness seemed to be an adjunct of awareness of the consumption of sugar and salt, as one participant expressed:

“You can tell how much … is in it from its position on the list. Did you know that tomato sauce is mostly sugar?” [50+, metropolitan, special health needs]

I just make sure the ingredients contain what you expect. Like you get tomato sauce and find out tomatoes are down the bottom of the list. Because sugar comes first.” [Under 35, metropolitan, conscientious]

Use of the ingredient list appeared to be as common, across all groups, as was their use of the Nutrition Information Panel for selecting products. This was confirmed through the group written ask exercises as well as the in-store survey data, and is illustrated by the following consumer comment:

“For example, if I’m buying jam I will look at the ingredient list. I’ll try to buy one without sugar but if all of them have sugar I’ll see which one is first – sugar or fruit. If one has fruit . . . “[participant indicated she would select this one] [under 35, metropolitan, health conscious]

Results from the in-store survey indicate that when the shopper was accompanied by another adult, the label item that is discussed most is the ingredients.

Concerns about the use of scientific language and terms in the ingredients list were similar to those reported for the Nutrition Information Panel. Differences in terms such as salt in the ingredients list but sodium in the NIP, and different forms of sugar (glucose, syrup, honey, sucrose, fructose etc) worked to confuse people, making the nutrition information appear harder to interpret than need be. For example, whilst most people knew that ‘ose’ words were
sources of sugar, when they were assessing the label to evaluate the sugar content, they did not think to look across all such names. Nonetheless, the underlying knowledge that they had probably missed some of the ‘hidden’ sugars eroded their faith and trust in the label itself.

7.2. Percentage Labelling

It should be noted by the reader that the term ‘percentage labelling’ is a new term, provided under the new Code. Manufacturers have until December 2002 to incorporate percentage labelling information, where appropriate. Until then, manufacturers may use the labelling provisions of the old Code or NZ Food Regulations where percentage labelling is not a requirement.

It is therefore not surprising that while many people reported that they knew what percentage labelling was, most people appeared to confuse the term with the appearance of percentage of nutrients in the NIP. In each group one or two recognised the use of percentages in the ingredient list (as opposed to the NIP), the Sanitarium Weetbix example being the one that was most recognised.

Whilst a couple of people in each of the health conscious and conscientious label-reading groups strongly endorsed the concept of the percentage label, describing it as very useful and informative, others struggled to understand it’s interpretation until it was clearly explained by the Moderator – the comment below illustrates how a typical person grappled with the Weetbix example.

“Looking at that it only adds up to 80 and a half percent. So where’s the other 19 and a half percent? I don’t know if that’s not clear. Is that like six ingredients then after that it’s all 0.5%? Does that 0.5% relate to all six or just one?” [under 35yrs, metropolitan, health conscious].

For many, the practical benefits of percentage labelling over a straight ingredient list did not become clear until the Moderator explained the concept using the strawberry yoghurt example. In this example they could see a clear and tangible benefit, and agreed that it was a valuable thing to have.

“I think it’s a great idea”

[referring to photo examples] “Even though we know the first ingredient has the most in it and the second ingredient has a bit less or whatever, between 56% and 24%, that’s a big difference, I mean that’s twice as much from one ingredient to the next ingredient” [under 35, metropolitan, less concerned].

“It will stop false claims. I mean they’re always trying to say ‘we put the most fruit in our jams’. I mean there is an ad on TV and it says there’s so many strawberries in the jars. You can actually hold it up next to some of the others...”
and say “actually it’s not really true” – it’s a false claim. So it might stop that kind of false advertising. And perhaps you’ll believe what we read a bit more". [under 35, metropolitan, less concerned].

Because participants struggled to grasp the useful application of percentage labels, it was difficult for them to think of many other products on which they would find them helpful. The most frequently mentioned examples included juice, breakfast cereals, in particular muesli, fresh mince and sausages (% fat vs beef) and soups.

For those people who were interested in monitoring the amount of a particular ingredient in a product, or in comparing the perceived ‘value’ of two similar products, there was a preference for percentage labelling. It was clear, amongst this group of shoppers, that percentage labelling could become a very useful ‘tool’ for making value judgments between products. People understood that a high percentage did not necessarily indicate a ‘better’ or higher quality product, it would depend on what you were buying. However, based on the fact that so many people were unable to spontaneously recognise a benefit for percentage labelling, a considerable amount of consumer education would need to be provided for its potential use to be maximised.

7.3. Food Additives Numbering System

Discussion about the food additive numbers arose spontaneously in all groups during the general discussion about the ingredients list. The numbering system was clearly top of mind for many people, and was understood to refer to colours, flavours and preservatives, as well as ‘other things’ of questionable value. Attitudes towards the numbering system were overwhelmingly negative, dominated by the following perceptions:

- **The numbers are ‘bad’** – the less in the ingredient list the better;

  “I hate the numbers. I really can’t stand them because you don’t know what they are. At one point I had a code with what all the numbers are because the list is massive and you can’t cart that around everywhere you go”

  “If there’s too many numbers I won’t buy the product” [under 35, metropolitan, less concerned].

The notion that some of the numbers may refer to ‘desirable’ additives, such as vitamins or minerals was almost inconceivable. The only time a shift in this expectation occurred was when participants flicked through the code breaker in two of the latter groups (NSW) and noticed the names for some such items.
The numbers are meaningless for most people.

“Well, just when you look at the numbers, to me it doesn’t mean anything” [35-49yrs, country, conscientious]

“Why can’t they just give you a name. Why do they have to use a code?” [50+, metropolitan, special needs]

Others, who felt less negative about some types of additives still felt incapable of using the numbering system to discern between them, as expressed by the following comment:

“I know some of the nutrients [numbers] are alright and some aren’t but I don’t know which is which” [30-49yrs, metro NZ, health conscious]

Special needs

There is an understanding that although most people might not be allergic to the additives and preservatives in food, there might be some who are, and who therefore need to know what's in the product. Most groups had someone who could cite a person they knew in this situation, a typical example being:

“. . . if my Dad’s coming over he can’t have flavour enhancers so I know look if I’m making something then I know to go to it and check the ingredients. . . he told me which numbers to keep an eye out for and I’ve got to keep the packets to one side so that when he comes over for dinner or whatever he goes there and checks the packages to make sure I haven’t missed it” [Under 35, metropolitan, health conscious].

Something for Everybody

About half of the group participants expressed a desire to be able to understand the meaning of the numbering system, whether they needed to avoid specific additives or not. Whilst there were some people who were as unconcerned about numbers as they were about any aspect of food labelling: “. . . I generally try to shop healthy and buy healthy but at the same time, if it’s that bad for me, it’s not going to be in the supermarket”, most felt the numbering system should be easy to interpret by everybody.
**Numbers versus names**

No one had any magic solution on how the code system could be improved to make it easier for people to understand. Whilst many consumers were frustrated by the use of ‘meaningless’ numbers, there was a general appreciation that most food packages were not big enough for manufacturers to print the names of all codes in full. One well-supported suggestion was what participants referred to as ‘logical’ ordering of the numbering system, as explained in the following quote:

“It would be easier if the numbers were natural numbers, like if you had a list, you could say right, these numbers are natural going from say 1 to whatever, and then these are artificial going from that range of numbers to that” [35-49yrs, country, conscientious]

Others picked out, from the photographic examples, formats that used words such as ‘colours’ and then listed the numbers in brackets afterwards:

“So, for example, this one says – it’s fortune cookies – this one says for the ingredients ‘wheat and flour, vegetable oil, mineral salts (341 and 500), flavour, colour (102 and 124)” so it’s telling you there’s colours in it and these are the specific types”

“. . . I wouldn’t know what the numbers mean anyway. At least this way I know that there’s colours added” [under 35yrs, metropolitan, health conscious].

This suggestion is in fact a requirement of the new Code, it will be important for ANZFA to monitor any changes in consumer attitudes to the usefulness of the food additive numbering system as the Code comes into mandated effect after December 2002.

Most concerns about particular additives centred around MSG, and specific colours such as red and yellow which parents avoided in food for their children. However although there was some limited spontaneous discussion about MSG, there appeared to be limited awareness of the numbers that indicate MSG.

Around a quarter or less of participants knew where you could get information about additive numbers. A book or list of codes was mentioned by a few people in the conscientious, health conscious, and special needs groups, but awareness of the ‘code breaker’ was not widespread. No one used the book in any systematic or regular way to assist them in their product choices. Many people complained that it was ‘too hard’ to use the codes and that the information should be more readily available:

"They should send a booklet to every household." [under 35, Country, less concerned]
“They should have it at the supermarkets attached to the aisles” [under 35, metropolitan, health conscious].

However, some who did have the means to interpret codes via a list or book rarely did so.

“I have a book at home that tells me exactly what the additives are and what foods they are usually added to. I went through a period where I was very conscientious until it got me depressed then I thought what the heck. There is nothing that you buy that does not have an additive, even bread” [50+, metro NZ, less concerned].

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### Key Findings: Ingredient Labelling

- **There was widespread recognition and understanding of the term ‘ingredients list’** and all participants were able to locate the list on the food example they had in front of them. **About half** of the participants knew that the ingredients were arranged by quantity from most to least.

- For those people who were interested in monitoring the amount of a particular ingredient in a product, or in comparing the perceived ‘value’ of two similar products, there was a preference for **percentage labelling**. It was clear, amongst this group of shoppers, that percentage labelling could become a very useful ‘tool’ for making value judgments between products.

- **The food additive numbering system** was well recognised by all participants in the research. Attitudes towards the numbering system were undesirable; people perceived that the numbering system either referred to additives that were only ‘bad’, or the numbers were ‘meaningless’.
7.4. Allergen Labelling and Advisory Statements

Allergen labelling or Specific food sensitivities

Those with special health needs use the labels extensively to ascertain whether it is safe for them in terms of gluten consumption, sugar (several diabetics), spicy foods, fat, peanuts, eggs etc.

Even those without allergies accepted that there is a necessity for labelling for ingredients that people might react to, when they thought about it. For example they might complain about ‘too much information’ being on the label but then when someone else mentioned that a person who was allergic to that particular thing would need to know about its presence, there was general acceptance that it was a necessity.

Participants were also asked about warning statements that start ‘may contain…’. Statements such as these are not a requirement of the Code, but rather a label statement used by manufacturers where contamination of certain allergies may occur in the production process. This information is often contained on confectionary items in relation to nuts, where for example the manufacturers produces several confectionary lines in the same production plant, some containing nuts and some without.

Participants appeared to have one of two different reactions to this type of statement, depending on how personally relevant the need for this information was. Parents who had children with allergies, or people who had food intolerances or conditions such as coeliac disease felt fairly confident they knew what to look out for and could make safe product selections, even though their choices were significantly limited.

“I’m a coeliac, and it’s a pain. It is a real pain. Like the first time I went, the first five shopping expeditions it was too hours each time. And now it’s really back to this sort of stuff, the absolutely most basic foods that are on the market . . “ [under 35, metropolitan, health conscious].

However, for the majority of people, who are not regularly scrutinising labels, there was a fair degree of criticism levelled at the small print and ‘vagueness’ of the label wording.

“Either it's in there or it's not.” [under 35, Country, less concerned]

“What's the point? Either it does or it doesn't [contain that ingredient]." [55+, metropolitan, special health needs]
"I remember once I rang the manufacturer and asked about a product's ingredients and they said we can't tell you because we really don't know - it changes all the time." [55+, metropolitan, special health needs]

Others were sceptical as to the accuracy of the allergen labels, or the motivation behind a manufacturer using them:

"It's very rare that you get that [allergen labels]. Very rare."
"Yes they want you to buy their product not put you off from it." [55+, metropolitan, special health needs]

"Some products do say 'may contain nuts' but if they do it's usually in small writing down where you can hardly find it. But some don't even have it on their package at all." [Under 35, conscientious]

And there were a few who thought that the allergen labelling didn't go far enough:

"Some additives in food can cause my daughter to get asthma. A lot or products don't say they can cause asthma, but they should." [Under 35, conscientious]

It was also obvious that 'one off' negative experiences did much to erode consumer confidence in reliability of food labels in general. By way of example, one person in a country group who said her son was allergic to rice powder related a story about some baby food that she purchased that did not mention rice powder on the label. The baby had a reaction, and so she was concerned about accuracy and reliability of the information.
Advisory Statements

The same photograph example of an advisory statement was presented to all groups – that for Viking Bars. In that instance the advisory statement is very small and printed in the fold of the chocolate wrapper, so it is easy to miss. Most people were not aware that that particular chocolate bar was anything different than normal chocolate bars and many parents were horrified to hear that it had a warning about high levels of caffeine on it.

The positioning of the advisory statement in this example was viewed as a ‘waste of time’ for consumers, and an effort on the part of the manufacturer to simply ‘cover his back’ rather than any legitimate concern for consumers. Because most people did not associate Guarana with caffeine, they felt that there was a real danger that children could be inadvertently allowed to have it when they really shouldn’t.

People from NSW appeared to be more aware than others about the potential health risks associated with the Viking Bar as there had been a recent Today Tonight TV story on this product.

Others mentioned concerns about drink products, such as Red Bull and other added-caffeine drinks – whilst they could not repeat the exact wording of the warning label, there was a moderate level of awareness of ‘risk’ associated with these products.
8 COUNTRY OF ORIGIN LABELS

Although not initially mentioned as being as important as other labels such as date marking, the ingredients list and the NIP (see 5.5), when the moderator raised the topic of country of origin labelling the majority of participants thought was very important. Quite a few said that it is the first thing they look at. However, the in-store survey data indicated that country of origin information was a significant consideration only for spreads and tinned food.

The qualitative findings regarding country of origin were consistent between Australia and New Zealand, where consumers remained ‘patriotic’ to their country of residence. For these reasons, whilst the following illustrative comments are attributed to Australian examples, the findings were consistent with those in the New Zealand groups.

Terms that consumers knew were used to refer to country of origin included “Australian or New Zealand made”, “Made in New Zealand”, “Australian made and owned”, “Product of New Zealand”, “Australian produce”, “local and imported ingredients”.

There are two main reasons for wanting to know country of origin information:
1. Being able to identify the source of the product; and
2. Supporting the local economy.

1. **Identifying the source of the product**

   It was felt that country of origin labelling was essential for the identification of the source of the product concerned. There were two main aspects to this:
   - Being able to choose better quality products (the issue of identifying high quality, desirable Canadian Salmon versus salmon from other locations which was regarded as “not proper salmon”, was mentioned in several groups as an example of this); and
   - Being able to avoid products from suspect locations. The examples given for this were buying canned fish products from an Asian country where the hygiene standards would not be as high as in Australia or New Zealand; the avoidance of meat products from the United Kingdom; or fish from locations known to be high in mercury. Food was viewed as being equally as ‘safe’ whether it was from Australia or New Zealand. [Note: Participants have no awareness that the issue of safety of imported products is addressed by other standards such as food product, food additive, contaminant and maximum residue limit standards as well as food labelling standards].
“some countries specialise in oils, cheeses and you think it’s got to be good because it’s come from that country. If it’s come from Pakistan than you might think ‘wait a minute!’” [under 35yrs, metropolitan, health conscious].

A few group participants also mentioned wanting the ability to be able to locate and buy authentic exotic food products, especially products from Asian countries (like noodles or condiments) instead of the inferior, substitute local product.

2. **Supporting the local economy.**

For some, buying Australian or New Zealand made meant that they were doing their bit for the economy. These people were quite committed to the idea of keeping the money and the jobs in Australia/New Zealand (therefore Australian/New Zealand owned is also an issue).

"One of the my reasons too, is to keep the money here in Australia and the jobs with our own people." [55+, metropolitan, special health needs]

Some obviously were not overly committed to Australian/New Zealand made but if the price and quality were similar would buy Australian/New Zealand made. Others bought solely on price with no thought about the country of origin, but for most this was seen as a question of need ie they could only afford the cheapest.

"We have to bear in mind the cost on a limited budget. So we look for Australian, but if there's a cheaper brand we have that." [55+, metropolitan, special health needs]

And for some, it was a question of being able to buy the best, regardless of its origin.

"And if we are going to buy Australian regardless, that means they can serve us absolute rubbish. We should be buying the best, no matter what country it comes from. Even if we pay more. Otherwise we end up with third grade stuff." [55+, metropolitan, special health needs]

In the Australian groups, discussions about purchasing Australian made evolved several times into discussions about the merit of an economic system that imports (either from overseas or from other States) agricultural products in preference to supporting local growers. This was particularly true in country groups, but these conversations were not limited to country locations.
There was a strong feeling amongst some that this was ‘wrong’ economic policy, and despite a minority expressing this opinion (at most one or two people in a group), the view was acknowledged as valid when it was expounded, suggesting that a lot of people had just not thought about the issue, but were in general agreement. A minority are prepared to pay a premium to support Australian or New Zealand industries, however, for others when there is a negative price implication, they are not interested in buying local.

In a few groups, this topic also lead to discussion about extending availability by importing items from other climatic regions.

"I think we've gone mad insisting that all things be available at all times of the year." [55+, metropolitan, special health needs]

There appears to be a belief that in order to extend the seasonal availability, things have to be ‘done’ to the food. Consequently the discussion often turned to discussions about the various ‘things’ that are done to food. (see later sections on genetically modified and irradiated foods)

In several of the Australian groups there was also some spontaneous discussion about the quality of (that "Australian icon") Dick Smith products compared to the imported (or overseas owned) varieties, and also 'Big Kev's' products. Obviously it was a matter of preference, with various beliefs about whether they tasted better or worse. However it was said that sometimes there is a cost premium in order to support local and that was a decided deterrent.

The packaging was sometimes said to be inadequate because it often did not tell you the actual place of origin of the product, when really this was of paramount importance for the reasons mentioned earlier.

"A lot of the packaging says country of origin and it's packaged somewhere else. So it's not really Australian it's imported. And then you don't get the information about where it's come from." [55+, metropolitan, special health needs]

"You need to know where it's come from. I won't buy dairy products or fish that have come from North of the equator." [55+, metropolitan, special health needs]
A call for standardisation

The main problem with country of origin labelling appears to be the many and varied forms they come in and the meaning of what they claim. There was a general perception that the labels were confusing.

It should be noted that there is currently more than one legislative instrument regulating country of origin labelling in Australia (including the Trade Practices Act Cth. 1974). It is mandatory for all food in Australia to have country of origin labels, however, there is a lack of standardisation regarding how this information is displayed. In New Zealand, only wine and cheeses are required to have country of origin labels.

Participants consistently sought clarification from the Moderator, asking questions such as Does made in Australia mean the goods inside the packages were made here? Or that the packaging was made here and the contents were from somewhere else? What about produced in Australia? Is that the same as made in Australia? People for whom it was a big issue (ie those who wanted to support the local economy) thought there should be some standardisation.

The clearest origin labels were said to be the examples presented in the group. 100% Australian made and Australian owned. However, it was stated that:

"... you don't often see that. Packed by, produced by, made in ... you've got all these different terminologies. They need to standardise."

At the time of writing, country of origin labelling requirements are under review. A joint Australia-New Zealand standard is being devised for inclusion in the new Food Standards Code. The review will consider standardisation issues and take into account other legislation in both countries which govern food labelling.

Imported products

The new Code requires that the supplier (packer, manufacturer, vendor or importer) details be on the product label, so that consumer feedback, product recalls etc can be handled. On many imported products however, the details of several ‘agents’ appear on the label.

In the focus groups most people felt they only needed to know the country where the information was from. However it was generally agreed that the importers details should also be on the label, so that one could contact the importer if there was a problem with the product.

People who were avid readers of nutrition information panels also felt that imported products should have to include a NIP in English. Their perception was that this is
rarely the case, and they were unaware that this is a legal requirement of both the old and new Codes.
9 DATE MARKING

All participants were aware of date marking and used it regularly, and almost all were aware that there were two different markings – 'best before' and 'use by'. Although participants used these terms interchangeably, most were aware or had a fair idea of the different applications for each, but awareness was less amongst people in the ‘less concerned about food labels’ groups.

Use by date marking was felt to be useful and important for all food products, and especially so for quickly perishable goods such as dairy foods, eggs, bread and meat. Everybody reported checking the use-by date on particular products (milk and yogurt were the most common example suggested). Some shoppers reported seeking out the ones with the longest use-by period:

"I always go to the back of the shelves because the dairy departments put the older things at the front where they're easier to reach, so they can get rid of them." [under 35, Country, less concerned]

Best before dates were generally understood as being used for less perishable foods, such as biscuits where there was no risk to health and safety if the food was consumed after the expiry date. However there was little appreciation that the nutritional quality of the food may also have declined after this date.

Reliability
It was agreed across all groups that date marks were generally reliable. Several people in each group confessed that they have eaten food that is past the use-by date indicated on the container. The discussion around this indicated that this was dependent on the type of food (ie milk) and what it looked and smelt like when they went to use it. In these cases, the odour or texture of the product was the deciding factor about usage. Others said they were very stringent with discarding things by the indicated use-by date because they "don't take risks with their health".

Several people mentioned having unwittingly purchased milk or yogurt that had perished before the indicated use-by date had arrived and this led to a discussion about storage conditions in transit. From these conversations emerged the dilemma of not knowing whether the product has been subject to the optimal storage conditions for preservation at all times, and the consensus is that in some cases it has probably not. Milk for example, might have been left in an ordinary storeroom for a period, when it should have been refrigerated, etc. or for less-perishable dry goods like biscuits, there were other concerns:

"Probably between the truck and the storage room it might sit around sometimes."
"Sometimes they have the date on and when you bring it home you open it up and it's been put in a moist spot or not been well-cared for, and it's off." [under 35, Country, less concerned]

As might be expected their utilisation of use-by dates did vary by food type, with most people paying particular attention for dairy products and other short-life products and the majority not paying overly much attention for less perishable things like biscuits, as a regular thing. If someone had purchased something that had been ‘off’ when they got home, then they tended to pay more attention with that particular item next time they purchased it. For example, someone had bought eggs and the majority of them had been ‘off’ so this meant that they were more meticulous the next time.

Some thought that many things, especially canned foods did not have best before dates and some products had manufacturers batch codes that could not be deciphered easily. This was a source of frustration for keen shoppers, who were unaware that the new Code only requires foods with a shelf life of less than two years to have a best before label. Of those who thought canned food was date marked in some form there was acknowledgment that things that have been canned last quite a lot longer than is usually indicated.

Most consumers use date marks in store, as they choose products off the shelf. A few, but not many, also used the date marks on non-perishable products, such as canned foods, to do pantry sorts at home:

“I find that when I’m cleaning I tend to go by the use by dates, because I might buy something and think ‘oh yes, I’ve got a recipe that I’m going to use that for’ and it’ll go to the back of the pantry, so I’m quite conscious of what your use by date is” [35-49yrs, country, conscientious].

Limitations of date marking

Some consumers had concerns that the current date marking system does not tell you how old a product is before you actually get to consume it. There was a mention in several of the groups that a date of manufacture should be used as well.
10 GENETICALLY MODIFIED, IRRADIATED AND NOVEL FOODS

It should be noted that the findings reflect the fact that the research was undertaken before the new standard (Standard 1.5.2 Food Produced using Gene Technology) came into effect on 7 December 2001.

The issue of genetically modified (GM) foods arose spontaneously in all but one of the WA groups, but only in one or two NSW groups. In contrast, salience of this issue in the NZ groups was very low. Where the issue did not arise of its own accord, the moderator raised it towards the end of the group discussions. Perceptions of and attitudes towards irradiated foods and novel foods were also discussed at this time.

Usually, reference to GM foods arose as part of people’s articulation of their right to know. Most consumers in the groups felt that they ‘absolutely’ have a right to know where their food comes from and what's been done to it (if they hadn't themselves thought it, they were in very strong agreement when someone stated this opinion). The issue of genetic modification also arose in the context of discussions about organic food, and soy products.

10.1. Genetically Modified Organisms (GMOs)

Across all participants there was only three or four who did not express any misgivings about the consumption of GMOs.

The topic is an area of concern for the vast majority of people in the groups. However, no-one categorically stated that they knew exactly what GM food is or how it is done, in fact the opposite is true. Most acknowledge that very little is understood about GMOs, however, there is a feeling that whatever it is, it is intrinsically bad. Most people disapprove of 'putting animal genes into vegetables', or otherwise meddling with the food supply, which is what GM food seemed to mean to them.

The issue is extremely emotive yet there is a great deal of misunderstanding and misinformation about genetic modification. When asked what GM food was, there were quite varied, with a lot of shrugging of shoulders and doubtful looks. It is clear that the majority of people do not really understand the process of genetic modification, even though there is a moderate level of awareness and high level of concern about it. Participants in WA seemed more technically informed:

"Basically they splice genes together. Mix 'n' match."

"Say two plants that are semi-compatible, they just cross them. It's one thing going down the road of saying we want tomatoes that are bigger or
redder, but when they go down the road of crossing [it with] something else .." [Under 35, country, less-concerned]

"They inject things like jellyfish DNA into strawberries to make them frost resistant."
"Mucking around with mother nature, that's what it is."
"Find strongest best yield. They've been doing it for years."
"It's going to cause cancer anyway."
"There should be heaps more information for the public." [Under 35, conscientious]

Those in NSW and New Zealand gave more vague, but equally as disparaging responses, either about the ‘idea of it’ or the ‘sound of it’:

I will not buy things that are genetically modified. I know there’s no big thing, that there isn’t any harm in it, but I just don’t like the idea" [35-49yrs, country, conscientious].

“Stay away from them as much as possible” [under 35yrs, metropolitan, health conscious].

This (GM) issue may have been particularly topical in WA, where there has been much recent publicity on the largest outbreak in Australia of VRE (vancomycin resistant Enterococcus). This organism’s resistance to antibiotics is said to be related in part to the excessive human use of antibiotics, and the use of antibiotics and the use of antibiotics and growth promotants in chicken and pigs. This is clearly seen by research participants to be a case in point of what happens when you meddle with the food supply, and reinforces negative reactions to and opinions about the genetic modification of food.

"It's like when they pump chickens full of … to fatten them." "
"Why do you think our children are so much bigger than us now then. We had the real thing and they're having the …."
"Then they wonder why we're getting fatter. You fatten the stock you fatten us as well." [Under 35, country, less-concerned]

"I don't like the thought of feeding my kids anything that has been genetically altered. Or suppose they decided to cross a pineapple with an orange and we'd have a doover-lackey. I don't like the thought of that either … a genetic disaster." [Under 35, country, less-concerned]
The degree of disapproval amongst group participants would suggest that there is widespread negative opinion in the wider community, with only about one participant in each group presenting the ‘we’ve been doing it for years anyway, cross-breeding for better yields, etc.’.

“I wonder what the big fuss is about because we’ve been eating genetically modified wheat in Australia since 1800s.” [55+, metropolitan, special health needs]

The concern over the use of GM food illustrates the level of general apprehension about the food supply and the perceived importance of maintaining stringent control over it.

Most people agreed that they would try to avoid consuming GM food (perhaps one, sometimes two in a group said they would probably try it).

“If it was natural, then OK. But if it was artificial I’d want to know what side effects will it have on me and my family.” [Under 35, conscientious]

“down the track you don’t know what they’re going to come up with, they’re gonna say ‘oh geez guys, we stuffed up, you’ve all got cancer’ . . .I’ll wait 30yrs, cos that’s how long it took them to find out smoking was bad for us” [under 35yrs, metropolitan, less concerned].

**Issues Related to Labelling of GM foods**

Consumers expressed an absolute right to know about any GMOs included in any products.

"if it has been it should be labelled to say what has been done to it and at what stage. We have a right to know."

"I should just know."

"I’d expect anything of importance to be on the panel at the back of the box / package." [Under 35, conscientious]

It was generally thought by most people that if a product was not labelled as ‘GMO-free’ it would not be genetically modified. That is, they would expect any product that contained genetically modified organisms to be clearly labelled that this was the case.

"If it’s not labelled, I’d assume that it’s not [got GMOs in it]." [Under 35, conscientious]
For those who were unsure on this issue, once it was clarified they were happy to operate under the assumption that buying GM label free meant buying ‘GM free’.

Participants’ attention was drawn to the photograph example of a product clearly displaying a GMO-free label, and their reactions sought. There were mixed views and preferences as to whether this kind of label was more helpful than not. It was at the point of seeing this example that the lines of demarcation between what is and is not readily identified as GM became blurred.

The effect of the term ‘GMO-free’ on purchases would need to be tested further. Although people did state that their expectation was that all GM foods would be labelled, and hence a “GMO-free” label would not influence them particularly, they also said that the nutrition claims on labels were very effective in prompting purchase. Nutrition claims (usually on the front of the package) were mostly of use when consumers wanted to make a quick decision about a product and did not want to spend hours reading the fine print on the labels. Hence, this research suggests that consumers might have the tendency to use the term GMO-free as a differentiator when purchasing, ie the alternative product might be the same but the GMO-free attribute could effectively swing the balance.

“because you don’t have time to stand there and see, you’re going to go for that [GMO-Free] one” [under 35yrs, metropolitan, less concerned].

“If I saw a pack that had ‘GM-Free’ on it that would make me check the other packets to see if they’ve got genetically modified on it” [under 35yrs, metropolitan, health conscious].

10.2. Irradiation of food

Another topic about which there was even less awareness, and a great deal of misunderstanding is the irradiation of food.

“That’s another thing they were saying about they were able to ‘nuke’ food or something and that makes it last longer on the shelf. And that’s scary too [as well as GMOs]”

“You don’t know whether it’s bad for you or not.”

“It could be a 100 years old but it’s been ‘nuked’.”

“Even if it was bad for you I don’t think they’d write on the package that it is.” [Under 35, country, less-concerned]

“Don’t know what it means.”

“Sounds like it might glow in the dark.”

“Sounds bad.” [Under 35, conscientious]
Others were even more resistant

“If they’ve [the products] been treated with irradiation – they’re not going to do this to me!”

“just the work irradiated is enough to put me off” [under 35yrs, metropolitan, health conscious].

When asked how they think irradiation might affect a product, it is obvious that there is extremely limited understanding about the process.

"No idea. They’d have to do something bad to it." [Under 35, country, less-concerned]

What's more, some people have the perception that it must lose its nutritional value if it's been 'nuked', even when they have been told that the process of irradiation is really just another form of 'wave' energy.

"Before it's been packaged and 'nuked' it would have a whole lot more nutrition than it does afterwards." [Under 35, country, less-concerned]

However, there is also a belief that any form of preservation affects the nutritional value of food, including the canning or freezing of vegetables.

The upshot is that the word 'irradiation' is almost synonymous with 'radiation' [also connoting 'nuclear'] and consequently everyone 'knows' it is bad for you.

The topic of irradiation (via whatever route the discussion leads there) in a couple of groups eventuated to a discussion about the extension of product shelf life by whatever means. Thus, a discussion about long-life milk occurred and it was evident from this that many people do not understand what has been done to the long-life milk to extend its shelf life. In fact a few people have the perception that the milk has been genetically modified.

However, the general consensus is that in order to extend the shelf-life of anything the food has to be modified in some way. It is the mode of modification that causes concern, and the negative connotations the word ‘irradiation’ conjures. The general consensus was that even though the word was alarming and off-putting, that it should be used on packaging rather than a symbol, again because people had a right to know what has been done to their food, and a symbol was seen as way of hiding this.
Participants were asked whether they thought there was food that has been irradiated already on the market, and the general response is that they didn't know.

"It's probably written there [on the label] and we don't even understand it." [Under 35, country, less-concerned]

Much would need to be done by government agencies to educate people about exactly what irradiation means, how irradiated foods compare safety-wise and nutritionally to similar products preserved in other ways, and what the potential benefits are before it would be acceptable to consumers at large.

10.3. Novel foods

Awareness of what is meant by a 'novel food' was non-existent. In each group, the Moderator gave a brief explanation and in many groups the Logical (or Pro-Logic) table spread was used as an example of a ‘novel’ food. When the concept of so called manufactured ingredients was explained, the idea was met with mixed feelings.

A good proportion of the ‘special needs’ and ‘health conscious’ groups were aware of the Logical product, a few used it themselves for it’s cholesterol lowering properties. The general criticism of this product was it’s high cost, and this was the main barrier to widespread use. Most did not know how the product offered the health benefits that it did, and had not really thought about the question until it was raised in the group discussion.

The same concerns and suspicions that arise about GM food and food preservation techniques also apply here. In one group the introduction of this topic developed very quickly into a discussion about the increased incidence of cancer.

"It might be good for your heart, but what's it doing to all your other organs?"

"The cancer rates are just going through the roof. Years ago it was so minimal. You didn't know anyone who had cancer." [Under 35, country, less-concerned]

There were also concerns about the detrimental impact of novel ingredients on the nutritional value of the product, and that consumers were not informed of these consequences on the label.
11 ORGANIC LABELLING

When the topic of organic food is mentioned most people say they are in favour of the notion of organic food and to them, this means that it is food that has been grown without chemicals (fertiliser or pesticide) or that it was ‘natural’ (ie. not artificial).

However, in many cases the use of organic food is related to cost, and convenience, with organic produce often seen to be more expensive and sometimes of lesser quality than food produced in the conventional way.

"I have to drop them sometimes [the free-range eggs] because if you cook it's 2 dozen just for the cooking and one dozen for the mixed grill or whatever you do on Sunday. So it's expensive." [Under 35, country, less-concerned]

"Organic fruit and vegetables are not in the shops or if they are they aren't labelled properly."

"Or you have to go to a speciality shop." [Under 35, country, less-concerned]

"Quality is often less and the wastage is higher." [55+, metropolitan, special health needs]

Therefore while there was no objection to the availability of organic foods, only the most health and natural-conscious people sought out and purchased them. Organic was mainly thought to refer to fresh fruits and vegetables, where product labelling was not an issue. If organic labelling was to be more widely introduced to mainstream products, then people would want to know that the use of this term was ‘certified’ or that manufacturers had to pass certain standards before they could use it.

Neither version of the Food Standards Code contains standards regarding organic production methods, certification processes or labelling requirements. There is currently a National Standard for Organic and Biodynamic Produce, however it is not a full regulation, but an industry code of practice.

Food safety

Any discussions about organic and GM usually evolve into concerns about food safety in general and reveal that consumers are anxious about the safety of the food they eat but are aware that they might not always be told about safety issues.

There are negative attitudes about the use of chemicals and sprays that are used on food or products for human consumption.
Almost all consumers want to know what has happened to the food they are eating before it gets to them, so that they can make ‘informed choices’. There is a great deal of awareness that mistakes have happened in the past with chemicals in food or therapeutic goods that have later proved detrimental to human health (lanolin from sheep wool was a case in point, where the chemicals that were spayed on sheep to prevent lice, etc were found in high dosages in the lanolin which was used in moisturisers for infants’ nappy rash).

"it’s like the lanolin … and then it’s amolin I think … for babies bottoms. And then they discovered that the chemicals in it … it was actually full of … is it DDT?? Or one of those ones … and they actually took it off the market. It was the pesticide they spray the wool with."

"It's a bit like the mecurachrome. We used that for years … and then they found that … the mercury in it … is dangerous for humans." [Under 35, country, less-concerned]

And underlying this there is a suspicion that they might not necessarily be told, or be aware of what it means even if they are told.

When asked whether they can trust what’s on the labels there is a feeling that they have to, there is no alternative. You have to be able to trust what's written there even if you don't understand it.

"But you don't know whether it is reliable unless you get sick. It's like you and the rice powder. You didn't know it was in there until later." [Under 35, country, less-concerned]

The point should be made however, that over-riding some people’s specific concerns about food safety and the modification of foods, was a general sense that Australia (and New Zealand) generally has a very safe food supply. Those who were less concerned about their food intake and about labelling issues were more inclined to adopt the following approach to food safety, genetic modification, and the general reliability of food labels:

“My theory is just because it says it’s genetically modified it’s not going to be on the supermarket shelf to kill me. So I’m willing to eat it. I don’t want to eat every single thing. At the same time, if there's something I like . . .everything in moderation they say and I . . . I have a couple of cigarettes a week, I have a few drinks a week . . .you should be able to make the choice as to whether or not you care. So that if you do, you want something that tells you that it’s ok or it's not . . . [for me] if it's on the shelf – this isn’t a back alley or Bali or anything. I'd like to think that it's been checked out” [under 35yrs, metropolitan, health conscious].
12 OTHER LABELS

12.1. Storage and usage instructions

There were mixed feelings about storage and usage instructions. Some paid attention to the instructions and some did not, depending on their level of knowledge in general.

Some of those with special health needs acknowledged that they did read the storage instructions:

"It's actually quite surprising what you read them" [55+, metropolitan, special health needs]

People tended to carry a lot of assumed storage knowledge, for example when you buy frozen peas or ice-cream one knew that they need to be stored in the freezer, however, the exact degree of refrigeration might not be noted.

Generally the usage instructions might be one time (the first time, for a new product) and then they would probably experiment another time.

"I look at a recipe and it gives me an idea and I adapt it to what I want."
"I might do the first time and then I'd do what I think." [55+, metropolitan, special health needs]

"Some of the generic products don't even have proper labels and instructions, or even ingredients." [55+, metropolitan, special health needs]

Some also read the directions for use instructions to get ideas of what to prepare for a meal, or what other ingredients they needed to buy – in that same shopping trip – to prepare the meal. Pre-prepared dinner meals, pasta and noodle sauces, packaged stir fry mixes and sauces were examples of this.

Required information that is not currently supplied (talking about unpacked goods):
"I'd like to know where it's come from. What area it's been grown in."
"I'd like to know what's been sprayed on it."
"How long the fish has been in the deli counter." [Under 35, country, less-concerned]
12.2. Un-Packaged Foods

It should be noted that the new GM & irradiated foods standards will require that where food is displayed for retail sale not in a package, information on its GM or irradiated status must be displayed on or in connection with that food. Organic labelling / production methods are not in the new Food Standards Code.

Little mention was made of un-packaged foods, despite considerable probing by the Moderator. Most people did not buy a lot of un-packaged food, other than fruits and vegetables.

In regards to fruits and vegetables, some participants commented that they would like to see label information about organic and GM available.

People who bought foods such as nuts and crisps from bulk bins at supermarkets or health food stores felt they had no need for ‘traditional’ or other label information such as GM on these products. Reasons for this were not probed in depth, however un-packaged foods were generally seen as lower in ‘safety risk’ priority than packaged foods because they could see their contents.

Food cooked and prepared in supermarkets – mainly bakery and meat items – was viewed as being adequately labelled. Most people could recall seeing the ingredient list, date mark, price and weight and this was all they needed to know. There was an greater implied level of ‘trust’ associated with these foods, either because they had been packaged in the store/supermarket, or because less had been ‘done’ or added to them during production. Many people commented on selected store-packaged mince and cuts of meat with a heartsmart label, which they looked for.
13 LEGIBILITY ISSUES

Opinions about the legibility and ‘ease of use’ of food labels was mixed. Those who use nutrition labels regularly generally had worked out how to interpret them, to the extent they needed to for themselves, and therefore felt that labels were generally easy to read.

However, there were numerous comments throughout the groups about the (small) size of the writing on the labels, particularly but not exclusively amongst older people who have poor eyesight, or who need glasses and may not have them with them while shopping:

"And the size of the writing. I've got excellent eyesight, but let's face it, when you're shopping do you really want to be scanning these things. Particularly if it's something they don't want you to read, so that will be extra tiny, like it's from Thailand." [under 35, country, less-concerned]

"I don't need glasses, but I find them impossible to read in the supermarket." [55+, metropolitan, special health needs]

Hence there was a feeling that manufacturers might be reluctant to have to display some of the information.

Despite some acknowledgment that the amount of space that was available depended on the size of the product / package, there was a feeling that the labels did not really have to be as small as they were, as there was a lot of space taken up with useless pieces of information.

As discussed earlier, the most mentioned factor that made the labels confusing was the numbers.

"The numbers." [under 35, country less-concerned]

"I've seen them, but they mean nothing to me."

"They're not in layman's terms."

"You need to be a scientist." [55+, metropolitan, special health needs]

"You need a degree to go shopping now" [Under 35, conscientious].

Not surprisingly, these views were more prevalent amongst those people who were ‘less concerned’ about food labels and nutrition information.
Layout

When the question of layout was asked, there was agreement that a principal display panel where everything was all together was infinitely more desirable than having pieces of information spread all over the label.

It makes things easier for consumers to have everything in the one place and in the same format, instead of having to turn the product over and over to try to find the relevant information. A standard position on the box / label was also suggested by someone to make the comparison between brands easier.

Most consumers also agreed that the positioning of 'risk' information in one location was also a sound idea, as it would be easier to find, but also may draw people’s attention to it more if it were (collectively) larger.

Whilst there was general favour for a principle panel of information, the benefits of the location of nutritional claims and country of origin information on the front of the package, in terms of facilitating quick product selection, should not be dismissed.

There were also consistent requests to make the text in labels as large as possible (for people with reading difficulties) because 'if you leave your reading glasses home, you’re stuffed'. There was a feeling that a lot of the space was wasted and that important labelling aspects were squashed up into unbelievably small sections when it wasn't really necessary to do this if they rearranged the package.

"Could you ask them to make the writing slightly bigger?"

They should standardise between manufacturers." [55+, metropolitan, special health needs]
14 NON-LABEL SOURCES OF INFORMATION

As mentioned earlier in the report, some people use food labels as a good source of information about food. However, the greater determinants of people’s food information, and in particular nutrition information (in order of apparent influence) are:

- **Television** - news and current affairs programs provided more ‘revealing’ information (product exposes, food warnings etc) where as lifestyle programs and cooking shows, often featuring media celebrities, provided more ‘factual’ information, particularly with a health focus.

- Television advertising was seen to be a reliable and trustworthy source of food information. Several people commented on the use of sports stars and other celebrities who advertised products — their endorsement was seen to add credibility to the information and/or the product:
  
  “ever since like whatshername came on the TV and said ‘natural source of energy and she puts it [Nutella] everywhere and she eats it all the time, I thought ‘great’, I’m going to do it too’

  “yeah, Dawn Fraser and other swimmers doing lots of healthy ads now” [under 35yrs, metropolitan, less concerned].

  Others mentioned Brandpower commercials, or product infomercials hosted by doctors and medical professionals:

  "I didn’t know that most 2 minute noodles are pre-fried until I saw the Brandpower ad which talked about the air-dried version. Since then I’ve been buying them." [Under 35, conscientious]

- **Newspapers** and scientific journals, however these more ‘informational’ sources were met with some cynicism — “you can read another article in a different paper the next week that says the opposite”.

- **Books** (eg. Calorie Counter) and **magazines**;

- **Other mums**, friends and family;

- In the **supermarket** – aisle advertisements, shelf leaflets, taste testings;

- **School** nutrition classes (younger people);

- **Doctors and Dietitians** in cases where there was a health issue that needed attention, such as high blood pressure or coeliac disease.

The fact that people do gather their nutrition information from a wide range of **incomplete** sources contributes to their misunderstanding about how to read and interpret nutrition labelling. Often their problems using nutrition labels are as much about trying to make sense of conflicting or incorrect nutrition theory as it is about interpreting the label itself.
15 THE ROLE OF THE GOVERNMENT

**Good versus bad governance**

It was clear through observation of each of the groups that there was a dichotomous attitude towards the governance of food labelling. There is a feeling that the amorphous "government" stringently controls what goes into our food, etc and there is a lot of faith that the food we eat is subject to the strictest tests to ensure it is safe for.

"*We've got higher health standards in Australia. You know that if something's made here it's under strict regulations*"

This was true both in Australia and New Zealand.

People also have faith that the labels will be fairly accurate and reliable - as long as the governing body continues to check the products to ensure compliance (there are some negative attitudes towards manufacturers and the belief they will only do the right thing if forced). In this way there is a belief in 'good' governance.

"*I think they must be pretty reliable.*"

"*If they weren't you'd see a lot of cases of negligence on the news.*"

"*Yes, someone would have to be checking.* [Under 35, conscientious]

"*We don't know how reliable they are do we?*

“*You need a regulating body*”

“*Can't let them [manufacturers] have free reign*” [35-49yrs, country, conscientious]

“*If you don't monitor these people [manufacturers] they won't tell you anything*” [50+, metropolitan, special needs].

On the other hand there is also a belief that 'they' don't tell you everything, and that they already do things to the food without you knowing it, and that you have little control over it. At times it was unclear whether 'they', who were referred to repeatedly throughout the discussions, were the renegade manufacturers or a more general body of power, meaning the government.

There is also a feeling amongst a few that the government (in Australia) is a lot less careful than the US with food products, and a couple of times stories were told about cases where products were banned in the US because of health concerns, but still allowed to be sold here.

"*I'd be curious to know if it's banned in other countries, because I know that some things are banned in America but not here.*"
"Why is it that our government approves when others don't." [Under 35, conscientious]

Whilst this point was not made in the New Zealand groups, there certainly did exist in all groups a level of cynicism and scepticism about being able to trust the government completely, about anything!. However, most people were able to separate their cynical views about the ‘Government’ from a governing authority which had responsibility for food safety standards and labelling.

**Awareness of ANZFA**

In New Zealand, about a third of most groups had heard of ANZFA. At the time of the study there had been a radio news item on progress towards common food standards for New Zealand and Australia.

In the Australian groups virtually no-one knew the name of the responsible agency spontaneously, and when ANZFA was mentioned, no-one had ever heard of it before. However, all were aware that there was some kind of governing ("government") body that looks after such things, and there was a great deal of support for the existence of such an organisation. In this regard, there was strong endorsement in Australia, and general endorsement in New Zealand for the ‘government’ to undertake such a role. Participants thought it essential that there be a ‘watchdog’ organisation to keep the manufacturers honest, and ensure safety standards were set and maintained.

“It's good for them to be doing it"

“And it's making us more aware and giving us a bit of control over choices"

“I think it's a good idea” [50+, metropolitan, special needs].

Positive endorsement of the government’s involvement also extended to the commissioning of this research, which was viewed in a very positive light:

“Making them aware how we feel and not just going and implementing something that's not what people expect” [35-39yrs, country, conscientious]

Almost all of the people the Australian groups expressed their pleasure at being asked to give input to the development of food labels and some thought that such research was well overdue. In this way ANZFA was seen to be taking a responsible and pro-active role to food label development.
16 IN-STORE QUANTITATIVE SURVEY RESULTS

16.1. Selection of respondents and attention paid to labels

The observation of product selection behaviour and selection of respondents for interviewing utilised a specific methodology that does not involve representative sampling of consumers. The percentage of consumers interviewed in-store out of the total number of shoppers in each store at the time of the survey is also unknown. The objective of this part of the research was to provide a quantitative indication of the salience and use of labels in product selection, at the point of sale.

Shoppers were observed by the interviewer whilst they were selecting grocery items from seven different packaged food types (meat; bakery/bread; spreads; biscuits; breakfast cereals; tinned foods; or snack foods).

Initially, shoppers’ selection behaviour was recorded as one of five different behaviours:
1. Took a product without hesitation;
2. Hesitated for a few seconds and clearly looked at the packaging of at least 1 product, but did not select a product;
3. Hesitated for a few seconds, clearly looked at the packaging of at least one product then selected it;
4. Handled one product, read information on the pack before selecting it; and
5. Handled more than one product, read information on the packs to compare products before selecting one of them.

The primary objective of recording selection behaviour was to identify a shopper’s eligibility for interviewing about their product selection. As a secondary objective, interviewers also recorded the selection behaviour of ineligible shoppers (ie. those who paid no attention to labels during observation). However, the interviewers’ ability to accurately record the behaviour of ineligible shoppers was at times compromised by their need to pursue eligible shoppers (to meet interview targets within the allocated interview hours available), as well by different store environments and traffic flow. Different interviewers had different experiences and therefore we do not feel that the data for the ineligible shopper selection behaviour is sufficiently representative. In the interests of best practice research, we have chosen to exclude the data for this group of observed shoppers.

The results we present are therefore of interviewed shoppers, which indicates the range of attention paid to labels by people who used them to select a product (ie. the primary target group for this research). These findings are summarised below.

In total n=256 were observed and interviewed. Of these:
Thirty eight percent (38%) hesitated for a few seconds, clearly looked at the packaging of at least one product then selected it; 
One in five (20%) handled one product, read information on the pack before selecting it; and
Thirty six percent (36%) handled more than one product, read information on the packs to compare products before selecting one of them.

There were also fourteen people (5%) for whom this information was not recorded, however, as they could not have been interviewed without qualifying with one of the three behaviours above, they have been retained in the sample.

16.2. Demographics / sample structure

Sex
The majority of shoppers interviewed were females (80%, 20% male).

Education
Half (51%) of the sample had undertaken some tertiary education; 18% had undertaken some technical / trade / apprenticeship education; 29% had completed secondary school; and 2% had completed primary education.

The sample shows a bias towards higher educated people, which could be a reflection of the store locations provided by cooperating supermarkets:
- Coles Booragoon and Woolworths Karrinyup in WA;
- Coles Maryland Chatswood, Woolworths Frenchs Forrest and Parramatta in NSW;
- Countdown Pakaranga in Aukland and Thorndon New World in Wellington, New Zealand.

Age
Around a quarter of the sample were aged less than 34 years (23%), 37% were aged 35-49; 23% were aged 50-65 and 17% were aged more than 65.

Accompanied versus unaccompanied shopping
The vast majority of interviewed shoppers were shopping alone (76%; 78% of females and 69% of males). Ten percent of female shoppers were accompanied by a male adult, as were 4% of male shoppers. Eighteen percent of male shoppers were accompanied by a female, as were 4% of female shoppers. Four percent of male shoppers were accompanied by more than one adult. Only 6% of all shoppers were accompanied by children.
Interaction about purchase decisions

Of those shoppers who were accompanied (24% of the sample), two-fifths (41%) had no discussion at all about the product purchased; a further two-fifths (40%) had some brief discussion and only one in ten (10%) had extensive discussion.

16.3. Product categories

Shoppers were interviewed regarding the selection of food products from one of seven categories in the store. Interviews were distributed across these categories as follows:

Meat 5%
Bread 4%
Spreads 17%
Biscuits 19%
Cereals 19%
Tinned Foods 17%
Snack Foods 18%

Product categories were selected to ensure a range of different product types and labels were included in the survey. Given the limited sample size, it was not possible to include all product categories in the study. Some categories, such as dairy foods were not able to be included. The qualitative results indicate that people’s use of specific types of labels differs between product categories and thus the results in this quantitative survey are only indicative of label use amongst the product categories listed above.

16.4. Salience of labels

At the beginning of the interview, shoppers were asked a series of questions to uncover their ‘top of mind’ awareness of different labels. Firstly they were asked what they were thinking about as they considered the product in question. This open-ended question is a measure of the salience of food label information during the decision process i.e. the extent to which label information is ‘top of mind’.

The results indicate that nutrition related information is as top of mind as price/value for money issues and brand names during product contemplation.
Sub-group variations

By food type:

- Shoppers were significantly more likely to be thinking about:
  - Nutrition related health issues when considering snack foods and breakfast cereals (57% and 51% respectively, versus 25% for tinned foods);
  - The fat content when purchasing snack foods than any of the other food types (41%; compared to 24% for breakfast cereals, and 14% for biscuits);
  - the fibre content when purchasing breakfast cereals (10%; compared to 2% for tinned foods, biscuits and snack foods);
  - the iron content when purchasing breakfast cereals (6%; versus 0% for all other food types);
  - the protein content when purchasing tinned foods (5%; versus 0% for all other food types);
  - whether it’s natural for tinned foods (9%; 5% for spreads compared to 0% for other food types);
  - taste or preferences are more of an issue for snack foods (43% compared to 30% for biscuits; and 20% for breakfast cereals), with whether husband-children will like it of most concern in the purchase of biscuits (22%; 20% for snack foods; 8% for breakfast cereals);
  - country of origin issues are more likely to be a concern for tinned foods (25% in total compared to 14% for spreads; 6% for biscuits).

Interestingly, no significant differences between food categories were detected for sugar content.

Interviewers were required to translate what shoppers had said in the first open-ended question into a list of pre-coded specific labelling items. Shoppers were then asked specifically about any information they were looking for (other than that mentioned previously). This question was intended as a second unprompted measure of awareness of label information. Those who had already said something that related to the information on the label were asked "Were you looking for anything else?" and those who had not said anything about particular label items were asked "Were you looking for any particular information on the pack?".

Results are shown in Table 16.4b over the page for items first mentioned, second item mentioned and then for all mentions. This gives an indication of what labelling elements are of most salience at the time. Responses of more than 3% are shown.

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3 The base sizes for some of the food types are, in many cases, too small for reliable comparison.
Table 16.4b  Thoughts about various labelling items

Q2 Were you looking for any particular information on the pack?

<table>
<thead>
<tr>
<th></th>
<th>FIRST MENTIONS</th>
<th>SECOND MENTIONS</th>
<th>ALL MENTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>BASE: ALL RESPONDENTS WHO HAD EXAMINED LABELS BEFORE CHOOSING</td>
<td>256</td>
<td>256</td>
<td>256</td>
</tr>
<tr>
<td>Specific brand name</td>
<td>%</td>
<td>10</td>
<td>42</td>
</tr>
<tr>
<td>Price</td>
<td>17%</td>
<td>14</td>
<td>40</td>
</tr>
<tr>
<td>A specific ingredient</td>
<td>15%</td>
<td>12</td>
<td>31</td>
</tr>
<tr>
<td>The ingredients (general)</td>
<td>14%</td>
<td>16</td>
<td>37</td>
</tr>
<tr>
<td>A nutrition claim</td>
<td>7%</td>
<td>5</td>
<td>20</td>
</tr>
<tr>
<td>Specific nutritional information</td>
<td>6%</td>
<td>8</td>
<td>23</td>
</tr>
<tr>
<td>Packaging / weight / size</td>
<td>5%</td>
<td>3</td>
<td>13</td>
</tr>
<tr>
<td>Country of origin</td>
<td>3%</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>The nutrition panel</td>
<td>3%</td>
<td>3</td>
<td>9</td>
</tr>
<tr>
<td>Date marking</td>
<td>2%</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>The percentage of a specific ingredient</td>
<td>1%</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Prepare/cook/store instructions</td>
<td>1%</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Nothing</td>
<td>1%</td>
<td>17</td>
<td>1</td>
</tr>
</tbody>
</table>

* Adds to more than 100% due to multiple responses

Of those things mentioned first, specific brand name is mentioned most often, with almost a quarter (23%) saying this. The next three most salient items were price, specific ingredients and then general ingredients.

Items mentioned second comprise general ingredients; then price, specific ingredients and specific brand names.

Across all mentions, levels are high because multiple responses are allowed. However, in general, there were four things that a third or more of respondents mentioned at this point:

- Specific brand name (42%);
- Price (40%);
- The ingredients (general) (37%); and
- A specific ingredient (31%).

These results build on those found earlier. Brand and price, whilst each in their own right are potentially the primary drivers of product choice, are mentioned by an equal proportion of shoppers as ingredient and nutrition information (combined). In short, these four items are the most salient considerations at the point of produce selection.
The label items that were considered varied by food type, with the major variations as follows:

- The major label items considered for breakfast cereals are: specific brand names (22%) and price mentioned first (20%); and the ingredients (general) (20%) mentioned second. Over all mentions (first, second and other mentions), the main considerations are the ingredients (general) (41%); specific brand name (39%); and price (39%). The nutrition panel was mentioned significantly more for breakfast cereals (24%) than it was for most other food types (24%), and a nutrition claim was also frequently mentioned overall (29%).

- For biscuits, the first mentioned items were specific brand names and price (28% each); the ingredients (general) (24%), was second. Across all mentions, specific brand was nominated by 52% of shoppers and price by 46%.

- For tinned foods, the primary item mentioned first was the specific brand name (30%), and then a specific ingredient (23%); a specific ingredient was also mentioned second by 16%, as were the ingredients (general). Across all mentions country of origin featured as an issue of particular concern for tinned food, a significantly higher proportion of shoppers mentioning it for tinned food than for any other food type (25%).

- With regard to snack foods, the primary first mentioned item is a specific ingredient (26%) which across all mentions rises to (48%). The nutrition claim also features highly for this food type, with 28% mentioning, which is almost as high as it is for breakfast cereals (29%).

- In relation to spreads the most mentioned item is specific brand name (25%) which across all mentions rises to (45%). Packaging / weight / size is also a main consideration for this food type, with 23% mentioning overall.

Major consistent sub-group variations:

- When the shopper is accompanied by other adults the label item that is discussed most is the ingredients (general) (50%). This is true for first, second and all mentions. When shopping alone, the major considerations are specific brand names (44%) and price (39%).

This finding has important implications for a future quantitative methodology approach. (See Recommendations Section 17).

There were limited variations by age, education or income.
16.5. Prompted recall of label use

Shoppers were then read out a list of label items and asked whether they had looked at that particular item on the pack they had examined. Results are shown in Table 16.5. This question (and the following) are prompted measures of peoples’ use of label information.

Table 16.5 Label items looked at on that particular product – 'Yes' responses only

<table>
<thead>
<tr>
<th>Q3a I'm interested in what information is on the pack you looked at? I will read out some specific types of information and please tell me whether you looked at it.</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>BASE: ALL RESPONDENTS</td>
<td>256</td>
</tr>
<tr>
<td>The brand name</td>
<td>72</td>
</tr>
<tr>
<td>The price</td>
<td>60</td>
</tr>
<tr>
<td>The ingredients list</td>
<td>49</td>
</tr>
<tr>
<td>A nutrition claim</td>
<td>40</td>
</tr>
<tr>
<td>The nutrition panel</td>
<td>34</td>
</tr>
<tr>
<td>The use-by / best before date</td>
<td>33</td>
</tr>
<tr>
<td>Name of manufacturer</td>
<td>31</td>
</tr>
<tr>
<td>The percentage of a specific ingredient</td>
<td>30</td>
</tr>
<tr>
<td>Country of origin</td>
<td>29</td>
</tr>
<tr>
<td>An advisory statement</td>
<td>16</td>
</tr>
<tr>
<td>A specific food additive</td>
<td>12</td>
</tr>
<tr>
<td>Prepare/cook/store instructions</td>
<td>9</td>
</tr>
<tr>
<td>If it is genetically modified</td>
<td>8</td>
</tr>
<tr>
<td>For a specific allergen / allergies info</td>
<td>6</td>
</tr>
</tbody>
</table>

* Adds to more than 100% due to multiple responses

These results are fairly consistent with the answers to the previous question, where the *brand name*, the *price* and the *ingredient list* were said to be the major points considered. If combined, the use of a nutrition claim or the nutrition information panel was as prevalent as the brand name, and more so than price information.

Sub-group analysis

- **By age:** The propensity to consider *brand name* increased with *age*, such that those aged over 50 were significantly more likely than those aged 34 or under to consider the brand (76% versus 61% respectively). This was also true for the *use-by / best by date* (42% versus 14%) and the *country of origin* (39% versus 14%).

- **By location:** In most instances, NSW results were more similar to NZ results than to WA’s. The *ingredient list* was significantly more likely to be
considered by those in NSW or NZ than those in WA (55% NSW and 53% NZ versus 25% WA). This was also true of the *percentages of specific items* (35% NSW and 32% NZ versus 9% WA); the *nutrition panel* (36% NSW and 43% NZ versus 18% WA). The *name of manufacturer* was more of a concern in WA (41% WA versus 26% NSW and 38% NZ). There was significantly more concern in NZ about *food additives* than there was in Australia (21% versus 10%). It should be noted however that the WA and NZ comparisons are derived from small bases (n=44 and n=53 respectively).

- **By income:** Not surprisingly, those in the lowest income group (less than $40,000) were significantly more likely to consider the *price* than were the other income groups (72% <$40,000 versus 54% all other groups combined).
- **By gender:** There were no notable variations.
- **By food type**4:
  - The *brand name* was most considered for *biscuits* (78%) as was the *price* (65%);
  - The *nutrition panel* was considered more for *breakfast cereals* than for most other food types (53%);
  - The *ingredient list*, the *country of origin* and the *preparation / cooking / storage instructions* were considered more for *tinned foods* (64%, 43% and 18% respectively) than for most other foods.
  - *Country of origin* was also a significant consideration for *spreads* (45%), as was a *specific additive* (20%).
  - The *percentage of a specific ingredient* was considered for *snack foods* more than for any other food type (52%), and somewhat surprisingly, so were *nutrition claims* (54%);
  - The *use-by / best by date* was considered almost equally across all foods from 20% for *breakfast cereals* to 34% for *tinned foods*. It should be noted that dairy products and eggs were not included in the survey. The qualitative research indicated that these are two product categories where use by dates are viewed as most relevant;
  - *Advisory statements* were considered largely for *tinned foods* and *snack foods* (30% and 26% respectively).

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4 Only spreads, biscuits, breakfast cereals, tinned foods and snack foods are commented on as the sample sizes for meat and bakery / bread are too small for reliable comparison.
16.6. Relative influence of different labels

Shoppers were asked to what degree the label items they had looked at had influenced their purchase decision for the product in question. Results of this question are shown in Table 16.6 below.

Table 16.6 Effect of label items on purchase decision

<table>
<thead>
<tr>
<th>Effect of label items on Purchase decision</th>
<th>A lot</th>
<th>A little</th>
<th>Not at all</th>
</tr>
</thead>
<tbody>
<tr>
<td>BASE: ALL RESPONDENTS</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>The percentage of a specific ingredient [n=76]</td>
<td>91</td>
<td>9</td>
<td>-</td>
</tr>
<tr>
<td>The ingredients list [n=126]</td>
<td>86</td>
<td>13</td>
<td>-</td>
</tr>
<tr>
<td>The nutrition panel [n=88]</td>
<td>82</td>
<td>16</td>
<td>-</td>
</tr>
<tr>
<td>A nutrition claim [n=102]</td>
<td>81</td>
<td>17</td>
<td>1</td>
</tr>
<tr>
<td>The use-by / best before date [n=84]</td>
<td>77</td>
<td>20</td>
<td>1</td>
</tr>
<tr>
<td>Country of origin [n=73]</td>
<td>71</td>
<td>27</td>
<td>1</td>
</tr>
<tr>
<td>If it is genetically modified [n=20]*</td>
<td>70</td>
<td>25</td>
<td>-</td>
</tr>
<tr>
<td>For a specific allergen / allergies info [n=15]*</td>
<td>67</td>
<td>33</td>
<td>-</td>
</tr>
<tr>
<td>Prepare/cook/store instructions [n=22]*</td>
<td>64</td>
<td>36</td>
<td>-</td>
</tr>
<tr>
<td>The price [n=154]</td>
<td>62</td>
<td>34</td>
<td>3</td>
</tr>
<tr>
<td>A specific food additive [n=31]*</td>
<td>58</td>
<td>32</td>
<td>6</td>
</tr>
<tr>
<td>Name of manufacturer [n=79]</td>
<td>58</td>
<td>32</td>
<td>8</td>
</tr>
<tr>
<td>The brand name [n=185]</td>
<td>56</td>
<td>35</td>
<td>8</td>
</tr>
<tr>
<td>An advisory statement [n=42]*</td>
<td>48</td>
<td>52</td>
<td>-</td>
</tr>
</tbody>
</table>

Note: base sizes shown for each label item [ ]. Note that some items (in particular those marked *) have a very small base.
Note: may not add to 100% because non-responses are not shown.

As can be seen from the table, the majority of people who looked at the particular label item say they were influenced by it a lot. Interestingly however, while price and brand name were most top of mind during product selection, their degree of influence, relative to ingredient and nutrition information (when it was used) as well as many other label types is less.

**Name of manufacturer** and **brand name** were said to be the labels with the least influence on purchase, however with only 8% saying they were *not at all* influential, this was not to a great degree.

It should be noted that although 91% of those who said they looked at the percentage of a specific ingredient were influenced ‘a lot’ by it, it is not assumed that this claim refers to percentage labelling. In retrospect, shoppers
interpretation of this statement (which was read out by the interviewer) could well have referred to percentages listed in the nutrition information panel.

Sub-group analysis
There were no notable variations by sub-groups.

Finally, shoppers were asked to indicate the one piece of information that was of most influence in their purchase decision. Again, the results are very consistent:

- brand name (21%),
- price (18%),
- ingredients information 23% (ingredient list 15%, percentage of a specific ingredient 8%)
- nutrition information 24% (nutrition claim 14%, NIP 10%)
- country of origin (7%)
- use by date (3%)
- advisory statement (3%)
- specific food additive (1%)
- name of manufacturer (1%)

These results support the trends indicated in qualitative research. Brand name, price, ingredient and nutrition information play an inter-related role in determining product choice, with ingredient and nutrition information being almost as significant (overall) as brand or price, depending on the product and individual.

Sub-group analysis

- By location:
  - Shoppers in WA were significantly more influenced by brand name than were either NSW or NZ (43%; 18% and 9% respectively), whilst shoppers in NSW were significantly more influenced by the ingredients list (19% versus 5% in WA and 9% in NZ).
  - NZ and NSW shoppers were equally influenced by nutrition claims (17% and 16%, compared to 2% of West Australians), and in addition, NZ shoppers were significantly more influenced by the nutrition panel than were their Australian counterparts (22% versus 8% respectively).
  - In NSW shoppers were significantly more influenced by the percentage of specific ingredients (11% versus 0% for WA and 4% in NZ).

It should be noted however that the WA and NZ comparisons are derived from small bases (n=44 and n=53 respectively).

- By gender: men were more influenced by price than were females (29% versus 15% respectively).

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5 As noted in the table the reduced base sizes for this question reduced the ability to make comparisons across sub-groups.
By food type:
- Purchasers of snack foods were significantly more influenced by nutrition claims (35%) than were those purchasing all other food types;
- Again, the nutrition panel was considered to be most influential in the selection of breakfast cereals than for most other food types (20%); and
- Purchasers of tinned food considered country of origin to be more influential (18%) for this than for other food types.

16.7. Use of nutrition information

Those shoppers who mentioned the nutrition panel were asked what piece of nutrition information they were looking for in particular. Results are shown in Table 16.7

<table>
<thead>
<tr>
<th>Q3d You mentioned that you looked at the nutrition panel. What nutrition information specifically were you looking for?</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>BASE: THOSE WHO HAD LOOKED AT NUTRITION PANEL 83</td>
<td></td>
</tr>
<tr>
<td>Fat (unspecified) % 70</td>
<td></td>
</tr>
<tr>
<td>Sugar 52</td>
<td></td>
</tr>
<tr>
<td>Saturated fat 25</td>
<td></td>
</tr>
<tr>
<td>Sodium / salt 20</td>
<td></td>
</tr>
<tr>
<td>Energy (kilojoules / calories) 15</td>
<td></td>
</tr>
<tr>
<td>Carbohydrate 8</td>
<td></td>
</tr>
<tr>
<td>Protein 6</td>
<td></td>
</tr>
<tr>
<td>No additives / preservatives 3</td>
<td></td>
</tr>
<tr>
<td>Vitamins and minerals 3</td>
<td></td>
</tr>
<tr>
<td>Fibre 3</td>
<td></td>
</tr>
<tr>
<td>Wheat / gluten free 2</td>
<td></td>
</tr>
<tr>
<td>Heart Foundation tick 1</td>
<td></td>
</tr>
<tr>
<td>Don't know / can't remember 1</td>
<td></td>
</tr>
</tbody>
</table>

These results confirm the qualitative research findings. Most people seek to clarify the fat, sugar and salt content of a product when they are assessing the nutritional value of a product. Fat (either all fats or unsaturated fats) is checked most often (70%).

The next most checked ingredient was sugar, with half (52%) specifying this. A quarter (25%) specified saturated fat.

Sub-group analysis
There were no notable differences by sub-group.
17 CONCLUSIONS AND RECOMMENDATIONS

The qualitative study has been effective in establishing:

- important labelling issues for consumers;
- an understanding of how and why various labels are used;
- a basis for the design of subsequent quantitative research, including the development of information objectives, as well as language and methodology design issues that should be considered.

The research has also amassed considerable information about the design and content of food labels, which could have potentially significant implications for future marketing and consumer education strategies. We are aware that the provision of recommendations regarding label development or policy were not primarily the objective of this project, and therefore provide this feedback as a secondary outcome. We structure our recommendations under the following headings, and address each in turn:

1. Recommendations for quantitative research;
2. Considerations for label design and the overall marketing of food labelling.

17.1. Recommendations for Quantitative Research

The research findings point to the clear need for a quantitative follow-up survey, as was first mooted as Part B of the research in the project brief. We base this recommendation on the following:

1. Whilst the qualitative findings have provided a significant amount of information and understanding, they are not representative of the views of all Australians or New Zealanders and the results cannot be extrapolated to the wider community; and therefore
2. The results of this study cannot be used to benchmark current views and behaviour and thus evaluate the impact and implementation of the new joint code.
3. The need to segment consumers by determining the influences, attitudes and behaviours within different segments, and to then prioritise segments (ie. target audiences) for later marketing and education strategies, as well as to more efficiently monitor changes in consumer knowledge and behaviour over time.
The **information objectives** for the survey will be extensive, and should include, but not be limited to:

- Awareness and understanding of different food labels (or a prioritised list of labels):
  - recognition/recall of each;
  - what is meant by key label terms and language;
  - how the label is used;
  - overall interpretation of what each label is for.

- Use of different food labels:
  - Context in which labels are used (setting; home, in store; who shop with, shopping needs, different products);
  - Attitudinal measures of disposition towards reading labels, the usefulness of labels and trust/reliability issues;
  - Use/behaviour – frequency of use, for which products; and behaviours and influences that facilitate label use.

- Demographic and life stage variables:
  - Age
  - Gender
  - SES (income and education)
  - Presence of children, and family size
  - Health needs and health consciousness

At this stage of the research we offer our **preliminary** thoughts with regards to the **methodological and design issues** for such a survey, which we expect to be further informed by and refined at the conclusion of the stakeholder stage of the project.

However the use of different data collection techniques throughout the qualitative and in-store components of the research clearly point to the value of using face to face interviewing techniques. We would recommend that the quantitative research design consider a **hybrid approach**, such as door to door interviewing, supplemented with a self-completion component of data collection. Such an approach would need to utilise:

- **carefully designed interactive interviewing techniques**, including the use of stimulus materials;

- **well trained interviewers** with a detailed and intimate understanding of the different food labels and the complex context in which they are used by consumers; and

- **carefully worded questions and scale measures** that are sufficiently sensitive to establish benchmarks across the vastly different attitudinal and behavioural consumer segments that exist, and then detect changes
over time, particularly in the context of marketing and education initiatives that ANZFA may undertake.

Whilst we feel that telephone interviewing may be suitable to achieve some of the research objectives, and its value at this point is not ruled out, it would not be suitable for all research objectives.

17.2. Considerations for Label Design and the Overall Marketing of Food Labelling

It is clear from the research that there is no clear or common understanding of how to use and interpret many food labels (nutrition information panel, percentage labelling, food additives numbering system, country of origin labels), and other labels (nutrition claims, ingredients list) are used in the absence of lack of confidence in or actual understanding of this label information.

The following points are a summary of improvements suggested by research participants and could be considered for label design. It is noted that not all suggestions are feasible, given the constraints of the new Code:

- Standardisation of the positioning and location of label information, so that information that is used together is positioned together (eg. NIP and ingredients list; all ‘risk’ information kept together).
- Standardisation of the layout/format of the NIP (as well as the seven nutrients) that enhance consumers ability to read and distinguish between nutrients – particularly with regard to the nutrient break down and sub-headings;
- Make the text as large as possible, particularly for warning statements;
- Use of ‘plain’ English (salt instead of sodium) and prioritisation of this language over more ‘technical’ terms such as thiamin, riboflavin, niacin etc which do not mean much to most people, and currently cause them to deem the nutrition label as ‘irrelevant’ or ‘too hard’.
- Standardisation and then promotion of what is meant by Australian Made vs Australian Owned etc in the context of what people want to know (identifying the product source, supporting the local economy);
- As a standard, organise and promote food additive numbers in a way that groups additives together, taking into consideration those additives that people might want to avoid versus those that enhance the product and are unlikely to be harmful (eg. colours (110, 123); preservatives (211), flavour enhancer (621);
- The inclusion of date marks on all tinned food.
Percentage labelling has significant potential for consumers, but the extent to which consumers use it will depend heavily on how much they are informed about its presence and how it can be useful for them in comparing products. There is considerable mileage for the development of goodwill that would be extended to ANZFA and other enforcement agencies e.g States, Territories, NZ (or ‘the government’) if the use of food labels was made more accessible and ‘user friendly’ for consumes. As percentage labelling is a new requirement of the new Code and this research was conducted prior to its mandated enforcement, ANZFA may need to revisit this issue with consumers in 2-3 years time.

The following suggestions are made without the knowledge of ANZFA’s interest in or ability to undertake a more extensive consumer marketing and education role.

- There is considerable opportunity for ANZFA in conjunction with other government agencies to raise its visibility in the community, both as the independent regulator and ‘watch dog’ for manufacturers, as well as the most credible information source about food labels, how to use and interpret them. It is clear that many consumers are still searching for a single source of credible information about food, nutrition and food labels. In the absence of any such source, they rely on piece-meal information they glean from a variety of media sources.

- This role would need to be pro-active on the part of ANZFA – it is clear that most consumers will not seek out this information themselves (unless they clearly know where to find it, and it is readily accessible to them) but will instead continue to build misconceptions and frustrations about food labelling in its absence.

- The development of a marketing and consumer education strategy, and the prioritisation of those strategies in the context of the implementation of the new Food Standards Code, should be informed by the segmentation of consumers in the quantitative survey. Detailed recommendations in this area could be made from such a survey.
APPENDIX A
DISCUSSION GUIDE
APPENDIX B
IN-STORE QUESTIONNAIRE
APPENDIX C
GROUP TASK SHEETS
APPENDIX D
PHOTOGRAPHS