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# 1 Front of Pack Food Labels and dietary choice determinants: what works and for whom?<sup>1</sup>

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## 3 Abstract

4  
5 The introduction of a consistent Front of Pack food labelling (FoPL) system is at the forefront of the food  
6 policy debate. Information nutrition is seen as an effective tool to help fight increasing levels of obesity and  
7 its associated co-morbidities, such as cancer and cardiovascular disease, for which unhealthy diet represent a  
8 major preventable risk factor. This paper explores the influence of FoPL format on consumer food choices  
9 using data from a discrete choice experiment carried out in Northern Ireland in 2011. Respondents made  
10 choices between three weekly food baskets, of which two were experimentally designed and the third  
11 represented their specific current choice (or status-quo basket). Four nutritional attributes were used: (i) total  
12 fat, (ii) saturated fat, (iii) salt, and (iv) sugar. Baskets were portrayed at different price levels to elicit the  
13 sensitivity of choice to price and to derive marginal willingness to pay estimates. Results from random utility  
14 models with various forms of heterogeneity reveal a significant association between preference classes and  
15 healthy food baskets and the manner in which the nutritional information is described. We find that the  
16 influence of the FoPL format used to convey nutritional information combines with different socio-  
17 demographic covariates to determine membership to preference classes. A sensitivity analysis is used to  
18 validate the preferred model and response sensitivity to potential policy levers, such as a realistic appreciation  
19 of self-body image and the habit of reading labels.  
20

21 Key words: food choice, dietary habits, discrete choice experiment, Front of Pack food labels

## 22 1. Introduction

23 The UK and Ireland, along with Luxemburg and Finland, are the four EU countries in the top 10 nations in the  
24 world for prevalence of obesity (WHO, 2015). In the UK, according to the “*cost of living and food survey*”  
25 the average adult body weight increased by 5.1kg between 1993 and 2014, when it reached 77.5 kg (The  
26 Economist 2016, August 13<sup>th</sup>). A high prevalence of overweight people is associated with a high incidence of  
27 a variety of serious non-transmissible diseases, such as many types of cancer, diabetes and cardiovascular  
28 conditions. Because older people have a higher incidence of overweight, having a larger share of aging  
29 population—as it happens in many developed countries—is expected to exacerbate the problem. Recent  
30 estimates for the National Health Service expenditures, for example, suggest that the cost of direct treatment  
31 for diabetes is projected to balloon from the 10% of the NHS budget today to 17% over the next 25 years  
32 (NHS, 2012).  
33

34 The growth of human body weight is not only a developed world problem, but it is a global phenomenon, as  
35 shown in a recent study by the NCD Risk Factor Collaboration (AAVV, 2016, Lancet). This study used over  
36 19 million body weight and height measurements to compute body mass index (BMI) across 186 countries.  
37 Data was collected over the period 1975-2014 and shows that if current trends continue “*by 2025, global  
38 obesity prevalence will reach 18% in men and surpass 21% in women; severe obesity will surpass 6% in men  
39 and 9% in women*”.

40  
41 Consumers’ nutritional choices play a causative role in being overweight. Coupled with consumer education,  
42 lowering the cost of information and interpretation of the nutritional consequences of food choices is seen by  
43 many as an essential component of any policy directed to stem the current trend. In the UK official statistics  
44 (HSCIC 2015) predict the current obesity trend to be continuing, increasing with age, more prevalent in men  
45 than women and in lower-middle social classes. These statistics show that the causes are to be found in  
46 excessive energy intake, decreased physical activity and more widespread sedentary lifestyles; all of which are  
47 further exacerbated by a generally unbalanced diet (especially outside the London area), at least when

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48 compared to the government recommended “eat-well plate” guidelines. All this reflects negatively on the  
49 national health care bill, which is already extremely high. Widespread preventive action is now urgently  
50 needed. Recent projections report the cost of diabetes alone to be over 15% of the NHS budget by 2030. While  
51 market-based instruments, such as taxes on calorie-rich foods, are still being debated in the UK context,  
52 effective information of consumers to nudge them towards healthier food choices remains the dominant policy  
53 tool.

54

55 To revert this tendency and in order to encourage healthier eating, the UK food and health authorities have  
56 embarked in a joint effort to promote nutritional information via adequate front of pack labels (FoPLs). The  
57 information content of back of pack labels have been the subject of much regulation and studies, but the switch  
58 in emphasis to placing nutrition information on Front of Pack Labels is mostly due to the perceived necessity  
59 to more forcefully attract the consumer’s attention to the health consequences of food choice. In the USA in  
60 2011, FoPLs recommendations were published by the Institute of Medicine and also by the Grocery  
61 Manufacturers Association and Food Marketing Institute, who started their own labelling scheme. In October  
62 2012, the UK FSA announced a voluntary scheme for FoPLs, which was to be put in place by 2014.

63

64 Since December 2016 nutritional information have become mandatory on back of pack labels of pre-packed  
65 food in the UK. Such information may be repeated in the FoPLs, but this is still a voluntary initiative, which  
66 complements the already mandatory labelling information required by the EU Food Information Consumer  
67 regulations 1924/2006 and 1169/2011. These, however, are compulsory only for back of the pack labels. To  
68 promote adoption, a guidance document for creating FoPLs for pre-packed food sold by retail outlets was  
69 published in June 2013 by the Department of Health. This was collated following several studies conducted  
70 between 2001 and 2013 designed to understand what particular form of FoP labelling is best fit for purpose.  
71 The document is part of a series of policy actions taken to encourage voluntary adoption by the UK food  
72 industry. Such actions started in 2014, and it is hence still too early to draw conclusions on their effects on  
73 health or weight change in the population. Will these voluntary initiatives affect dietary habits and, for  
74 example, decrease obesity and other diet-based non-communicable diseases? Will the evidence constitute a  
75 legitimate base for compulsory policy in the UK and possibly elsewhere? Epidemiological studies will provide  
76 an answer to such important questions in the years to come. But some preliminary evidence can be gleaned  
77 from patterns of choices using experimental choice design, as done in the present study.

78

79 A whole body of research from nutritionists dictates the nutritional categories that provide salient dietary  
80 information to consumers, such as sugar, fat, saturated fat and salt contents of each food package relative to  
81 the guideline daily amounts (GDA). Several experimental cognitive studies in food consumer research have  
82 explored the communication effectiveness of labels. Results have supported the use of specific types of FoPL,  
83 on the basis of their ability to attract consumers’ visual attention better than others. For example, by comparing  
84 mandated nutritional information (the nutritional Facts Panel, NFP) in the US and FoP nutritional labels,  
85 Becker *et al.* (2015) found that FoPL were attended more often and earlier and that the use of colour increased  
86 attention to labels.

87 Consensus seem to indicate that FoPL should have chromatic elements and it might work best if combined  
88 with other succinct recognizable signals, such as health certificates (see Bialkova *et al.* 2013, Hersey *et al.*  
89 2013). While the effect of socio-economic covariates have also been studied, these focussed on the use of  
90 nutrition information from food labels during meal planning (Nayga 1996, 1997) and on the use of food label  
91 while shopping, at home or when comparing brands when shopping (Nayga et al 1998). In general, these  
92 studies showed the importance of education, along with other factors. However, much fewer studies have tried  
93 to explore the differences with which these information types on FoPLs affect the degree of healthy choices  
94 by consumers segmented by age, perceived weight, education, marginal utility of income and other consumer  
95 characteristics relevant for the evaluation of social impact of policy. Yet, this information seems crucial in the  
96 overall evaluation of a mandatory FoPL policy, or even of a voluntary labelling initiative. With this study we  
97 try to fill this research gap.

98

99 In the wait of clearly interpretable clinical data, which can be persuasively used to drive and design the food  
100 policy for FoPLs in the UK and elsewhere, some interim insight can be derived from hypothetical food choice  
101 studies. In this paper we present results of a survey using discrete choice experiment data, which extends the  
102 findings reported in the original Food Standard Agency 2012 report, the results of which were used to issue  
103 guidelines by the 2013 Department of Health. In fact, the original report documented extensively the degree

104 of comprehension of alternative FoPLs (text only, traffic light systems, GDAs and mixtures thereof), but fell  
105 short of establishing the link to healthier food choice by those who are most in need to make them. Our study  
106 provides results that corroborate the original report by systematically linking FoPL types to specific consumer  
107 profiles, which are associated to healthier food choice. Results further show that factors such as self-image  
108 perception, BMI and age are differentially associated with preference groups. While the main shortcoming of  
109 this study is that it relies on hypothetical food choices, the results are sufficiently strong to motivate further  
110 research on real food choice behaviour of alternative FoPLs thereby informing evidence based policy design.

111  
112 The rest of the paper is articulated as follows. Section 2 reports on the state of knowledge and on the underlying  
113 research in FoPL, highlighting the research gaps that our study fulfils, with an emphasis on defining the broader  
114 research strategy enabling the design of an effective labelling policy. Section 3 reports the survey design, the  
115 data and the methods of analysis used in our study. We use a mixed logit design that layers discrete and  
116 continuous mixing and explore 4 separate FoPLs. Section 4 provides a thorough discussion of the findings,  
117 while Section 5 concludes by indicating the way forward in research design to inform policy actions.  
118

## 119 **2. Front of Pack Nutritional Food Labelling: a summary of relevant research**

120 Several literature reviews on the issue exist, both for the US and the EU (Balcombe *et al.* 2010, Hawley *et al.*  
121 2012, Soederberg Miller and Cassady 2015). Therefore the following review is quite selective. Starting from  
122 the seminal work by Asam and Bucklin (1973), the use of food nutritional labels by consumer has been the  
123 focus of literally hundreds of consumer studies. Interestingly, a review of six very early studies in 1977 (Jacoby  
124 *et al.*) concluded that “*most consumer neither acquire such information when making a purchase decision nor*  
125 *comprehend most nutrition information once they receive it*”. In response to this and several other studies that  
126 showed very low use (as low as 20% in the US) of nutritional labels by consumers, Klopp and MacDonald  
127 (1981) asked why this should be the case to a sample of Wisconsin shoppers and found that less educated  
128 consumers tended to make significant lower use of labels and spend shorter time in food planning. So did  
129 consumers with lower self-assessment of nutrition knowledge.

130 Over thirty years after the 1977 study by Jacoby *et al.*, Nørgaard and Brunsø (2009) reached similar  
131 conclusions in a study of families; they state that: “*Parents seldom use nutritional information when they seem*  
132 *to sense an overflow of information, information that is too technical and a problematic presentation of energy*  
133 *distribution, and/or when their health consciousness is limited*”, suggesting that “*parents [are] more likely to*  
134 *prefer food labels with concise information and more visual aspects*”. Such need for simplification had also  
135 emerged from a review of 58 studies conducted between 2003-2006 in the EU-15 by Gruner and Wills (2007).  
136 Given the importance of visualization of nutritional elements to guide healthy diets, and the necessity to  
137 provide such information to consumers in a succinct, but clearly evident manner, interventions have been  
138 devised to place these on FoPLs, which is in the immediate field of vision, rather than relegating them to the  
139 back of the pack labels.  
140

141 In 2012, according to the UK Food Agency Standard (FSA), approximately 80% of pre-packed processed food  
142 products sold carried nutrition information on FoPLs. Previous work by Malam *et al.* (2009) found that UK  
143 consumers were to some degree confused and distracted by the diversity of existing FoPLs, due to the  
144 difference of interpretive elements. In an analysis of the information impact of such elements they concluded  
145 that using a text scale (high, medium, low) had the greatest impact on comprehension. They further  
146 recommended that combining text with traffic light colour coding and percent of guideline daily amounts (%  
147 GDAs) enabled more consumers to make healthier food choices, partly because the normative signal was more  
148 reinforced by traffic light colours. The study did not elaborate as to whether or not those in most need to correct  
149 their diets were differently affected by the various FoPLs. Based on this and other studies, in March 2010 the  
150 FSA board encouraged food businesses to use all three elements to signal nutritional amounts: (1) colours from  
151 the traffic light system (red, amber and green) or TLS, (2) text signals (high, medium or low) or TXT and (3)  
152 percentage Guideline Daily Amounts (% GDAs) in order to enable UK consumers to interpret nutritional  
153 information (FSA 2010). Furthermore, the board highlighted that the FSA does not support FoPLs using only  
154 % GDAs, but that these should be combined with either traffic light colours or text, and should ideally have

155 all three elements. Finally, consumer seem to value FoPLs, as indicated by results from a willingness to pay  
156 survey across EU countries shows (Gregori *et al.* 2015).

157 The two most common FoPL elements currently adopted in the UK market place are GDAs—developed by  
158 the food industry—and TLS, developed by the FSA. But combinations of the two styles are commonplace and  
159 often include text signals too. These two most common labelling formats are discussed further below, but it is  
160 worth noting that there are other initiatives more specifically directed at fighting the problem of an increasingly  
161 overweight population. For example, the “activity equivalent calorie labelling” recently promoted by the Royal  
162 Society for Public Health (RSPH), which claim that nutrition information signalled by using equivalence of  
163 physical activities are best understood by most.

#### 164 *i) Traffic Light System (TLS Format)*

165 Independent research by the FSA has investigated FoPL extensively and produced a large body of literature  
166 (see Synovate, 2005). Following reviews published in 2005, the FSA concluded the Traffic Light System  
167 (TLS) to be the most effective FoPL label to enable consumers to make informed dietary choices about food  
168 products. The TLS is a FoPL which informs and warns consumers on the nutritional content of processed foods  
169 indicating the amount of calories, fat, saturated fat, salt and sugar of processed foods per 100gr by assigning  
170 colour-coded levels: high content is something to be warned about, and hence is red; medium content is less  
171 worrisome and it is amber; and low content is the way to go, and hence is green.

172 Early studies based on eye-tracking experiments (Jones and Richardson 2007) showed TLS to be relatively  
173 more effective at attracting attention. Some literature (Hodgings *et al.* 2009) classify this system as a semi-  
174 directive system, as it provides behavioural normative content rather than neutral information as opposed to  
175 nutritional table of content, for example. TLS labels have been shown to perform well in attracting attention,  
176 even when consumers have limited time and have specific goals (van Herpen and van Trijp 2011). Recent  
177 neurological investigation using MRI scan on subjects during choice with different FoPLs provided evidence  
178 that “*salient traffic light labels influence the valuation of food products by [activating] a [brain] region*  
179 *implicated in endogenous and exogenous self-control and its connectivity*” (Enax *et al.* 2015).

180 Other research supports the use of colour indicators. For example, research by Feunekes *et al.* (2008) support  
181 findings by the FSA in that the multiple TLS was the easiest FoPL to comprehend. Epstein *et al.* (1998) also  
182 provide evidence that diets based on the TLS can help reduce levels of obesity. Andrews *et al.* (2011) found  
183 that the combination of TLS-GDA is more desirable in terms of food choice outcomes than the single summary  
184 indicator “Smart choices” used in the US. Thorndike *et al.* (2012) found that a simple colour coded labelling  
185 intervention increased sales of healthy items and decreased those of unhealthy ones. More recently, Crosetto  
186 *et al.* (2016) found that GDA performs better than TLS when subjects do not face time constraints, but when  
187 time is limited TLS outperforms GDA with an increasing number of nutritional goals.

188 However, there exists conflicting evidence suggesting that the TLS is not the most accurate or desirable  
189 information format to convey nutrient levels in food (Grunert and Willis 2007; Hodgkins *et al.* 2012). The  
190 objection is linked to the red colour being potentially interpreted as “no go” signal, which might lead to  
191 systematic under-supply of some important nutrient groups, such as important fat categories.

#### 192 *ii) Percentage Guideline Daily Amounts (GDA Format)*

193 The GDA scheme typically shows the fat, saturated fat, sugar and salt per portion of the food and indicates the  
194 percentage the portion contributes to GDA. It is important to note that GDAs are a guide, not a target, to how  
195 much energy and key nutrients the average healthy person needs in order to achieve a balanced diet. They are  
196 based on the ‘average’ adult. However, physically active people will have higher requirements, and smaller  
197 people, like children, will have lower ones. Note that similar acronyms exist. For example, RDAs  
198 (recommended daily amounts) were set by the Department of Health in 1979 for nutritional requirements for  
199 different population subgroups. In 1991 the Department of Health replaced these with DRVs (dietary reference  
200 values), which was a comprehensive term covering criteria for nutritional and energy intakes. DRVs are only  
201 to be used as guidelines and are for healthy people. DRVs are commonly reported as recommended daily  
202 intakes or recommended daily amounts. Current nutrient recommendations are given in FSA Nutrient and food  
203 based guidelines for the UK (2007).

204

## 205 2.1 Studies on the effect of FoP food labels and food choice

206 Discrete choice experiments (DCEs) have a recent successful history in evaluating consumer preferences for  
207 food labels and their content. Gracia *et al.* (2009) employ DCE data and found that consumers were willing to  
208 pay more for a nutritional facts panel than a simple nutritional claim. Balcombe *et al.* (2010, 2015) design a  
209 DCE based on the TLS to examine the relationship between nutritional food labels (with colour indicating  
210 level of nutritional content) and price. Their results seem to indicate that utility is improved more when moving  
211 from red to amber (i.e. when remedying potential loss) than when moving from amber to green (i.e. when  
212 achieving potential health gains), which suggests a form of gain-loss asymmetry.

213 Empirical studies of effects of FoPLs on choice while monitoring eye-tracking have also shown that “*Adding*  
214 *both health marks and traffic light colours (v. traffic lights only) to numeric nutritional information produces*  
215 *favourable outcomes from the perspective of public health*” (Koenigstorfer *et al.* 2013), thereby providing  
216 grounds for the study of interaction effects on choice, which we undertake here. This is important because  
217 there is a tenuous line between striking the right balance with a synergistic combination of displays and over-  
218 cluttering, as shown in visual search studies (Bialkova *et al.*, 2013).  
219

220 Aschemann-Witzel *et al.* (2013) also studied the effect on healthy food choices of nutritional label format, but  
221 in the context of size of varied choice set in Poland and Germany. Their results show that colour coding is  
222 more effective than simple text in inducing healthy choices when the choice set is large. Consumers perceived  
223 that colour coding was enabling them to make healthier food choices when asked to do so, but label format  
224 had no effect when consumers were asked to choose only on the basis of their personal preferences.  
225

226 Effects of coloured and monochrome GDA labels on healthy choices were investigated in an eye-tracking  
227 study by Bialkova *et al.* (2014). They found an effect of nutrition labels on choice via consumer attention,  
228 which was attracted most by colour GDA. The effect of monochrome GDA FoPLs on consumer choice has  
229 recently been assessed (Boztug *et al.* 2015) using scanner data. The study concludes that “*the GDA label*  
230 *introduction reduces attraction of unhealthier products in terms of market share but does not affect product*  
231 *choice behaviour*”, as a consequence the authors “*agree that GDA labels are generally insufficient to adjust*  
232 *consumer behaviour towards healthier alternatives*”.

233 In closing this review we briefly touch upon studies on the segmentation of food consumers into types and  
234 their reaction to alternative nutritional label information. While it is well-established in the literature that  
235 antecedent volition (i.e. pre-established goals) (Swait 2014a, 2014b) is a natural driver of the influence of  
236 additional information on choice, relatively few studies have looked at latent segments especially in food  
237 choice. Visschers *et al.* (2013) conducted a cluster analysis of nutrition information use from nutrition tables  
238 in labels in relation to consumer’s health and nutrition interest. They identify 4 segments, but conclude  
239 pessimistically with regards to the outlook with which improvement of nutrition labels is likely to stimulate  
240 nutrition information usage among consumer types.  
241

242 From our literature review the issues of interaction effects between label formats that can be jointly used, their  
243 effect on latent consumer segments and the implicit health value of food baskets all emerge as research topics  
244 worthy of further investigation. Our study was designed to cast some light on these issues by an adequate use  
245 of DCEs data.  
246

## 247 3. Survey and Data

248 In a DCE respondents are faced with the task of choosing between several experimentally designed  
249 alternatives. Using the recorded choices and the experimental design, then analysts retrieve the underlying  
250 preference structure using adequate quantitative theories and statistical models. This method was chosen for  
251 this study as it most closely replicates real food choices in a hypothetical setting. In a grocery shop consumers  
252 continually compare and evaluate food items, their selected choice then form their overall diet.

### 253 3.1. Survey details

254 The development of the DCE survey instrument followed a lengthy, systematic process, consistent with the  
255 recommendations from the literature. The various stages involved a literature review, expert consultation,  
256 focus group research and pilot study, prior to fielding the main questionnaire to collect the final data.

257 We held three focus groups to derive an understanding of FoPLs in consumer food choice. Early versions of  
258 the questionnaire were tested in further focus groups and individual interviews. This was followed by an in-  
259 depth test during a pilot study of 32 respondents. Information was collected on respondents' attitudes towards  
260 food and on their personal characteristics to help explain responses to the choice experiment exercise.

261 In order to elicit the effect of price on improved labelling, price was also a descriptor of the alternatives  
262 evaluated in each choice task, which were presented in terms of two differently priced baskets of weekly food  
263 shopping. Nutritional contents were conveyed in terms of four types of front of pack nutritional food labels.  
264 The two alternatives were to be compared with the current individual-specific typical weekly food basket (e.g.  
265 the status-quo) self-reported by each respondent. The use of an individual-specific status-quo alternative  
266 follows recommendations from recent studies (e.g. Marsh *et al.*, 2011; Boeri *et al.*, 2013; Grisolia *et al.* 2013,  
267 2015). Since baseline diets differ across respondents, it would be arbitrary to present all respondents with an  
268 identical status quo. The individual elicitation of the status-quo food basket was achieved by presenting  
269 respondents with a visual aid based on example food cards. Such cards were designed based on a protocol  
270 developed with assistance from experts in food nutrition and psychology. A systematic approach was taken to  
271 ensure consistency and accuracy. Every effort was made to ensure that the images depicted on the cards  
272 portrayed a representative sample to respondents. Extensive testing was carried out in individual interviews  
273 and further tests during the formal pilot study. Prior to fielding the main survey, example food cards were  
274 checked by health professionals (these included registered NHS dieticians and nutritionists working in an  
275 academic capacity) to ensure satisfactory representation of foods and nutritional levels from an expert  
276 perspective. An example food card was created for each nutritional attribute. Each card displayed a range of  
277 foods in categories of high, medium and low according to the nutritional content of food products. See the  
278 appendix for examples.

### 279 3.2 Sample and survey

280 The sampling frame included all residents of Northern Ireland. The sample was drawn using stratified quota  
281 sampling using wards within electoral districts in Northern Ireland. Specifically, a two stage sampling process  
282 was used. Stage one involved a random selection of wards in Northern Ireland within geographic areas. These  
283 were selected so as to provide both urban and rural sub-samples. Samples drawn from each ward were  
284 proportional to the overall population in the ward. Stage two involved a quota sample within each of the  
285 selected wards. Quotas were assigned according to age, gender, socio-economic classification so as to match  
286 known demographics based on Census data and mid-year population estimates from the Northern Ireland  
287 Statistics and Research Agency. The survey was administered between December 2010 and March 2011,  
288 using face-to-face computer assisted personal interviews (CAPI). It was conducted by professionally trained  
289 and experienced market-research interviewers.

### 290 3.3 Alternatives and choice tasks

291 The discrete choice experiment consisted of a panel of 16 choice tasks per respondent. In the choice tasks  
292 alternatives were presented as “your current basket” (status quo), “Food Basket A” or “Food Basket B”. Given  
293 our concern with an individual's whole diet, we found it desirable to frame the alternatives in terms of “your  
294 weekly food basket”. Findings from focus groups and individual interviews confirmed that presenting the  
295 alternatives in terms of a weekly shopping basket was easily conceptualised by respondents. Indeed, the  
296 concept of a basket has been used successfully in previous food choice studies (Balcombe *et al.*, 2010). The  
297 Integrated Household Survey (IHS) includes a section known as the Living Costs and Food (LCF), which  
298 records weekly consumption and expenditure for each item of food in the average UK food basket (DEFRA  
299 2010). Previous data from DEFRA surveys has been used in economic analysis regarding food choice. For



300 example, Pretty *et al.*, (2005) carried out an assessment of the full cost of the weekly food basket in relation to  
301 farm costs and food miles.

### 302 3.4 Food Basket Attributes

303 Selection of relevant attributes and alternatives is important when designing a DCE survey, however, care  
304 should be taken to reduce the cognitive burden on respondents (Powe *et al.*, 2005). Attributes selection in our  
305 study was based on expert consultations, literature review and findings from our focus groups. Apart from the  
306 price attribute, four nutritional attributes were selected, specifically: sugar, fat, saturated fat and salt. The  
307 attributes and their levels are described in table 1.

308 The four nutrition attributes had common reasons for inclusion in the survey. These include the following: (i)  
309 all are typically reported on front of pack nutritional food labels; (ii) there are associated health implications  
310 with a diet exceeding recommended daily amounts in any one, some or all of these nutritional attributes; (iii)  
311 healthy eating advice from the UK government groups these nutrients together—saturated fat, fat, salt and  
312 sugar—stating that all healthy individuals should consume a diet that contains less of them; (iv) all can be used  
313 as indicators for taste, which typically has a strong influence on food choice.

314 The price attribute was specified within each alternative, presented as a percentage increase, decrease or no  
315 change to the respondent's defined current weekly food basket. Percentage changes were 50% and 20% from  
316 the price of the current food basket in each direction. The pre-testing results indicated that respondents' found  
317 this to be acceptable in terms of both payment vehicle and amount. The price for weekly food baskets in the  
318 choice experiment was informed by the report by the UK office of national statistics on family expenditures  
319 (Family Spending 2009).

### 320 3.5 Experimental Design

321 As with this study, many choice experiment applications are carried out to provide sound information on which  
322 policy can be predicated. It follows that great care must be taken at each stage to ensure the validity of estimates  
323 generated from the choice data. In practice, our number of attributes and their levels result in a full factorial  
324 with too large a number of choice set combinations to have them all evaluated by respondents, let alone to  
325 have sufficient replicates to assess taste heterogeneity across respondents. So, an experimental design is used  
326 to assign specific fractions of the full factorial to each respondent in a manner that all the effects with a-priori  
327 relevance are identified. Apart from identification, the design typically generates an allocation plan such that  
328 the choice data ensure an estimate of a behavioural model which is statistically efficient (Ferrini and Scarpa  
329 2007). That is, a-priori the design produces estimates with minimum variance. However, several other criteria  
330 aside from efficiency are possible (see, for example Rose and Scarpa 2008).

331 Efficient experimental designs have come to the fore in recent years. Bayesian efficient designs, as employed  
332 in this study, can be used to accommodate uncertainty associated with assigning prior parameter values.  
333 Various criteria are used to determine the efficiency of the design.  $D_b$  error minimization is the most common  
334 criteria and the one used in our design. In a Bayesian efficient design the efficiency of a design is evaluated  
335 over a number of different draws taken from the prior parameter distributions assumed in generating the design  
336 (Ferrini and Scarpa, 2007; Scarpa *et al.*, 2007; Bliemer *et al.*, 2008). The efficient experimental design was  
337 generated using the software package Ngene.

### 338 3.6 Nutritional label treatments

339 To uncover the framing effects created by the four nutritional label formats we used a random split sample  
340 approach with the following treatments: (i) *FoP label with text only* (TXT) (high, medium or low). For  
341 example, if a basket of goods is labelled “high” for the respective nutrient (fat, saturated fat, salt or sugar) this  
342 means that it is considered to have high levels of the respective nutrient per 100gr servings; “high” is  
343 interpreted as most unhealthy while “low” is considered the healthiest, with “medium” in between; (ii) *FoP*  
344 *label using multiple traffic lights* (MTL) adds a chromatic signal (red for high, amber for medium and green  
345 for low) to the text signal for each nutrients in the basket; (iii) *FoP label using Guideline Daily Amount* (GDA)

346 rather than traffic light colours, this format adds to the text the GDA percentages; (iv) *Integrated FOP label*  
 347 *format* (HYB). Both traffic light colours and GDA percentages are combined into a hybrid signal for each  
 348 nutrient, on top of the text. Examples of food baskets are reported in Figure 1.

349

### 350 3.6 Socio-economics covariates

351 A number of socio-economic variables were used as covariates in the estimation process. The first two are  
 352 age and gender. These were followed by two additional variables related to individual body mass index  
 353 (BMI) and self-body image. BMI was calculated based on data each respondent provided in terms height and  
 354 weight. As it concerns self-body perception, respondents were asked the following question: “*When you*  
 355 *think of your ideal body weight, would you say you are currently: a lot over, a little over, about ideal, a little*  
 356 *under, a lot under.*” The last question investigates the level of engagement in terms of acquiring information;  
 357 respondents were asked to answer the following question “*How often do you read these front of pack food*  
 358 *labels when you are buying food: never, rarely, occasionally, usually, always, don’t know/can’t remember*”.

359

## 360 4. Methods

361 The aim of the study is to account for the role of FoPL on food basket choice while accounting for the presence  
 362 of differences across respondents in both taste (preference classes) and ability to discriminate between  
 363 alternatives (scale classes). To explore both preference heterogeneity and varying levels of multiplicative  
 364 correlation we use both forms of mixing, continuous and discrete and implement a latent class random  
 365 parameter logit model (LC-RPL). To our knowledge, this is the first study attempting to do so. We denote  
 366 preference classes with  $c$  and multiplicative correlation classes with  $s$ . Conditional on belonging to a specific  
 367  $c,s$ -combination, a consumer’s chooses the favorite food basket  $i$  from a set of  $j \in J$  mutually exclusive  
 368 alternatives. The probability of this choice is characterized by different features and levels of nutritional  
 369 information displayed on the FoPL. Nutritional information reports high, intermediate and low levels of  
 370 respectively fat, sugar, saturated fat and salt, and are completed by the cost of the food basket. Each choice  
 371 task consists of three food baskets. Respondents are each asked to choose their favourite food basket in a panel  
 372 of  $T$  experimentally designed choice tasks, each denoted by  $t \in T$ . Following the conventional random utility  
 373 (RU) maximization approach (Thurstone 1927, Manski 1977), each respondent  $n$  is assumed to select the  
 374 utility-maximizing food basket from the set  $t$ . For a respondent  $n$  with a particular combination of preference-  
 375 class  $c$  and scale-class  $s$ , the indirect utility of alternative  $i$  in choice task  $t$  is denoted by  $V(\lambda_s, \beta_c, \mathbf{x}_{nit})$ , and the  
 376 overall total utility includes a random component  $\varepsilon$  i.i.d. Gumbel:

$$377 U_{nit|gc} = V(\lambda_s, \beta_c, \mathbf{x}_{nit|gc}) + \varepsilon_{nit|sc}, \quad (1)$$

378 where  $\mathbf{x}_{nit|sc}$  is a vector of five attributes, described by their respective levels, which describe the food basket;  
 379  $\beta_c$  is a vector of preference-class utility coefficients to be estimated and  $\lambda_s$  is the scale-class specific value for  
 380 the scale parameter of the Gumbel error. There has been a debate addressing the potential confounding between  
 381 scale and taste heterogeneity (Hess and Rose, 2012). Since the use of the term “scale parameter” has become  
 382 established in the literature, we also use it here, but warn the reader to interpret it as a factor able to capture  
 383 multiplicative correlation, and direct to the recent clarification note by Hess and Train (2017) for further details  
 384 on its correct interpretation.

385 Because of the assumption on the stochastic component, the probability for a consumer  $n$  belonging to class  
 386 combination  $s,c$  of choosing alternative  $i$  over alternative  $j$  in the choice set  $t$  is given by a multinomial logit  
 387 model (McFadden 1974):

$$388 \Pr_{nit|sc} = \frac{\exp(\lambda_s \beta_c' \mathbf{x}_{nit})}{\sum_{j=1}^J \exp(\lambda_s \beta_c' \mathbf{x}_{njt})} \quad (2)$$

389 The RUM latent class choice model is characterized by a discrete mixture of choice probabilities, over a finite  
 390 number of  $c$  preference classes and  $s$  scale-classes, each of which shows a homogenous choice behavior  
 391 (Provencher et al. 2002, Boxall and Adamowicz 2002, Hensher and Greene 2003, Scarpa and Thiene 2005). It

392 follows that the mixing distribution  $f(\boldsymbol{\beta})$  is discrete, with a random parameter vector  $\boldsymbol{\beta}_c$  denoting a finite set of  
 393  $c$  different vector values. There is a fairly participated debate on how to adequately account for the potentially  
 394 confounding role of the scale/multiplicative correlation parameter of the Gumbel error (Burton *et al.*, 2016).  
 395 The importance of the scale parameter was first raised by Swait and Louviere in their seminal paper (1993),  
 396 who argued that respondents do not necessarily display the same level of certainty when making choices.  
 397 Louviere and Eagle (2006) pointed out that ignoring the scale factor may confound heterogeneity in  
 398 preferences with heterogeneity in error variance, thereby potentially obtaining biased estimates. Recently,  
 399 various approaches were implemented to address variation in taste and its correlations via the scale parameter  
 400 (Keane 2006, Fiebig *et al.* 2010, Scarpa *et al.* 2012, Hess and Rose 2012, Thiene *et al.* 2015; Hess and Train,  
 401 2017).

402 The probability of observing a choice sequence, conditional on being in scale class  $s$  (i.e. on a given degree of  
 403 discrimination) and preference class  $c$  is:

$$404 \Pr(y_n | s, c) = \prod_{t=1}^{T_n} \frac{\exp(V_{nit|sc})}{\sum_{j=1}^J \exp(V_{njt|sc})} = \prod_{t=1}^{T_n} \frac{\exp(\lambda_s \boldsymbol{\beta}'_c \mathbf{x}_{nit})}{\sum_{j=1}^J \exp(\lambda_s \boldsymbol{\beta}'_c \mathbf{x}_{njt})} \quad (3)$$

405 For each latent preference class  $c$  and scale class  $s$ , membership probabilities are defined via a multinomial  
 406 logit approach, with class-specific constant  $\alpha_c$ :

$$407 \pi_{c,s} = \left[ \frac{\exp(\alpha_c + \alpha_s + \gamma'_c \mathbf{z}_n)}{\sum_{c=1}^C \sum_{s=1}^S \exp(\alpha_c + \alpha_s + \gamma'_c \mathbf{z}_n)} \right] \quad (4)$$

408 where  $\mathbf{z}_n$  is a vector of covariates of respondent  $n$ ,  $\gamma$  the vector of associated parameters,  $\alpha_c$  and  $\alpha_s$  are class-  
 409 specific constants and must sum to zero for identification. In our investigation, key determinants of preference  
 410 class membership are types of FoPLs, along with the individual characteristics, especially those related to  
 411 health issues and the conventional socio-demographics.

412 The unconditional probability of a sequence of choices over all classes is:

$$413 \Pr(y_n) = \sum_{c=1}^C \sum_{s=1}^S \pi_{c,s} \prod_{t=1}^{T_n} \frac{\exp(\lambda_s \boldsymbol{\beta}'_c \mathbf{x}_{nit})}{\sum_{j=1}^J \exp(\lambda_s \boldsymbol{\beta}'_c \mathbf{x}_{njt})} \quad (5)$$

414 Previous studies using finite mixture of preference classes found that allowing for further heterogeneity within  
 415 each preference class, by means of continuously varying random parameters, produced significant increases  
 416 in model fit (Bujosa *et al.* 2010, Hess *et al.* 2012, Greene and Hensher 2013, Campbell *et al.* 2104, Boeri *et al.*  
 417 2014, Farizo *et al.* 2014, You and Ready 2014, Franceschinis *et al.* 2017). There is no *a-priori* strong rationale  
 418 for negating this occurrence in our data. On the contrary, respondents belonging to the same preference class  
 419 are expected to show some continuous form of variation in preference for some sub-set of attributes with  
 420 random coefficients  $\tilde{\boldsymbol{\beta}}$ . So, we estimate a latent class model that accommodates in the vector of utility  
 421 coefficients some continuously random coefficients. This allows for continuous heterogeneity of tastes across  
 422 respondents within the same preference class. The unconditional choice probability than becomes:

$$423 \Pr(y_n) = \pi_{c,s} \prod_{t=1}^{T_n} \int_{\boldsymbol{\beta}} Pr_{nit} f(\tilde{\boldsymbol{\beta}}) d\boldsymbol{\beta} \quad (6)$$

424 Specifically, in our case, an extensive specification search showed that the utility coefficients for the current  
 425 food basket (i.e. the status quo), high level of fat and high level of salt are best specified as continuously  
 426 random within each preference class. Normal distributions are assumed for such random parameters in each  
 427 preference class, such that  $\tilde{\boldsymbol{\beta}} \sim N(\boldsymbol{\mu}, \boldsymbol{\Omega})$  and  $\boldsymbol{\mu}, \boldsymbol{\Omega}$  are the subject of estimation from the DCE data.

428 From the normative viewpoint the question we hope to answer relates to whether specific FoPL associate  
 429 themselves with preference patterns more or less likely to induce healthy food choices. For example, a  
 430 preference structure systematically favouring selection of tastier food baskets with high levels of salt, fat and  
 431 sugar is bad for health. Given the broad heterogeneity documented in the food taste literature, we must account  
 432 for other systematic differences associated with individual-specific variables. For example, standard socio-

433 economics (age and sex), self-perception of body weight (how this departs from the ideal) and more objective  
434 body weight measures (BMI).

## 435 **5. Results and discussion**

### 436 5.1 Description of sample characteristics.

437 Forty percent of our sample of 797 respondents are men, while the average age of respondents is 48. Average  
438 personal annual income (before tax) is about £13,800. In terms of education, 33% of respondents holds a high  
439 school diploma, 10% of them holds a post school diploma and 10% a university degree or above. In terms of  
440 employment status, 52% has either a full time or a part time job, 10% is unemployed and 35% of the sample  
441 is retired, student or homemaker. The average weekly expenditure for food shopping is £40.95. The large  
442 majority of respondents shop for food at the supermarket (96%), but a substantial fraction also shops for food  
443 at local shops (68%) and at the butcher (47%). A small fraction shops on line (5%). In terms of Body Mass  
444 Index, almost 33% of the sample have weight in the normal range, 25% are overweight and 18% are obese.  
445 37% of respondents perceive their body weight as a little or a lot over, 40% as about ideal and 4% as a little or  
446 a lot underweight. 28% never or rarely read labels, 23% do so occasionally and 36% usually or always.  
447

### 448 5.2 Choice models

#### 449 5.2.1 *Specification search*

450 All data from the 797 complete interviews are used in our choice analysis, corresponding to 11,628 choices of  
451 food baskets from the DCE<sup>2</sup>. As it has become customary in taste heterogeneity studies, we benchmark our  
452 model progression on the conditional logit specification with fixed utility coefficients. We run a specification  
453 search to explore the dimensions of preference heterogeneity over a range of 2-8 preference classes. Given the  
454 non-nested nature of the various specifications, we use information criteria (IC) (Bayesian, Akaike, Akaike-3  
455 and corrected-AIC) to define the optimal number of classes to fit the data, even though this method remains  
456 controversial (McLachlan and Peel 2000, Thacher *et al.* 2005, Morey and Thiene 2012, 2017). In our search,  
457 the IC values decrease as the number of classes increases throughout. The best model was hence selected based  
458 on two combined criteria: the plausibility of parameter estimates and the plateauing of the marginal  
459 improvement of IC values as a new class is added. This combined approach suggests a four preference-class  
460 model is best. Incidentally, four segments were also found by a similar segmentation study on use of nutrition  
461 information in Switzerland (see Visschers *et al.* 2013) and on another study on perception of FoPLs in France  
462 (Méjean *et al.* 2013). Altogether it is comforting to see that the preference coefficient classes clearly separate  
463 into groups with varying association with propensity to healthy food choice. We then explore the effect of  
464 scale/multiplicative correlation classes and find that the fit does not significantly improve by adding more than  
465 a second class for this dimension. The classes are therefore eight in total.

466 Once ascertained that preference classes can map into healthy food choice, the next step of the specification  
467 search involves the crucial testing of whether the FoPLs treatments and the individual-specific variables  
468 systematically act as determinants of class membership probabilities for both coefficient and scale  
469 heterogeneity. Statistical evidence is found in favor of such covariates influencing preference-class  
470 membership probabilities, but not for effects on scale-class, which therefore remains unconditional. A final  
471 step in the specification search concerns the testing for the presence of continuous residual heterogeneity within  
472 preference-classes. This leads to a final model including both discrete and continuous mixing preference  
473 variation. Taste distributions for high level of fat, high level of salt and for the status quo are assumed to be  
474 distributed independent normal within each preference class, whereas all the remaining attribute coefficients  
475 are kept fixed within each preference class.

---

<sup>2</sup> Estimation of parameters was via maximization of the sample log-likelihood and it was conducted with Latent Gold Choice version 5.0 using the expectation-maximization algorithm from an adequately large number of random starting points, to minimize the probability of local maxima.

476 To summarize the analytics of the above narrative on the specification search, Table 3 reports the information  
477 criteria statistics for a selection of the estimated models: *i*) conditional logit model (MNL); *ii*) four-class  
478 preference model (LCM); *iii*) four-class preference and two-class scale model (LCM and scale); *iv*) four-class  
479 preference and two-class scale model with covariates (LCM and scale); *v*) four-class preference and two-class  
480 scale model with covariates and random parameters (LC-RPL and scale). By inspecting Table 3, one notes a  
481 gradual improvement in terms of model fit moving from the MNL model, which is used as a benchmark, to  
482 the latent class with random parameters. This provides evidence of simultaneous effects of variation in taste  
483 and scale, thereby suggesting that controlling for differences in the error variance across respondents is  
484 important in order to avoid potential confounding of the two sources of heterogeneity. Importantly, one notes  
485 a substantial improvement (more than 210 points) moving from the latent class model to the LC-RPL model  
486 specification, which allows for three continuously random parameters. In what follows we then focus on results  
487 description from the LC-RPL model specification.

### 488 5.2.2 *Fixed preference* ( $\tilde{\beta}$ )

489 We start by looking at results from the fixed coefficient conditional logit model (Table 4), which is used as a  
490 benchmark. The SQ reveals a positive and significant effect on utility coefficients, thereby implying that  
491 respondents show a preference for their current food shopping basket over the other alternatives, everything  
492 else equal. The price coefficient is negative and statistically significant, as expected. The estimated coefficients  
493 for nutritional attributes (except for low saturated fat and low salt) are all statistically significantly different  
494 from the intermediate level, which was kept as baseline. Importantly, attribute coefficient estimates conform  
495 to prior expectations in that they appear to be monotonic with negative preferences towards high levels of  
496 unhealthy nutrient attributes, denoting possibly more palatable but unhealthier food baskets, and positive  
497 preferences for low levels, denoting healthier but less palatable food baskets. Overall this seems to suggest  
498 that people, tend to give up palatability to obtain healthier food options as a result of their understanding of  
499 nutritional levels information portrayed in the FoPL. These findings seem in line with the literature (e.g.  
500 Balcombe *et al.*, 2010).

501 This basic conditional logit model conveys limited amount of information, as it fails to retrieve the latent  
502 structure of variation in taste preference and its associated level of inclination towards healthy food choice. It  
503 is expected that respondents show preference heterogeneity. Some may prefer food higher in the some nutrient  
504 level (say fat or salt) because of their individual preference in taste. Similarly, others may dislike high levels  
505 of a nutrient because they perceive them as unhealthy or simply do not like the taste. This implies that the  
506 coefficients of the nutritional attributes may display positive and negative signs or different utility coefficients  
507 of diverse magnitude. Effects of FoPL treatments and socio-economic covariates can be investigated with a  
508 fixed coefficient model using adequate interactions with FoPL attributes, but this approach hides latent  
509 preference structures (results of a logit model with interactions are available from the authors upon request),  
510 which instead are allowed to emerge in our random coefficient latent class approach.

### 511 5.2.3 *Class preference* ( $\tilde{\beta}_c$ )

512 The latent class model allows to capture different preference structures according to the nature and number of  
513 classes in the population of respondents. In interpreting these models it is customary to try and associate each  
514 class with a specific preference profile. In our case we seek to emphasize class differences in terms of their  
515 inclination to a healthy food choice. Then, using membership probability estimates, the individual-specific  
516 determinants of class membership are discussed in terms of propensity to belong to each preference class. We  
517 comply with this standard approach, with the addition of a scale-class discussion that separates food consumers  
518 in highly and moderately discriminating (i.e. high and low choice determinacy) and a discussion of the  
519 continuous random utility coefficients within each class. Our substantive focus, of course, will be on the type  
520 of association latently uncovered between FoPL treatments and healthy food choice inclination of preference  
521 classes, inclusive of considerations enabling us to differentiate the effects of FoPL treatments on observable  
522 socio-economic covariates, self-reported weight-related statements and inclination to read labels.

523 Parameters estimates of the four-class model are reported in Table 5. In terms of membership probabilities  
524 regarding preference classes, respondents show an averaged 38% probability of belonging to preference class  
525 1, 32% of belonging to class 2, 20% to class 3 and 10% to class 4. Turning to classes with different  
526 multiplicative correlation, we note that the scale parameter for scale class 1 is set to one for identification  
527 purposes. The value of the scale parameter for scale class 2 (averaged probability of 59.3%) is 0.16, thereby  
528 suggesting that people in this scale class display choice behavior with lower multiplicative correlation than  
529 those in class 1.

530 Taste parameter estimates of preference classes, with only few exceptions, are statistically significant,  
531 suggesting that the preference profile of each class is quite well identified. Second, the coefficient for low  
532 saturated fat (stfat\_L), which was insignificant in the fixed effect model, is now significant across all classes,  
533 although it displays different signs. So, this food basket feature matters differently across preference latent  
534 structures.

535 Class 1, with 38% probability, collects people that tend to healthy food choice along all nutrient dimensions.  
536 The coefficient signs have negative preferences for high doses and positive preferences for low ones.  
537 Importantly, respondents with these preferences tend to dislike their current food basket, as signaled by the  
538 negative sign of the SQ coefficient, which implies a strong propensity to modify their current diet behavior.  
539 Interestingly, the standard deviations of SQ, fat\_H and sug\_H are significant, despite the negative means the  
540 effect on utility of these high doses of these nutrients vary greatly within this otherwise homogenous preference  
541 class. This information is of particular relevance as it provides further evidence of heterogeneity, by allowing  
542 for extra taste variation within the same class. Specifically, they imply that within this class, only 7.6% are  
543 attracted by baskets with high sugar content in the label, even a smaller share of 1.5% by high fat and about  
544 one fifth would tend to stick to their status quo basket.

545 Respondents with class 1 preferences display the lowest sensitivity to cost for healthy nutrient attributes, as  
546 validated by the marginal willingness to pay estimates (WTP) reported in Table 6. They are willing to pay  
547 between £35-£46/week more for a weekly food basket with low level attributes, with largest WTP for low  
548 sugar doses. On the other side of the spectrum we find high doses of fat, to avoid which they are willing to pay  
549 as much as £88.2/week. As a consequence, they are inclined to spend a substantial amount of money to move  
550 towards healthier food baskets from medium nutrient dosed ones. Because of their inclination to lower the  
551 doses of all unhealthy nutrients the prototype respondents of this class are named here the “*healthy all-*  
552 *rounders*”.

553 Class 2, with 32% probability, show little residual heterogeneity: the only coefficient found to be significantly  
554 random in this class is that for the SQ basket. Its large standard deviation estimate implies an 85% probability  
555 of having a propensity to stay with their SQ food choice. These consumers significantly prefer both low and  
556 high sugar levels to medium ones as well as medium level of salt and saturated fat. The only nutrient they seem  
557 to appreciate in high doses is fat, perhaps for its taste. For want of a better term, we call this class “*high fat*  
558 *lovers*”, but altogether it does seem to be inclined towards a moderately unhealthy food choice in our  
559 experiment.

560 We named class 3, with 20% probability, “*selectively focussed*” as their choice is affected only by a few  
561 nutritional attributes: low salt and low saturated fat, for which they are willing to pay £52.3/week (the large  
562 value across classes) and £32.9/week, respectively. They show the largest WTP estimates to avoid all high  
563 nutritional levels (more than £120/week). Interestingly, the high aversion towards high doses of fat is  
564 characterized by a variation in preference, as suggested by the value of the standard deviation of this parameter,  
565 but nearly entirely contained in the negative range of values. Similar to class 1, on average, they are mostly  
566 inclined to change their current food basket. The estimated distribution indicates that only 14.4% in this class  
567 has a propensity to stay with their SQ food basket.

568 Class 4 is the lowest probability class (10%) and it is named “*moderately interested*” group. As in class 2, the  
569 only random coefficient is for the SQ and it shows a negative mean, but with a large standard deviation, which  
570 implies, like in class 1, that about 20% has a propensity to stay with their SQ food basket. They seem to be

571 ready to only partially compromise taste with health as their choices are associated positively with intermediate  
572 doses of nutritional FoPL values. In fact, for all four nutrients both coefficient signs for high and low levels  
573 are negative, suggesting moderate amounts being the favourite norm. Respondents in this class display the  
574 highest sensitivity to cost, which induces low values of WTP estimates (between £-1.8 and £-2.4). In other  
575 words, these people are often unhappy with their current food basket and would sometime like to change it,  
576 but they do not seem to be strongly affected by nutritional labels. As a consequence, they are unwilling to  
577 spend money to secure such change.

#### 578 5.2.4 Class determinants ( $\hat{\gamma}$ )

579 Having identified the sizes and the salient effects of FoPL nutrient messages on propensity to healthy food  
580 choice as embedded in the latent groups with homogeneous preferences, we now turn our attention to exploring  
581 their statistical association with individual specific policy relevant social covariates. We separate these into  
582 the group with three FoPL formats (HYD, GDA and MTL, since TXT is the baseline), the group of  
583 conventional socio-economic variables (income, education attainment, age, sex, etc.) and the set of food choice  
584 context self-reports (perceived departure from ideal body weight, BMI, propensity to read food labels, etc.).

585 As an aside, the influence of such determinants on scale/multiplicative correlation classes was also tested and  
586 found insignificant. FoPL formats are known to convey different amount of information by means of various  
587 visual features. A key policy question that can be asked to endorse a given FoPL format over others is whether  
588 it significantly affects class membership probabilities, and if so how it associates with more or less healthy  
589 food choice.

#### 590 5.2.4.1 FoPL formats

591 In our model, all effects refer to the baseline probability of belonging to the highest probability class 1 (*healthy*  
592 *all rounders*). All else being equal, compared to TXT, the hybrid FoPL (HYB)—the most informative label  
593 format—significantly increases membership probability to class 3 (*selectively focussed*). From a policy  
594 perspective this is an interesting and positive finding, as the preference features of this class provide scope for  
595 designing and implementing a tailored policy to increase the role of nutrient information in food purchase  
596 involvement for saturated fat and salt.

597 The GDA format is the second most informative as it only differs for lack of the colour signals from the HYB.  
598 This treatment is never significant at conventional level, but has the highest asymptotic z-value for a negative  
599 effect on membership to class 2 (*high fat lovers*) and for positive effect on class 3. The negative effect lowers  
600 the probable membership to class 2 in favour to the healthier class 1 and increases that of class 3. For both the  
601 significance is just outside the customary levels, but in light of the more recent recommendation to interpret  
602 p-values (Wasserstein and Lazar, 2016) it makes sense to highlight this result regardless of conventional level  
603 of significance.

604 In terms of visual signal, the traffic light and text format (MTL) is only just more informative than the least  
605 informative FoPL (TXT) as it only adds colours to the TXT display. Compared to the latter it only shows a  
606 significant and negative effect on membership probability to class 2 (*high fat lovers*), denoting by default a  
607 positive role in determining association with groups making healthier food choices. For memberships to classes  
608 3 and 4 its effect has low significance.

#### 609 5.2.4.2 Socio-economic covariates

610 Moving to the socio-economic covariates, we see that older age significantly affects only membership to class  
611 2; it makes sense that elderly people are more likely to be in this group because they are often less inclined to  
612 collect new information from FoPL and to use it to improve their knowledge about food products, as this might  
613 require comparative higher cognitive effort or accrue comparatively lower benefits. Being a woman  
614 significantly increases membership to class 3, which is the *selectively focussed* class. Women might have more  
615 familiarity with food choices as they often shop for food for the whole household. They may also pay more

616 attention to nutritional issues of interest to this class because of more knowledge about salt increasing blood  
617 pressure and saturated fats being less desirable than other fat fractions.

618 Self-reports on the frequency of reading FoPLs have a negative association with memberships probabilities to  
619 classes 2 and 4, which by default implies they are positively associated (with high significance) to the other  
620 two healthier food choice classes. This is definitely an interesting piece of information for policy, as both  
621 classes 2 and 4 involve respondents who are either moderately affected by nutritional details (class 4) or only  
622 partly affected (class 2). So, those who read FoPL details frequently are associated with healthier food choices.  
623 We cannot state causation, although this is obviously very plausible, so a campaign aiming at increasing the  
624 frequency of reading such details might steer consumers towards healthier food baskets. This obvious link can  
625 be used as a validation of the robustness of the model.

626 A salient feature, in the context of stemming the growth of overweight prevalence, is the association between  
627 self-reported perception of having an “ideal body weight” and class membership, as well as its association with  
628 the more objective BMI values. Perceiving oneself as having an ideal body weight is significantly and  
629 positively associated only with membership to class 2. These people do not perceive to have weight-related  
630 reasons to steer away from high fat baskets and indulge in tasty meal selections. On the other hand, having a  
631 high BMI has a negative and significant association with class 3, which implicitly makes it positively  
632 associated with the baseline class of healthy food choosers. At least in this hypothetical choice context, those  
633 with a weight problem, objectively measured or perceived, seem to pay attention to FoPL and to use them for  
634 healthier choice. This suggests that the choice experiment reached out to its target audience.

635

#### 636 **5.4 Sensitivity analysis and determinants of membership probabilities**

637 Discussing signs and relative magnitude of structural coefficients  $\hat{\gamma}$  of probability models offers some insight  
638 on the direction and intensity of associations between preference groups and their drivers. However, further  
639 insight on model validity can be gleaned by a sensitivity analysis. So, in this section the estimates of the  
640 coefficients determining class membership probabilities are used to perform a sensitivity analysis. The aim is  
641 to describe changes in class membership probabilities, and hence on degree of healthy food choice, as a  
642 consequence of changes in their determinants. The ultimate goal is, in fact, to draw a selection of scenarios  
643 that can provide useful suggestions for policy design, which in this case must be tailored on the characteristics  
644 of the target population.

645 Figure 2 shows how class membership probabilities change as age increases. The baseline is defined by the  
646 profile for a male respondent who decided the favourite food basket using the TXT format for FoPL, and who  
647 reports to never read food labels, a normal body weight (BMI group 3) and who perceives their own body  
648 weight as about ideal. Young males with such individual traits display a high probability of belonging to class  
649 4, the *moderately interested*.

650 As age increases within this profile a major shift in membership probability takes place from class 4 to class  
651 2. That is, from *moderately interested* to *high fat lovers*. From a policy perspective, this is important as it  
652 suggests a policy addressing older people, or educating middle age people to be more attentive about food  
653 choices. If one is prepared to assume that the change is age-induced, rather than being a feature associated to  
654 the specific age cohort, then one may conclude that without a tailored action, young males with 15%  
655 probabilities of belonging to class 2 may see this probability grow to nearly 50% by the time they are 60 years  
656 old guys: a three-fold increase. Clearly, more research is necessary to establish this dependency.

657 One may wonder what effect would have to change some elements of this profile on the age range. Figure 3  
658 describes this effect on a woman reporting to “always read the label I have” (except for the first set of bars),  
659 and who decides based on a HYB label, i.e. the label format conveying the richest amount of information. The  
660 combined effect on membership probability of sex and of label type change (from TXT to HYB) can be seen  
661 by comparing the first set of bars on the left between Figure 2 and 3. The effect is strong and positive for class  
662 2 membership, and negative for class 1. Focussing on the first two sets of bars in Figure 3 shows the effect of



663 moving from “never” to “always” reading FoPLs, everything else being equal, for an 18 year old woman. As  
664 can be seen “always reading FoPL” is strongly associated with classes with healthier food choices. Specifically,  
665 we note a two-fold decrease in membership probability for class 2 (*high fat lovers*) and a drop from 50% to  
666 3% in class 4 (*moderately interested*).

667 Turning the attention to the five blocks of bars on the right of Figure 3 allows us to explore the effect of age  
668 increase on class membership. We note that, as expected, being older makes it more likely to belong to class  
669 2, a relatively unhealthy food choice group, with a probability change from 10% to 26%, which draws mostly  
670 from class 4 (the *moderately interested*). From a policy perspective, there is obvious scope to target older  
671 women, even when they read FoPL and correctly think of themselves as of ideal weight, to improve their diet  
672 habits. This needs doing with action beyond food labeling. Perhaps with an information campaign directed to  
673 the personalized interpretation of the information content of labels.

674 Let us now turn to Figure 4 which investigates the interesting effect of the five BMI categories (from normal  
675 BMI to the highest obesity of class III) on class membership probabilities. The baseline in this case are 30  
676 years old women who never read FoPLs, are shown a HYB format, and perceive own weight as “about ideal”.  
677 Let us ignore for the moment the rightmost block of bars and focus on the first five. From these comparisons,  
678 there emerges a quite clear picture: all else equal, increasing BMI (that is, *effective* weight, not the perceived  
679 one) redistributes membership probabilities from class 4 to class 2. That is from the *moderately interested*  
680 group to the *fat lovers*, which for highest BMI ends up with a 61% membership probability. Hence, there is  
681 clear evidence for the need to target food choice policies to this group of effectively overweight and obese  
682 people, who despite having objective issues in terms of own weight (as shown by reported BMI), incorrectly  
683 perceive their body weight class and hence discount their health risks.

684 How much does a realistic perception of own body weight combined with reading FoPL affect class  
685 membership in an extreme case? To answer this question let us now focus on the two very last groups of bars  
686 on the right side of Figure 4. The last set of bars to the right shows how class membership probabilities change  
687 with respect to the second to the last set when these conditions are imposed, i.e. when own weight perception  
688 is correct (a lot over-weight for a class III obese woman) and reading FoPL is imposed. The two effects  
689 combined produce a major redistribution in the class membership probabilities: class 1 (the healthy food  
690 choice) increases from 10% to 65%, followed by a smaller increase in class 3 (that also chooses quite well),  
691 whereas class 2 and class 4 show a drastic decrease, moving from 61% to 13% and from 24% to 3%,  
692 respectively. This suggests that a policy promoting a realistic body weight image and a regular reading of  
693 FoPL details is associated with potentially strong health benefits from the adoption of healthier diet. Similar  
694 results are found also with label formats different from HYB.

695

## 696 **5.5 Distributions of individual marginal WTP estimates and taxation targeting**

697 The literature has often discussed the cross effect of price-based instruments to discourage the dietary intake  
698 of unhealthy nutrients. Taxing one nutrient—for example fat—can, by statistical association, discourage the  
699 uptake of other nutrients—for example salt. One way to inform policy design is to explore the degree of  
700 association between individual-specific marginal willingness to pay (mWTP) implied by the sequences of  
701 choice data of each respondent. mWTPs can be computed in our sample, conditional on the pattern of observed  
702 choices, for high (and therefore unhealthy) levels of nutrients in the weekly food baskets. Figure 5 shows the  
703 quantile contours of a bivariate kernel density of mWTP for a weekly diet high in fat and high in salt. The  
704 north-east quadrant delimited by the dashed line shows the density of those in the sample with positive mWTPs  
705 for both, while those in the south-west quadrant show the densities for those with negative values. In this  
706 quadrant we recognize a group with strong aversity to a diet with high values in salt and fat (less than £-  
707 150/week) and a group with medium aversion (around £-50/week). The highest density is found along the  
708 dashed line (£=0/week) for high fat, but around £-15/week for high salt.

709 The north-west quadrant collects those that have positive view of high fat, but negative for high salt. These  
710 individuals would not adjust their high salt diet as a consequence of a tax on high fat, since they already dislike  
711 high salt, but those in the north-east quadrant would. Although the latter group has smaller density. The south-  
712 east quadrant collects those with positive view of high salt, but negative for high fat. A similar reasoning  
713 applies here for a tax on high salt—it would not reduce the consumption of high fat in this group.

714 The policy implication is that the segment in the north-east quadrant is the only segment that would be subject  
715 to cross effects in case a tax was exclusively imposed on high levels of either salt or fat. This segment is a low  
716 density one and hence cross tax effects are likely to be small. Similar policy directions can be derived for other  
717 levels or other nutrients. Some of these are available from the authors upon request.

## 718 **6. Policy implications and further research**

719 Deriving strong policy recommendations of immediate applicability to the field of food labeling from a stated  
720 preference study, albeit rigorously conducted and with good validity as the present one, is unwarranted without  
721 further field testing. We nevertheless derive some policy suggestions from our study. The overall picture  
722 depicted by our analysis of the Northern Irish food consumers is quite articulated. They display good sensitivity  
723 to nutritional labels for the most part (classes 1 and 3 represent together nearly 60 percent) with about 10  
724 percent of displaying moderate interest. About one third of the total (class 2) represents a hard core of relatively  
725 insensitive consumers to FoPL information. However, significant differences exist across the determinants of  
726 memberships across groups with regards to both label formats and socio-economic covariates. Furthermore,  
727 preference classes are systematically dependent on both label formats and socio-economic covariates, but  
728 significant within-class preference heterogeneity is explained by continuously random preferences as well as  
729 differences in choice determinism (or ability to discriminate). These technical issues should be born in mind  
730 in future by choice analysts operating in this area.

### 731 6.1 Policy implications

732 There is no silver bullet or clear winner in terms of FoPL formats, but formats that portray a visual enhancement  
733 with respect to the basic text are somehow effective to increase membership probabilities into preference  
734 classes associated with healthier food choice. Perhaps unsurprisingly, the most visually informative label  
735 format HYB, increases the chance of choices made according to a preference structure that appears *selectively*  
736 *focused* (class 3) on specific nutritional factors (salt and saturated fats). In other words, it is effective on already  
737 nutritionally sensitized food customers. How valuable its use can be will hence depend on how large a share  
738 of the population this preference class represents.

739 The marginally less informative FoPL format GDA appears active, albeit with low significance, in membership  
740 of larger preference classes, detracting from class 2 (*high fat lovers*) and adding to class 3 (*selectively focused*),  
741 mostly drawing from class 1. Once again, the extra information appeals positively to the already nutritionally  
742 sensitized food customers. Our results point the finger to the role of nutrition education as means to sensitize  
743 customers as a necessary precursor of FoPL effectiveness, when this contains more information.

744 What clearly emerges in our sensitivity analysis conducted to validate the model is the role of other drivers  
745 behind preference, such as gender, the perception gap between BMI and self-body image and older age. This  
746 points the finger to the potential scope for specifically tailored information program directed to specific sub-  
747 groups of consumers. While much emphasis and past research work has been focused only on FoPL formats,  
748 the broader policy picture seems to require a much broader multi-dimensional intervention, mostly based on  
749 education and directed to specific groups.

### 750 6.2 Further research

751 Given the small space available to convey information in FoP food labels, the search remains for a succinct  
752 prescription for information on nutritional content that can be broadly effective. Direction for further research  
753 might include labeling initiatives directed towards specific groups for specific foods (individualized  
754 information). Information directed to younger age groups and groups with low nutritional education might rely

755 on messages of physical activity caloric equivalency. Interpreting these messages does not require knowledge  
756 of suggested daily caloric intake or pre-existing sensitivity to specific nutrition factors. For example, recent  
757 research in the USA (Bleich et al. 2012 and Bleich et al 2014) demonstrates that at least black youth are more  
758 inclined to heed and act upon activity equivalent calories metrics than they are on simple caloric amounts. The  
759 effect has also been shown to be mediated by parents' choices for their children fast food meals (Viera and  
760 Antonelli, 2014). Admittedly, caloric intake does not provide as full a nutritional picture, but in a fight against  
761 obesity and overweight it might be more relevant to encourage consumer to consider both lowering intake and  
762 increasing physical activity, rather than expecting to act upon complex multi-dimensional nutritional messages.

763 Official UK statistics on caloric intake are problematic. For example, a recent report (Harper and Hallsworth,  
764 2016) showed that official statistics on food expenditures (the National Diet and Nutrition Survey data and the  
765 Living Costs and Food Survey data) are systematically under-estimating calorie consumption when compared  
766 to other survey statistics from the same population (e.g. Kantar Worldpanel) and from evidence from other  
767 objective measurements. The reduction in the average physical activity necessary to produce the observed  
768 average body weight increase cannot be reconciled with the reported intake. A conclusion supported also by  
769 Doubly Labelled Water, which indicates calorie under-reporting of about 32 percent. On the other side of the  
770 equation, self-reports on physical activity in England in 2008 showed that "data indicated that 39% of men and  
771 29% of women met the Chief Medical Officer's minimum recommendations for physical activity; the data  
772 from accelerometer indicated that only 6% of men and 4% of women had done so" (Harper and Hallsworth,  
773 2016, page 11). This skewed self-reports are possibly due to an increased awareness of being overweight, the  
774 need for dieting and increased physical exercise in order to lose weight.

775 The above measures, once combined with a traffic light system might work better than alternative  
776 combinations, at least for certain groups. A view recently supported also by the Royal Society for Public Health  
777 chief executive (Cramer 2016). More research is needed in this area.

778

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975

976 Table 1 - Attributes and levels

977

Attributes	Levels
Sugar	High, Medium, Low
Fat	High, Medium, Low
Saturated	High, Medium, Low
Salt	High, Medium, Low
Price	+50% , +20%, 0, -20% , -50%

978

979 Table 2 – Description of nutritional label treatments

980

Description	Sample	Abbreviation
Text only	High, Medium, Low Text	TXT
Text, Colour	Multiple Traffic Light	MTL
Text, % GDA	% Guideline Daily Amount	GDA
Text, Colour, % GDA	Hybrid	HYB

981

982 Table 3 – Summary statistics of estimated models

Model Specification	LogL	BIC	AIC	AIC3	CAIC	N. par
MNL model	11,952.1	23,971.0	23,924.2	23,934.2	23,981.0	10
4-Class model (LCM)	-8,961.7	18,210.7	18,009.5	18,052.5	18,253.7	43
4-Class model (LCM) 2-scale	-8,700.5	17,701.6	17,490.9	17,535.9	17,746.6	45
4-Class model (LCM) 2-scale with Covariates	-8,638.3	17,737.5	17,414.6	17,483.6	17,806.5	69
4-Class model (LC-RPL) 2-scale with Covariates	-8,420.2	17,381.6	17,002.4	17,083.4	17,462.6	81

983

984 Table 4 – Estimates from Multinomial Logit Model

Attributes	Coeff.	z-value
price	-0.01	-14.61
sug_Low	0.11	3.37
sug_High	-0.26	-7.60
fat_Low	0.17	5.25
fat_High	-0.26	-7.65
stfat_Low	0.03	0.85
stfat_High	-0.46	-13.43
slt_Low	0.07	1.97
slt_High	-0.36	-10.63
SQ	0.32	16.38
Pseudo-R <sup>2</sup>		0.0408
Log-likelihood		-11,952.1

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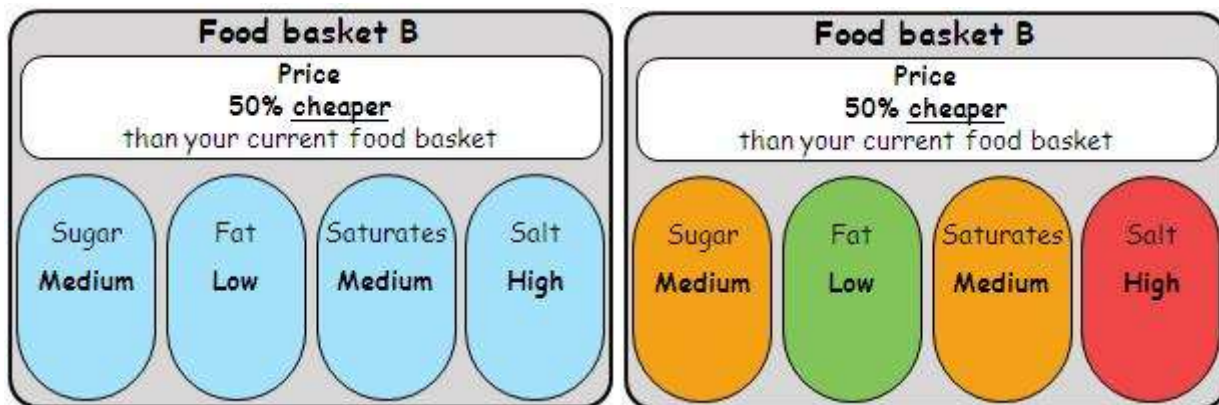
Table 5 – Estimates from Latent Class Model

Attributes	Healthy all rounders		High fat lovers		Selectively Focussed		Moderately interested	
	Class 1		Class 2		Class 3		Class 4	
	Coeff.	z-value	Coeff.	z-value	Coeff.	z-value	Coeff.	z-value
Class size (Preference)	38.2		31.8		19.6		10.5	
<b>Food choice attributes:</b>								
price	-0.01	4.2	-0.04	5.9	-0.06	3	-0.64	7.3
sug_Low	0.6	4.6	1.08	4.1	-0.59	1.3	-1.13	2.2
Mean: sug_High	-0.96	6	0.91	3.9	-7.07	6.5	-1.15	2.6
St. dev.: sug_High	0.67	4.4	0	0	1.42	1.7	0	0
fat_Low	0.46	3.9	0.15	0.9	-0.16	0.4	-0.57	1.2
Mean: fat_High	-1.15	6.5	0.34	1.8	-10.3	7.4	-1.53	3.3
St. dev.: fat_High	0.53	2.7	0	0	3.08	4.1	0	0
stfat_Low	0.5	3.9	-0.62	3.1	1.84	4.5	-1.23	2.6
stfat_High	-1.09	7.1	-1	4.9	-9.67	6.9	-0.9	1.8
slt_Low	0.6	3.9	-1.18	5.1	2.93	5.2	-0.27	0.5
slt_High	-0.74	5	-0.54	3.2	-10.15	7.4	-1.14	2.2
Mean: SQ	-7.41	6.4	20.38	7.3	-2.58	5.9	-7.57	5.3
St. dev.: SQ	8.83	7.6	19.73	7.1	2.43	6.2	8.74	5.9
<b>Membership Equations:</b>								
<b>i) FpPL determinants</b>								
HYB	0	-	0.11	0.3	0.83	2.3	0.3	0.7
GDA	0	-	-0.6	1.7	0.57	1.6	-0.44	0.9
MTL	0	-	-0.74	2.2	-0.11	0.3	-0.2	0.4
<b>ii) Covariates</b>								
Age	0	-	0.03	3.7	0	0.5	-0.01	1.4
Woman	0	-	0.37	1.5	0.57	2	0.27	0.8
How often read FoPL	0	-	-0.61	5.7	-0.08	0.6	-1.08	7
Perceived ideal body weight	0	-	0.43	2.2	0.04	0.2	-0.19	0.7
BMI class	0	-	0.09	0.7	-0.34	2.6	-0.2	1.2
<b>Scale parameter classes</b>								
	Scale class 1		Scale class 2					
Class size (Scale)	40.7		59.3					
Scale parameter	fixed	-	0.16	16.93				
N. respondents		797		N. obs.	11,628			
Log-likelihood	-8420.2							

Table 6 – Willingness to Pay estimates (marginal)

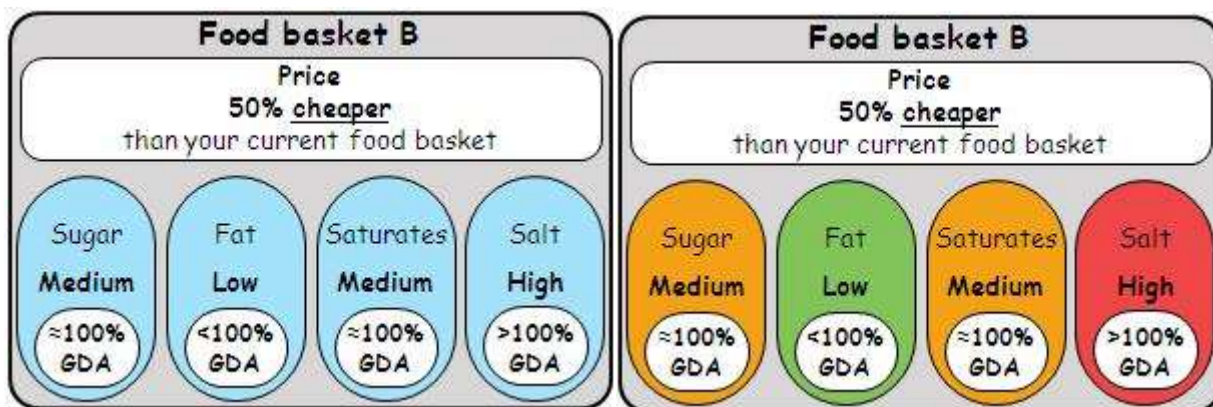
Attributes	Class1	Class2	Class3	Class4
sug_Low	46.5	30.7	-10.6	-1.8
sug_High	-74.1	26.0	-126.2	-1.8
fat_Low	35.7	4.2	-2.9	-0.9
fat_High	-88.2	9.8	-183.8	-2.4
stfat_Low	38.6	-17.8	32.9	-1.9
stfat_High	-83.7	-28.5	-172.6	-1.4
slt_Low	46.0	-33.5	52.3	-0.4
slt_High	-56.9	-15.2	-181.3	-1.8

Figure 1 – Examples of Food baskets (choice tasks)



i) Text only

ii) Multiple Traffic Light



iii) % Guideline Daily Amount

iv) Hybrid

Figure 2 – Class membership probabilities by age increase for a baseline respondent described as male, MTL label format, perceived own body weight as ideal and with normal BMI.

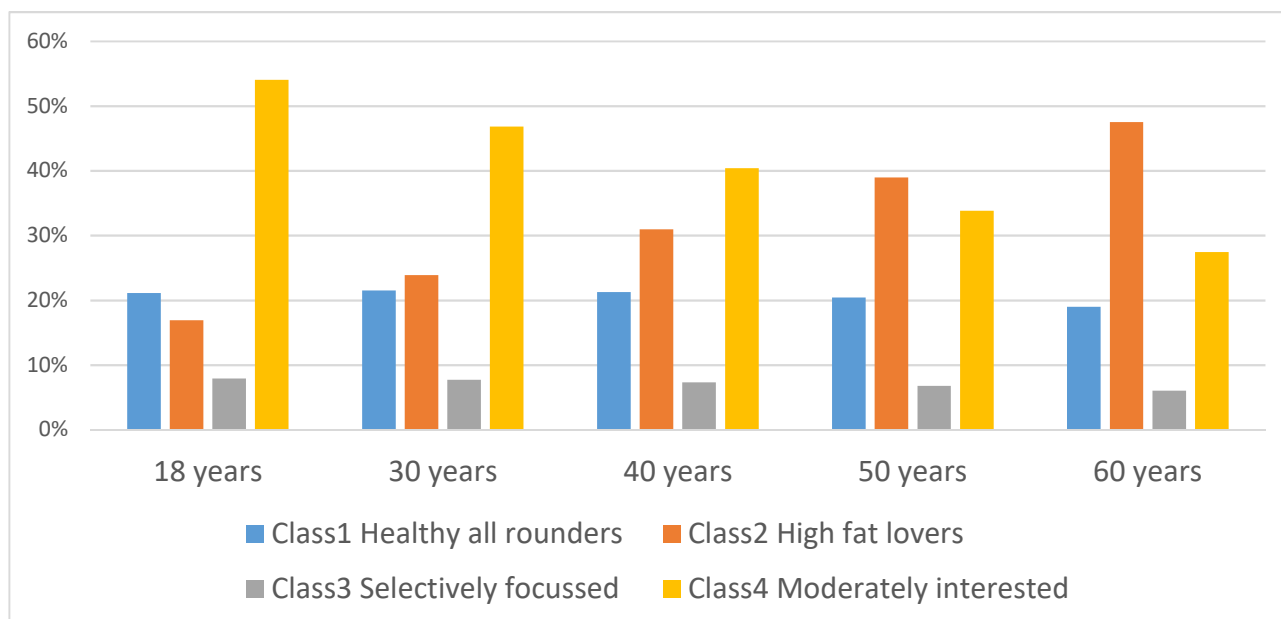


Figure 3 - Class membership probabilities by age increase and by reading or not nutritional information on FoPL. Baseline respondent: woman, HYB label format, perceived own body weight as ideal and with normal BMI.

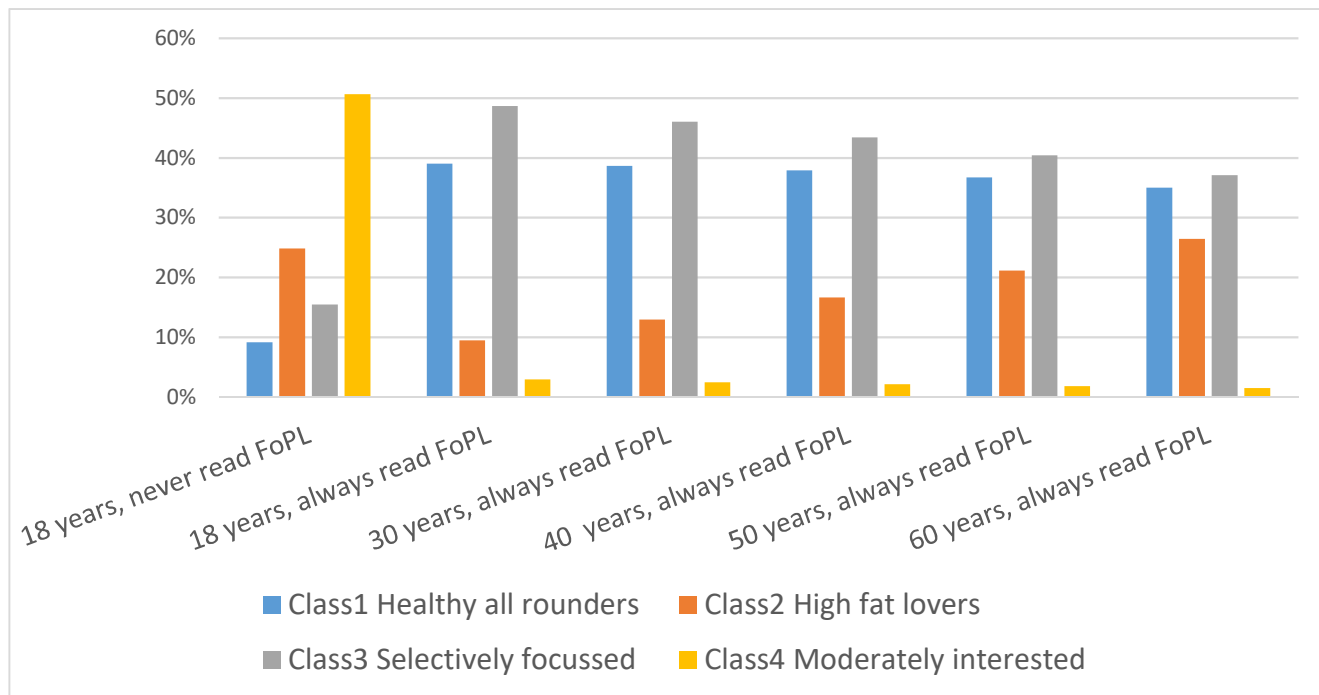


Figure 4 - Class membership probabilities by bodyweight increase and by reading or not FoP labels. Baseline respondent: 30 years old women, normal BMI, perceive their body weight as ideal, and have HYB label format.

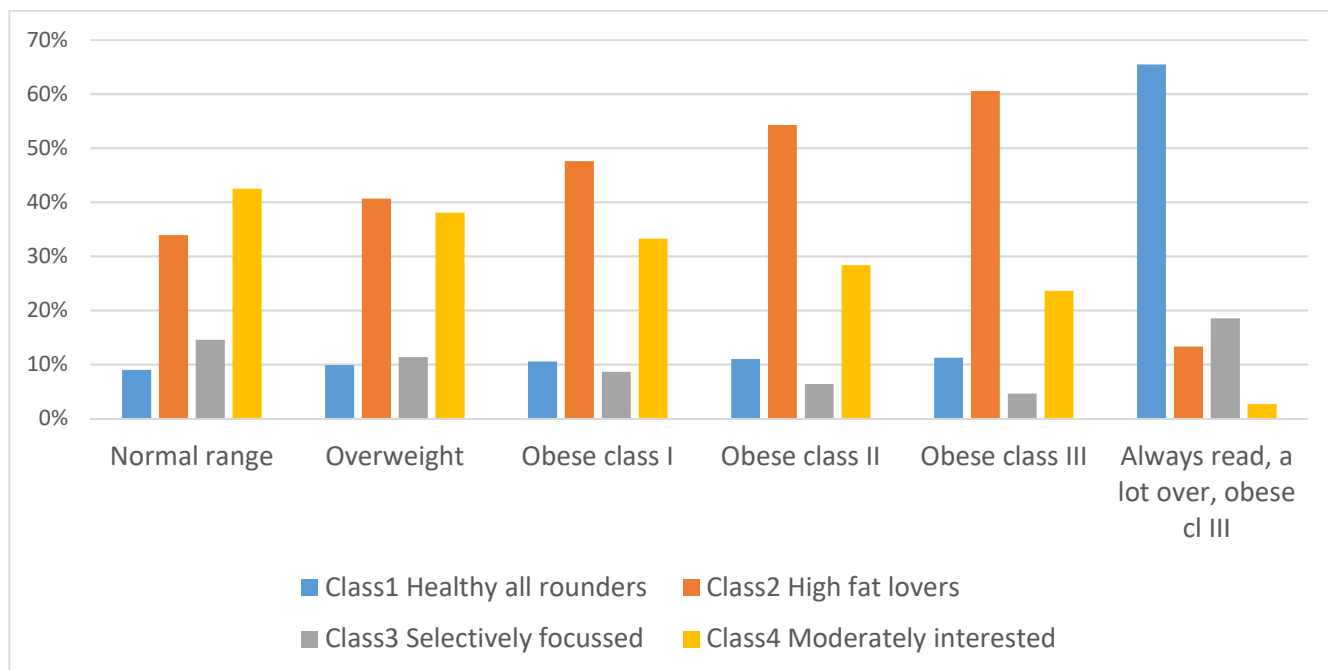
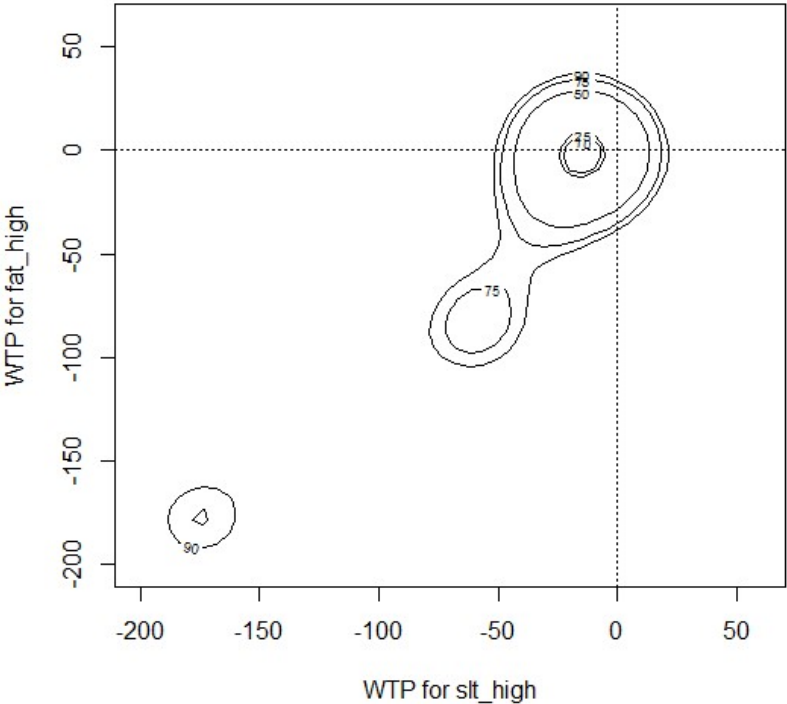


Figure 5 - Distributions of individual marginal WTP estimates for high fat and high sugar level.



# Appendix

Example of food card for sugar



Example of food card for fat

