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The impact of nutritional labeling on adult snack choices: a controlled field experiment in a non-commercial professional setting

Abstract

Each year, 2.8 million people die because of comorbidities associated with being overweight. Snacking substantially contributes to people's calorie intake. One way to nudge consumers towards healthier alternatives is the implementation of nutritional labeling. This study reports on a controlled field experiment that evaluates the effect of two nutritional labels on free snack choices (n = 739). Participants at a conference could choose between nuts, cookies, and candy bars as a snack, presented at the bar at six different locations across two bar counters. The labels were set up in front of each snack in three conditions: no labeling (control), a calorie label, or a traffic light label (i.e., the Nutri-Score). The location of the snacks on the counter (Either side of the counter; Center, Right, Left) and the time-of-day (Morning (= reference) vs Afternoon) were statistically controlled for. The results show that calorie labels could not successfully nudge consumers toward healthier snack choices (nuts instead of candy bars or cookies). In contrast, the Nutri-Score label significantly increased the probability of choosing nuts over candy bars. The Nutri-Score also increased the chance of choosing nuts over cookies, but the difference was not significant. No prior studies to our knowledge have directly compared calorie labels to the Nutri-Score. This study suggests that the Nutri-Score label can be a more successful intervention than calorie labels to nudge consumers towards healthier choices in situations where free snacks are offered, like many modern workplaces. Changing snacking behavior is challenging and naturalistic field experiments like this one are needed to translate the theory from previous laboratory studies to real-life settings.

Keywords: Nutri-Score; Calories; Snack choice; Field Study; Front-Of-Pack label

1. Background and objective

Overweight and obesity are prevalent problems and are associated with different kinds of cancer, diabetes, and other non-communicable diseases, leading to a lower quality of life (Afshin et al., 2017; González-Muniesa et al., 2017; Katzmarzyk & Janssen, 2004). Each year, 2.8 million people die because of comorbidities associated with being overweight (Sciensano, 2021). While obesity is often associated with unhealthy diets and lifestyles, unhealthy diets have been linked with an increased risk of several non-communicable diseases like coronary heart disease and various cancers, even when they do not co-occur with obesity (Campbell & Duhaney, 2016; Harvard T.H. Chan School of Public Health, n.d.; Jannasch et al., 2017; Lassale et al., 2016; Menotti et al., 2014; Sotos-Prieto et al., 2017; Yu et al., 2018). Therefore, there is an increasing emphasis on promoting healthier lifestyles to

39 decrease the number of overweight people and overcome the negative repercussions of unhealthy
40 diets (World Health Organization, 2022).

41 Besides the impact of unhealthy diets on the chances to develop a variety of diseases, the type of
42 calories eaten also differently contributes to weight gain (Harvard T.H. Chan School of Public Health,
43 n.d.). For example, consuming foods with higher protein contents and lower glycemic loads can help
44 prevent weight gain (Brand-Miller & Buyken, 2012). Moreover, increasing the proportion of
45 vegetables helps protect against several illnesses, independent of the consumers' weight status
46 (Boeing et al., 2012; Mytton et al., 2014). The contemporary environment is frequently described as
47 "obesogenic" (Coelho et al., 2011; Townshend & Lake, 2009), meaning that people's surroundings at
48 present facilitate and even motivate unhealthy choices. This would suggest that changes have to be
49 made not only on an individual level but also at the level of the environment people live in
50 (Swinburn et al., 2011). Small changes to the environment, frequently referred to as "nudges"
51 (Thaler & Sunstein, 2009), might help consumers in adopting healthier lifestyles. Various types of
52 nudges are recognized, often categorized as "Cognitive nudges," "Affective nudges," or "Behavioral
53 nudges" (Cadario & Chandon, 2019). While behavioural nudges have the reputation of being more
54 effective than cognitive nudges (Cadario & Chandon, 2020), it is important to consider the extent to
55 which consumers accept these interventions when applying nudges (Cadario & Chandon, 2019). The
56 current study therefore tests a cognitive nudges (nutritional labelling) that is well-accepted by
57 consumers (Cadario & Chandon, 2019).

58 A strong contributing factor to obesity is unhealthy snacking (Bertéus Forslund et al., 2005).
59 Research has shown that the number of snacks and their contribution to our daily energy intake has
60 increased exponentially over the years, to the point where snacking is considered a "fourth meal"
61 (Baskin et al., 2016; Kant & Graubard, 2015). About 15-35% of people's daily energy intake comes
62 from snacks (Australian Bureau of Statistics, 2014; Cowan et al., 2020; Myhre et al., 2015; Si Hassen
63 et al., 2018). Due to the substantial role that snacks can have on individuals' weight gain, Public
64 Health England (PHE) advises only to consume snacks containing less than 200 kcal and with more
65 beneficial nutrients (Marty, Evans, et al., 2021). Unfortunately, many popular snacks are not only
66 high in calories, but also poor in nutritional composition (Byrd-Bredbenner et al., 2012; Marty,
67 Evans, et al., 2021). If healthier snacks are offered alongside unhealthier alternatives, they compete
68 for the consumer's choice. Steering consumers towards healthier snack alternatives is of vital
69 importance. Hence, the current study focuses on free snacks at a work-related conference and
70 investigates whether nutritional labels could direct consumers towards healthier alternatives.

71 Snacking is quite common during breaks, e.g., in the workplace (Hansen et al., 2016). An increasing
72 number of employers offer free snacks to their employees and one study suggests that this increases
73 their happiness (Hadley, 2015; Society for Human Resource Management, 2018). The combination of
74 free snacks, snack proximity, and the presence of other people (e.g., colleagues) suggests that
75 unhealthy snacking can be a problematic vice to control in such environments (Baskin et al., 2016;
76 Herman, 2015). In fact, employees report difficulty maintaining their weight when their workplace
77 offers free snacks (Taber, 2014). This is a considerable problem, as full-time employees spend about
78 60% of their waking hours in the workplace (Allan et al., 2017). Besides the frequently visited
79 worksite, environments with similar characteristics include for instance conferences, parties, and
80 some school and after-school programs (Coleman et al., 2008). These situations are in contrast to
81 most studied environments, where snacks need to be paid for and price is a confounding choice
82 factor (Petimar et al., 2019, 2022; Rusmevichientong et al., 2021; Sowers et al., 2019). Willingness-
83 to-pay and purchase intentions are not useful measures in these situations, as the price is taken out
84 of the equation. Therefore, this study focusses on actual food choice and the chosen setting is a

85 work-related conference. Work-related conferences represent a viable environment to fulfill the
86 need for more field experiments. Many professions and fields organize several conferences a year to
87 share knowledge and make connections. For instance, in the academic field alone, there are already
88 over 8.4 million researchers around the world, each participating in conferences several times a year
89 to promote their work (Sarabipour et al., 2021). This offers unexploited possibilities for unique field
90 experiments. In fact, conferences present a homogenous pool of participants while still being more
91 controlled than an on-the-street experiment due to the closed admittance. Moreover, they offer an
92 environment with social interactions similar to many food environments and previous research
93 already documented the importance of these social influences in food choice (Cruwys et al., 2015;
94 de Castro & Brewer, 1992; Herman, 2015; Schüz et al., 2018). Furthermore, the naturalistic setting
95 reduces the risk of observation bias like the Hawthorne effect (Elston, 2022; Källemark Sporrang et
96 al., 2022; McCambridge et al., 2014; Robson, 2016). Therefore, the chosen conference poses an ideal
97 environment for a naturalistic field experiment with externally valid results. We thereby answer the
98 call made by other scholars to explore a variety of contexts for testing healthier eating interventions
99 (Chandon et al., 2022).

100

101 The current study tests and compares the effectiveness of two nutritional labels as a means to
102 reduce unhealthy snacking at a work-related conference. A nutritional label is a communicative
103 element summarizing the nutritional quality of the product (often found on the front of a package
104 for packaged foods). A US survey demonstrated that, unlike other healthy eating interventions - such
105 as portion or packet size reductions (Do Vale et al., 2008)- interventions involving nutritional labels
106 are generally well-accepted by the public (Cadario & Chandon, 2019). Moreover, both online and
107 laboratory experiments have indicated that nutritional labels can increase the purchase (intentions)
108 and willingness-to-pay for healthier food options (Asioli et al., 2016; Marette et al., 2019; Nohlen et
109 al., 2022). Importantly, a recent review has highlighted the diversity in study designs and lack of
110 consistency across contexts in the evidence concerning the effect of nutritional labels on food
111 purchases (Braesco & Drewnowski, 2023), demonstrating the need for further research.

112

113 Additionally, different nutritional labels exist and the World Health Organization (WHO) calls for
114 more research on the impact of different front-of-pack labeling schemes in different contexts to
115 recommend a specific scheme (World Health Organization, 2021). Some labels are purely
116 descriptive, whereas others use colours to help interpret the information (evaluative labels)
117 (Cadario & Chandon, 2020). Prior research suggests that descriptive labels can not successfully steer
118 consumers to healthier choices, but evaluative labels can (Cadario & Chandon, 2020). This research
119 explicitly compares a calorie label (descriptive) versus the Nutri-Score (an evaluative summary traffic
120 light label that shows the relative healthiness of a product) on consumer choice. Based on a 2018
121 Cochrane review, calorie labels emerged as the most frequently researched nutritional label
122 (Crockett et al., 2018). This study contrasts this label with the Nutri-Score, as the International
123 Agency for Research on Cancer (IARC), part of the WHO, called on the EU commission in 2021 to
124 introduce the Nutri-Score on a mandatory basis in Europe (International Agency for Research on
125 Cancer, 2021; Julia & Hercberg, 2017a; Ter Borg et al., 2021).

126

127 2. Calorie labels and the Nutri-Score label

128

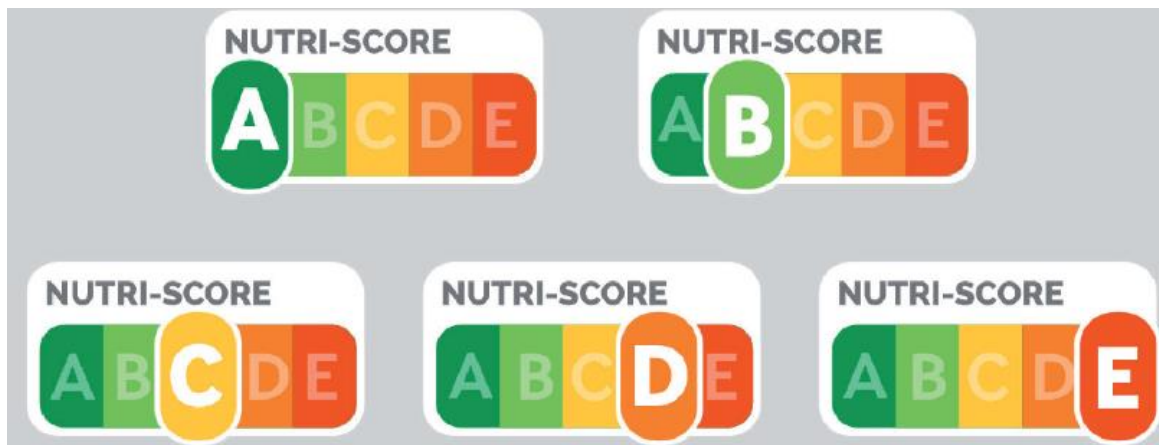
129 This study is one of the few studies attempting to compare the effect of calorie labels and the Nutri-
130 Score label on consumer choice in a real-life setting. In isolation, calorie labels are well-studied.
131 Besides laboratory and online experiments (Bleich et al., 2017; Marty, Franzon, et al., 2021), various

132 field experiments have investigated the extent to which informing consumers about the caloric
133 content of a product would reduce consumers' acquisition, perception, and consumption of energy-
134 dense foods (for reviews, see Kiszko et al., 2014; Swartz et al., 2011). Several experiments exist in
135 stores (Petimar et al., 2022), restaurants (Bleich et al., 2017; Cawley et al., 2020; Petimar et al.,
136 2019), university dining facilities (Cioffi et al., 2015), hospital cafeterias (Mazza et al., 2017; Webb et
137 al., 2011) or worksites cafeterias (Vasiljevic et al., 2018, 2019). Some have found small but significant
138 effects (Cioffi et al., 2015; Mazza et al., 2017; Webb et al., 2011). For instance, in hospital cafeterias,
139 calorie labels led to an increase in the purchase of lower-calorie side dishes and snacks, but not to a
140 different choice of entrées (Webb et al., 2011). Importantly, quite some studies report no effect of
141 calorie labels (Kiszko et al., 2014; Mantzari et al., 2020; Petimar et al., 2019; Swartz et al., 2011;
142 Vasiljevic et al., 2018, 2019). For example, although consumers appreciated the implementation of
143 calorie labels in the study of Vasiljevic et al. (2019) and self-reported using them, the results showed
144 no significant effect of calorie labels on choice. Hence, the evidence reports mixed and inconclusive
145 findings regarding the effectiveness of caloric labels in steering food choices. Moreover, it appears
146 that consumers willfully choose to strategically ignore calorie information for different reasons. One
147 reason for people to avoid calorie information is to allow themselves to act upon their intuitive
148 preference, like consuming a tempting dessert (Kaitlin Woolley & Risen, 2018). It can also be a
149 strategy motivated by guilt aversion (Thunström et al., 2016) or to avoid emotional discomfort by
150 forming optimistic but false beliefs (Nordström et al., 2020). Besides willfully avoiding or ignoring
151 caloric information, an additional explanation to why caloric information might be ineffective could
152 reside in the fact that consumers might under- or overestimate energy content per portion size
153 (Besharat et al., 2021; Carels et al., 2007; Li et al., 2022; Shen et al., 2022; Tal, 2021; K Woolley & Liu,
154 2021), as well as misinterpret or misunderstand the information provided in the caloric label
155 (Robinson et al., 2021). Moreover, even though most consumers are familiar with the concept of
156 calories, they often do not know how to calculate their own energy needs, let alone use the calorie
157 labels for their health or weight goals (Van Kleef et al., 2008). Finally, consumers might perceive the
158 difference in energy content between two alternatives as rather small, which may make them
159 reluctant to trade taste for calories, annihilating the effectiveness of a calorie label (Breathnach et
160 al., 2021; Tangari et al., 2019).

161
162 The Nutri-Score is a more recent nutritional label developed by scientists (Julia & Hercberg, 2017a;
163 Ter Borg et al., 2021). The label is currently endorsed by the French Santé Publique and is further
164 used in Germany, Luxembourg, Switzerland, and Belgium. The Nutri-Score is a traffic light label with
165 five colored boxes to grade the nutritional quality of foods and beverages (see Figure 1). All foods
166 and beverages are scored using a multi-nutrient algorithm based on the UK Food Standard Agency
167 nutrient profiling system (FSA-NPS), assigning 'bad points' for energy content, salt, saturated fat and
168 sugar and 'good points' for fruit and vegetable content, fiber and protein (Julia & Hercberg, 2017a).
169 Depending on the end score of the algorithm (varying between -15 and 40), healthier foods get an
170 "A" or green score, and the unhealthiest foods get an "E" or red score. The Nutri-Score is based on
171 an across-the-board algorithm, meaning that one set of criteria is applied to all pre-packaged foods,
172 with some minor adaptations to the cut-offs for cheeses, added fats, and beverages [(Peters &
173 Verhagen, 2022; Santé publique France, 2023)].

174 As it is a fairly recent label (first implemented in France in 2016), research on its effectiveness is still
175 emerging (Nohlen et al., 2022). One of the main advantages of the Nutri-Score compared to calorie
176 labels, is that it distinguishes between 'good' (essential fatty acids and proteins) and 'bad' calories
177 (sugar and saturated fat). It also takes into account non-caloric or low-caloric nutrients like salt and
178 fiber. This results in a more complete picture of a product's healthiness (Vlassopoulos et al., 2022).

179 Although the Nutri-Score has been found to be the most understandable and recognizable
180 nutritional label compared to various alternative labels (Dubois et al., 2021; Hagmann & Siegrist,
181 2020; Julia et al., 2016; Julia & Hercberg, 2017b; Muller & Prevost, 2016), support for its
182 effectiveness on actual choice in externally valid contexts (outside a laboratory) is scarce (De Bauw
183 et al., 2021; Egnell et al., 2019; Folkvord et al., 2021; Hagmann & Siegrist, 2020; Marette et al., 2019;
184 Poquet et al., 2019). As a recent review by Braesco and Drewnowski (2023) concludes, several
185 questions with regard to its effect on food purchases and diet quality remain, and the evidence is
186 inconsistent. In response to the call for more external validity, some researchers have begun to
187 conduct field experiments (Crosetto et al., 2016, 2019; Dubois et al., 2021; Julia & Hercberg, 2017a;
188 Van Den Akker et al., 2022). For instance, Dubois et al. (2021) found the Nutri-Score to be the most
189 effective label in improving the nutritional quality of supermarket purchases by especially increasing
190 the purchase of the most nutritious alternatives. In contrast, van den Akker et al. (2022) performed
191 a lab-in-field experiment regarding the choice for Nutri-Score labeled cereals and found that adding
192 the label did not promote healthier alternatives or discouraged unhealthier alternatives in a choice
193 experiment with six products. However, the one product for which they found a significant effect
194 was also the most nutritious alternative. Nevertheless, there is a paucity of naturalistic field
195 experiments on whether the Nutri-Score is effective in promoting healthier choices.



196

197 **Figure 1:** The five grades of the Nutri-Score label. Figure adapted from (Julia & Hercberg, 2017c)

198 In sum, the goal of this study was to find proof for and compare the effectiveness of two different
199 labels (calorie labels and the Nutri-Score) on changing free snack choices.

200 Specifically, the study assesses the following research question:

201 *What is the relative effectiveness of Nutri-Score and calorie labels in nudging participants'*
202 *free snack choices, compared to a no-label condition?*

203 To answer this, the number of healthier snacks chosen under each labeling scheme is modeled and
204 compared to a control condition without any labels.

205 3. Methods

206 The current research applies a controlled between-subject design evaluating the effect of nutrition
207 labeling on the free snack choices made by adults (ca. 600) in a non-commercial professional setting.
208 The study protocol was approved by the Ethics Committee for the Social Sciences and Humanities of
209 the University of Antwerp (SHW_20_89). One treatment (nutritional labeling) was studied with three
210 conditions: no labeling (control), calorie labeling and Nutri-Score labeling. Treatments were not
211 randomly assigned to participants because of the constraints imposed by the setting of the study
212 (further details below). Effects are estimated as the odds of each type of snack being chosen in each

213 of the three conditions, over assumed independent snack choices across conditions pooled over two
214 periods of time in the same day (n = 739). In view of this, a number of potentially relevant
215 confounders are included in the analysis of results.

216 3.1 Population and Participant Sample

217 As the study was designed as a field study in a natural environment, individual characteristics of the
218 participants were not measured. The organizing professional association reported that 44.6% of
219 their members is of female gender (Callens, 2021). The average age of lawyers in the Netherlands,
220 Belgium's neighbouring country, is 43 years old ("Aantal Advocaten Blijft (Licht) Groeien, Percentage
221 Vrouwen Neemt Ook Toe," 2022). In terms of lifestyle, the Dictionary of Occupational Titles (4th ed.)
222 ("DOT") published by the U.S. Department of Labor under code 110.107.010 defined a "sedentary
223 occupation" as one that requires 6 hours of sitting and 2 hours of walking/standing throughout the
224 day (United States Department of Labor & Library, 1991). As the legal practice indeed demands
225 prolonged periods of sitting, sometimes exceeding 40 hours a week (Bush, 2022; *Lawyers Should*
226 *Embrace Physical Activities*, n.d.), the occupation of a lawyer is considered sedentary.

227

228 3.2 Setting

229 The data collection took place in Antwerp during a Flemish lawyer conference with about 600
230 participants. Participants gathered in the atrium before and after sessions for registration, lunch,
231 and coffee breaks. There was a two-sided bar (in the form of a rectangle) towards the rear of the
232 atrium at which participants could order drinks (included in the conference fee). The bar could be
233 accessed from all sides, with bartending staff in the center. Snacks were presented on both bar
234 counters for participants to take freely. Three different snacks (cookies, miniature candy bars
235 (Celebrations), and nuts (Mani Berry & Nuts) were jointly offered. In line with current dietary advice,
236 the nuts are considered the healthier option, due to their high protein content and the presence of
237 essential fatty acids (Harvard T.H. Chan School of Public Health, n.d.; Sabaté, 2010). This makes them
238 an excellent component of a balanced diet, offering high nutritional quality and promoting positive
239 effects on weight loss and maintenance (Bullo et al., 2011; Harvard T.H. Chan School of Public
240 Health, n.d.). The cookies (6.5 g each) and Celebrations candy bars (10.5 g each) were individually
241 wrapped, and the nuts were pre-portioned in packets of 50 grams. The weight differed between the
242 three snacks, but the weight difference was identical in all three conditions (control, Nutri-Score
243 label and calorie label). The labeling conditions were uniformly distributed along the bar, and the
244 distance between the conditions was kept constant throughout the entire day. The choice of snacks
245 did not vary throughout the day.

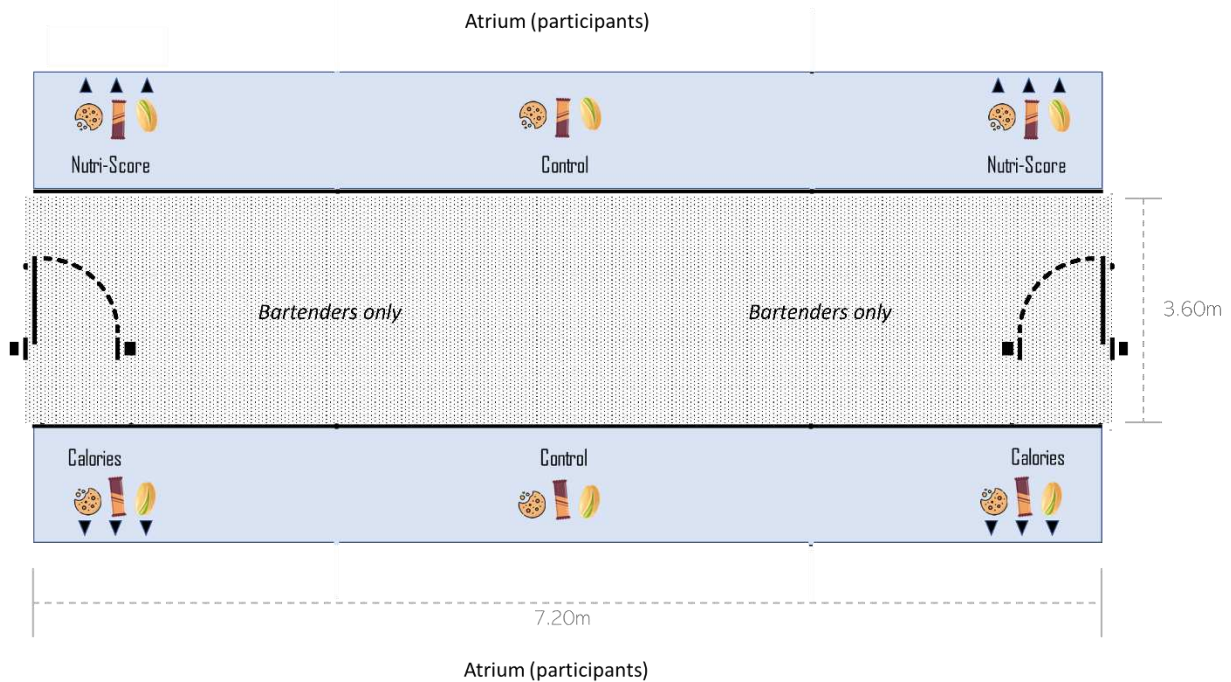
246 3.3 Design and Study Administration

247 The experiment consisted of two observational periods: A morning period from 08:30 until 09:45
248 (arrival and registration) and an afternoon period from 15:00 until 16:00 (afternoon coffee break).
249 Participants either registered for a full day without dinner (8:30-18:00) or with dinner (which started
250 at 18:00). As participants received lunch between 12:00 and 13:30, this was ruled out as an
251 observational period. The snacks were replenished before each period to avoid scarcity or popularity
252 effects. As part of the labelling intervention, three treatments were installed: a condition without
253 labels (control), one with Nutri-Score and one with calorie labels (see Figure 2 and Figure 3).
254 Nutritional information needed to calculate the labels was obtained from the packaging. Since the
255 nuts, cookies and candy bars were all offered as snacks during the coffee breaks, they can be
256 regarded as viable alternatives to one another. Therefore, it is appropriate to compare the Nutri-
257 Score values to make valid comparisons among these options. The labels were printed and added

258 (when present) in front of the snacks, facing the participants. Participants were unable to approach
259 the snack plates from behind, because this area was restricted to the bartending staff. Calories were
260 both expressed per portion and per 100 grams. Portion sizes were based on commonly defined
261 portion sizes in Belgium. E.g., the daily recommended amount of nuts is 25 g according to the
262 Belgian dietary guidelines.

263 Three bowls with different snacks and the accompanying labels (for the labeled conditions) were
264 placed together at six different locations across both bar counters (see Appendix A). The conditions
265 were sufficiently spaced (*see figure 2*) to not interfere with one another. The atrium was a standing-
266 room only. Participants could move freely throughout the room and alongside the bar. Although the
267 field experiment did not allow for formal randomization, participants were not restricted as to which
268 bowl they could access. Each treatment (no label/calorie label/Nutri-Score label) was presented at
269 two locations, one at each side of the bar, and the position of the two treatments was alternated
270 between the two sides. The control condition was always in the center of the bar, the two treatment
271 conditions were mirrored on the two sides of the bar.

272



273

274 **Figure 2:** Sketch of the experimental set-up. The location of the Nutri-Score and calorie labeling conditions were
275 interchanged throughout the day. The conditions were evenly spaced and the distance between conditions was kept
276 constant throughout the day. The shaded area was restricted to bartenders only. The black triangles show the direction of
277 the labels.



278

279 **Figure 3:** Set-up of the bowls as seen by participants under the calorie treatment (top) and the Nutri-Score treatment
 280 (bottom). The pictures show mirrored versions.

281 **3.4 Outcome Measure**

282 The weight of the bowls was measured before and after each observational period to obtain an
 283 objective outcome measure, as recommended by Bucher et al. (2016). This resulted in measures of
 284 total weight taken (grams) from each bowl within each location (two locations for each condition),
 285 each condition (three conditions) and each observational period (two time periods). The total weight
 286 was converted into the total number of snacks taken by dividing the total weight by the average
 287 weight per individual portion (6.5 g for the cookies, 10.5 g for the candy bars, and 50 g for the nuts).
 288 The number of snacks was then converted to individual choices. When a participant took a snack, we
 289 treated this as one choice between the three bowls: they could either take a cookie, a candy bar, or
 290 a pack of nuts. This was coded as a choice experiment, with "1" representing the chosen snack and
 291 "0" the two other options, for a total of 739 snacks. No observations were discarded within the two
 292 predetermined measurement periods. By this, two implicit assumptions were made. The first
 293 assumption is the independence of samples. This assumes that every sample (snack) is chosen
 294 independently of every other sample, both for snacks chosen by the same person as well as by
 295 different participants. This thus means that if the same person goes back three times or picks three
 296 snacks at the same time, they are treated as three independent choices. Second, as in many discrete
 297 choice experiments, the Independence of Irrelevant Alternatives assumption is made. This assumes
 298 that adding or removing alternatives does not affect the odds of the remaining outcomes. It is also
 299 referred to as the Red Bus/Blue Bus problem (for more information, see Horowitz, 1991).

300 Throughout the day, hunger levels were also measured (single item, 7-point Likert scale 0 = not
 301 hungry at all – 7 = very hungry) for a sample of participants who completed an unrelated survey at
 302 the researchers' conference stand in the same room. The survey was part of another, unrelated
 303 experiment and participants to this survey were not linked to their snack choices at the bar. In total,
 304 51 participants (26 male, 25 female) reported on their hunger levels. On a 7-point scale, 6% of
 305 participants indicated to be very hungry (7), 21% of participants indicated not be hungry at all (0).
 306 The average age of these participants was 41.6 (\pm 13.5). Participants self-selected into this separate
 307 study.

308

309 3.5 Analysis

310 The data were analyzed by a multinomial logistic regression. The outcome variable is choice
 311 (cookie/candy bar/nuts). The independent variable is Treatment (no label/calorie label/Nutri-Score
 312 label). Location (right/center/left of the bar) and Time are controlled for by adding them as
 313 covariates to the regression model (*equation below*). The counter on which the snacks were offered
 314 did not significantly influence consumers' choices and was therefore left out of the model. The
 315 baseline Treatment is the control condition (i.e., the condition without a label). The references for
 316 choice are nuts, for Location center, and for Time the morning session (8:30-9:45). The following
 317 models were tested, with $P_{candybar}$ the chance (0-1) that a person picks a candy bar, P_{cookie} the chance
 318 they chose a cookie and P_{nuts} the chance they chose nuts.

319

$$\begin{aligned}
 320 \quad \ln\left(\frac{P_{candybar}}{P_{nuts}}\right)_{center,morning,control} &= b_{10} + b_{11} Location_{right} + b_{12} Location_{left} + b_{13} Time_{afternoon} \\
 321 &+ b_{14} Treatment_{Nutri-Score} + b_{15} Treatment_{calories} \\
 322 &
 \end{aligned}$$

323

$$\begin{aligned}
 324 \quad \ln\left(\frac{P_{cookie}}{P_{nuts}}\right)_{center,morning,control} &= b_{20} + b_{21} Location_{right} + b_{22} Location_{left} + b_{23} Time_{afternoon} \\
 325 &+ b_{24} Treatment_{Nutri-Score} + b_{25} Treatment_{calories} \\
 326 &
 \end{aligned}$$

327 The natural logarithm \ln is

328 > 0 if $P_1/P_2 > 1$ or if the chance of choosing snack 1 is higher than the chance of choosing
 329 snack 2. Snack 1 is more popular.

330 $= 0$ if $P_1/P_2 = 1$ or if the chance of choosing snack 1 is equal to the chance of choosing snack
 331 2. The snacks are equally popular.

332 < 0 if $P_1/P_2 < 1$ or if the chance of choosing snack 1 is lower than the chance of choosing
 333 snack 2. Snack 2 is more popular.

334 4. Results

335 4.1 Descriptive Statistics

336 In total, 739 snacks were taken during the experiment: 410 Celebrations candy bars (average weight
 337 10.5 g), 175 Jules Destrooper cookies (average weight 6.5 g), and 154 packs of nut trail mix (50 g
 338 each). 224 snacks came from bowls without a label, 321 from bowls with a calorie label, and 194
 339 with a Nutri-Score label. *Tables 1 and 2* show the number of times each snack was chosen for each
 340 treatment (*Table 1*) and within each observational period (*Table 2*). 427 snacks were taken off the
 341 front of the bar, 213 off the back side.

342

343 **Table 1:** Snack counts within each treatment

	Treatment		
	Control	Calorie label	Nutri-Score label

	Candy Bar	133 (1398g)	195 (2049g)	82 (867g)
Choice	Cookie	48 (312g)	71 (464g)	56 (361g)
	Nuts	43	55	56

344

345 **Table 2:** Snack counts within each observational period. Morning is from 8:30 – 9:45, and afternoon is from 15:00 – 16:00.

		Observational Period	
		8:30-9:45	15:00-16:00
	Candy Bar	63	347
Choice	Cookie	46	129
	Nuts	59	95

346

347 4.2 Model outcomes: possibility to predict choice by treatment

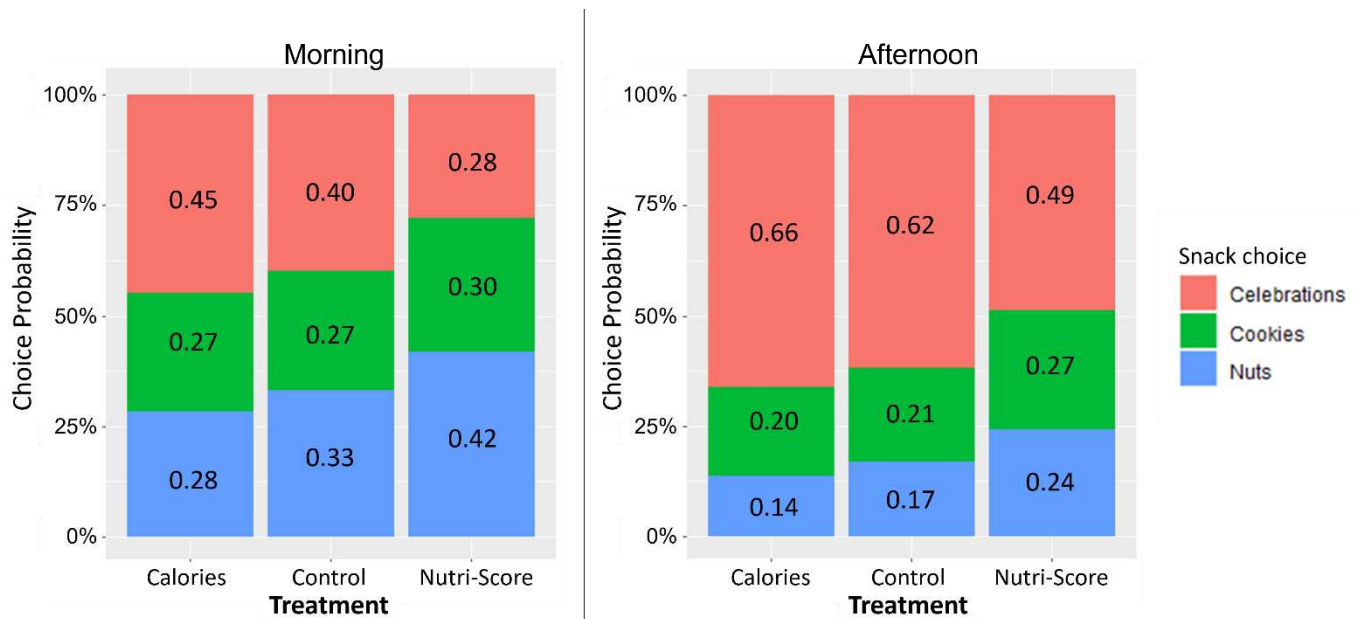
348 The coefficients of the model are given in *Table 3*. The calorie treatment did not significantly affect
 349 participants' snack choices compared to the control condition ($p_{\text{candy bar}} = 0.08$ and $p_{\text{cookie}} = 0.39$). In
 350 contrast, adding a Nutri-Score label makes people relatively more likely to choose nuts over the two
 351 other snacks than in the control condition (log odds_{candy bar} = -0.612, log odds_{cookie} = -0.132). However,
 352 the relative difference is only significant for the choice of nuts over candy bars ($p_{\text{candy bar}} < .001$ and
 353 $p_{\text{cookie}} = 0.48$).

354 **Table 3:** Coefficients and p-values for the logistic model. The reference outcome is choosing nuts, the reference location is
 355 the center, the reference time is the morning session, and the reference treatment is the control condition without labels.
 356 * shows statistical significance or $p < 0.05$.

Variable	Candy bar			Cookie		
	Log Odds	Standard Error	P-Value	Log Odds	Standard Error	P-Value
Intercept	0.3258748	0.2316432	0.159	-0.1865311	0.2612795	0.475
Location Left	0.3218185	0.1704880	0.059	0.5065882	0.1898771	0.007*
Location Right	-0.6568764	0.1558195	<0.001*	-0.4829533	0.1801819	<0.001*
Time Afternoon	1.1390778	0.2208532	<0.001*	0.4666677	0.2429877	<0.001*
Treatment Nutri-Score	-0.6118523	0.1676977	<0.001*	-0.1323587	0.1851827	0.475
Treatment Calories	0.2767944	0.1572272	0.078	0.1559936	0.1812994	0.390

357

358 *Figure 4* shows the predicted probabilities for choosing one of the three snacks under each
 359 treatment and during each session. The first panel shows the morning session, and the right panel
 360 the afternoon session. It is clear that the Nutri-Score encourages the choice of the healthier
 361 alternative (nuts) and discourages the choice of candy bars, compared to the other treatments.
 362 Furthermore, the graphs suggest that nuts were more popular during the morning than in the
 363 afternoon. For candy bars, it is the other way around. This effect of Time is unlikely to be caused by
 364 feelings of hunger. In *Appendix A (figure A1)*, the measures of hunger of participants in an unrelated
 365 survey at the same conference, are plotted against the time of taking the survey. Although these
 366 participants are not matched to their snack choices, it is clear that there is no apparent trend in
 367 hunger for the sampled participants throughout the day. This suggests that hunger is not a confound
 368 for snack choice during the different observational periods and therefore not the reason for the
 369 different snack preferences between the morning and afternoon.



370

371 **Figure 4:** Probabilities of choosing nuts (blue), a candy bar (red), or a cookie (green) under the three treatment conditions.
 372 Left panel: Morning session; Right panel: Afternoon session.

373

374 5. Discussion

375 In an attempt to curb obesity and prevent non-communicable diseases such as heart disease, stroke,
 376 diabetes, and other chronic conditions, getting consumers to make healthier food choices is crucial
 377 (World Health Organization, 2022). Moreover, unhealthy diets have been linked to several non-
 378 communicable diseases, not solely driven by an individual’s weight (Campbell & Duhaney, 2016;
 379 Harvard T.H. Chan School of Public Health, n.d.; Jannasch et al., 2017; Lassale et al., 2016; Menotti et
 380 al., 2014; Sotos-Prieto et al., 2017; Yu et al., 2018). Snacks, often consisting of refined carbohydrates
 381 with high glycemic loads, and low protein- and fiber contents, are a hard-to-control contribution to
 382 the energy intake of consumers (Baskin et al., 2016; Kant & Graubard, 2015). They are particularly
 383 tempting when offered in proximity to drinks or in a social context, like at work or a conference
 384 (Baskin et al., 2016; Cruwys et al., 2015; Herman, 2015; Schüz et al., 2018). Interventions that aim at
 385 reducing the daily energy intake with only 50-100 kcal a day could be sufficient to overcome weight
 386 gain (Hill et al., 2003). Similarly, interventions improving participants diet quality, e.g., in terms of
 387 trans fat, sugar and salt intake or increasing fiber and protein intake, can help prevent the onset of
 388 several illnesses (Boeing et al., 2012; Harvard T.H. Chan School of Public Health, n.d.; He et al., 2014;
 389 Mytton et al., 2014; Ruxton et al., 2009). Finding effective means to implement such an intervention
 390 is thus of paramount importance. The current field study aimed to investigate whether calorie labels
 391 and Nutri-Score labels could lead people to choose a healthier snack at a conference where snacks
 392 were offered freely at the bar. Specifically, the snacks offered were nuts (healthy choice), candy
 393 bars, and cookies.

394 The results of this field study showed that calorie labels were unsuccessful in steering
 395 consumers toward healthier snack choices. On the contrary, the chance of choosing nuts decreased
 396 when a calorie label was added. However, the most intuitive reason for this could be the caloric
 397 density of the nuts: both the calories per 100 grams and the calories per portion size were highest
 398 for this option (see figure 3). This immediately shows one of the drawbacks of using a calorie label:
 399 the label does not discriminate between energy content from desired sources (protein and

400 unsaturated fat) versus calories that should be avoided (saturated fats and sugar) (Niewold, 2019). It
401 also does not consider the amount of fiber or salt, as other summary labels do -including the Nutri-
402 Score (Julia & Hercberg, 2017a). Thus, while the label was seemingly successful in steering
403 participants towards the lower caloric options (away from the nuts), this created an unwanted
404 adverse effect. Unfortunately, the lower caloric options are not always the healthiest ones, as was
405 the case in our study. For chronic disease prevention as well as weight control, both the quantity as
406 well as the quality and food sources of calories and nutrients matter. Several studies indeed confirm
407 that eating nuts might help with weight control instead of contributing to weight gain (Harvard T.H.
408 Chan School of Public Health, n.d.). This is in stark contrast with the other two snack options that
409 contain high amounts of refined carbohydrates (Harvard T.H. Chan School of Public Health, n.d.). The
410 calorie label thus seems to promote the least healthy alternative in this case, but it should be noted
411 that the differences between the calorie label and the control condition were never significant. This
412 lack of effect of calorie labels is consistent with prior field experiments that also document
413 insignificant or minor effects of descriptive nutritional labeling on choice (Cadario & Chandon, 2020).
414 Hence, our results coupled with those from others (Kiszko et al., 2014; Mantzari et al., 2020; Swartz
415 et al., 2011; Vasiljevic et al., 2018, 2019) cast doubts on the effectiveness of caloric labels.

416 Conversely, the Nutri-Score label significantly decreased the odds of choosing a candy bar
417 over the nuts. It also lowered the chances of choosing cookies over nuts, but this was not significant.
418 The same intuition holds as with the calorie labels, but this time the label clearly showed
419 participants the healthier option. The nuts were assigned a green Nutri-Score B, while the other two
420 options were graded with the least healthy red E (see Figure 3). Interestingly, participants also took
421 fewer snacks in total from the Nutri-Score labeled bowls. Whether reducing snacking overall is
422 another positive effect of the label, remains a question for future research. In contrast to the
423 conclusion of a recent review on nutritional labels (Ikonen et al., 2019), the Nutri-Score label does
424 appear to be effective in nudging consumers away from unhealthier choices toward the healthier
425 alternative. This might be because the review of Ikonen et al. (2019) does not specifically focus on
426 the Nutri-Score, but pools together the results of so-called "Interpretative summary indicator
427 labels", such as the Nutri-Score, Health Star Rating, and health logos. It is likely that the Nutri-Score
428 performs better than other nutritional labels, in line with the supermarket study of Dubois et al.
429 (2021). The higher absolute effectiveness of the Nutri-Score in changing the choice for candy bars
430 compared to the calorie labels can be explained by the label type: a meta-analysis by Cadario and
431 Chandon (2020) found a slightly higher effect for evaluative labels than descriptive labels. In fact,
432 previous research has already identified the Nutri-Score as the most understandable and effective
433 nutritional label (Egnell et al., 2018; Finkelstein et al., 2019; Van Den Akker et al., 2022) compared to
434 other labels on the front of food packages. This is another explanation as to why the changes in
435 choice caused by the Nutri-Score are in a more favorable direction than the changes caused by the
436 calorie label: it is easier to understand and more effective in directing consumers to the healthier
437 choice. A second explanation for the different results is the fact that the reviewed studies by Ikonen
438 et al. (2019) were set in a purchase situation. The current study explores the effects of nutritional
439 labels on free snacks, meaning there is no confounding effect of price.

440 The significant effect of Time was not the result of differences in hunger. First, hunger levels
441 of conference participants did not show a trend throughout the day. Furthermore, the research of
442 Cheung et al. (2017) shows that hungry participants make as many (un)healthy choices as satiated
443 participants when put in a social proof condition. It is reasonable to assume that a conference
444 applies as a social proof condition. Nevertheless, Time significantly influenced choice in this study.
445 Participants were more likely to choose nuts in the morning and candy bars in the afternoon. A
446 possible reason for this could be self-control (Honkanen et al., 2012; Salmon et al., 2014; Vohs &

447 Heatherton, 2000). Given that the day was filled with lectures, it is likely that the consumers' self-
448 control resources got depleted and it became increasingly difficult to resist temptation (Vohs &
449 Heatherton, 2000). This reasoning finds its grounds in the research by Muraven and Baumeister
450 (2000), who describe self-control as a limited, consumable resource. It finds further support in
451 experimental evidence, like the study of Baskin et al. (2016). In fact, Baskin et al. (2016) showed that
452 time of day was a significant predictor of snacking incidence, with consumers taking more snacks as
453 the day progressed. Other plausible explanations are summarized in the review of Spence (2021).
454 Even though the lighting and ambient temperature were kept constant and participants'
455 chronotypes were previously found irrelevant for the choice of sweets (Schubert & Randler, 2008),
456 several cultural and psychological factors may lead people to choose different foods at different
457 times of the day (Spence, 2021).

458 Our results, thus, provide important insight into the role of Nutri-Score labels on snack
459 choices. They extend previous work regarding the effectiveness of labels on snack choices by
460 showing that the Nutri-Score is effective in steering consumers towards healthier choices in a real-
461 life social environment, but calorie labels aren't (Folkvord et al., 2021; Hagmann & Siegrist, 2020;
462 Poquet et al., 2019). They hereby clearly show that it is possible to use small interventions in the
463 food environment to help people make healthier choices (Nicolaidis, 2019; Skov et al., 2013;
464 Swinburn et al., 2011). It has been shown that consumers want to be informed about their food's
465 characteristics like allergens or provenance (Roberto et al., 2009), about the calories in their food
466 (Vasiljevic et al., 2019) and about its relative healthiness (Aguenaou et al., 2021; Loureiro & Gracia,
467 2006). It is thus of no surprise that nutritional labels are generally well-accepted by the population
468 (Cadario & Chandon, 2019). Additionally, previous studies have shown that nutritional labels and
469 especially the Nutri-Score can aid people in identifying (Hagmann & Siegrist, 2020) healthier options
470 and improve their purchase intention in online and laboratory studies and artificial field experiments
471 (De Temmerman et al., 2021; Van Den Akker et al., 2022). At present, the final yet essential
472 questions to answer are whether the success of these labels can be extended to naturalistic settings
473 and whether they are also effective when snacks are free. This study shows that it is indeed possible
474 to steer consumers towards a healthier alternative with a Nutri-Score label. Moreover, it shows that
475 the Nutri-Score clearly outperforms calorie labels. This paper thereby contributes to the body of
476 evidence that has been on the rise since the Nutri-Score's development, but lacks consistency over a
477 variety of contexts and designs so far (Braesco & Drewnowski, 2023). Finally, it demonstrates that
478 the probability of choosing the healthier option declines throughout an intellectually intensive day
479 and that this is unlikely to be caused by feelings of hunger.

480

481 6. Study limitations and future research

482 As Chandon et al. (2022) communicate in their recent review on healthy eating interventions, there
483 are significant differences between "lab eating" and "free-living eating" and a paucity of
484 experiments bridging this gap. Therefore, the naturalistic setting of this research is one of the main
485 strengths and results in outcomes that are high in external validity. Whilst this certainly offers
486 relevant insights to practitioners and politicians, it is important to acknowledge that it also has its
487 limitations.

488 First of all, there was no data collection on any socio-demographical or other personal
489 characteristics of the participants (e.g., dieting goals, BMI, and pre-existing medical conditions like
490 metabolic disorders, brand familiarity, and nutritional knowledge). While this was a logical choice for
491 the naturalistic setting of the experiment, it resulted in our inability to correct for certain baseline
492 differences among participants. Additionally, as the conference offered a sample of participants with

493 similar backgrounds and comparable socioeconomic classes, it is reasonable to assume that the
494 sample does not represent a country's general population. Therefore, future research should repeat
495 this set-up with a mix of different participants to ensure generalization, while also trying to measure
496 baseline differences between participants. Furthermore, the impact these factors may have on an
497 individual's predisposition to develop obesity, irrespective of their response to health-promoting
498 interventions, should not be disregarded. Second, the two assumptions underlying the model
499 construction might not hold. It was not possible to account for the number of snacks each
500 participant took. This limitation is not necessarily problematic, as previous literature on calorie labels
501 (Vermeer et al., 2011) and the Nutri-Score (Van Den Akker et al., 2022) found that a primarily
502 positive effect of nutritional labels on choice of alternative was not followed by a compensatory
503 effect on subsequent portion size choice. Also, considering the substantial quantity of snacks
504 consumed (amounting to over 13 kg), it is reasonable to infer that individual participants did not
505 exert a significant impact on the overall outcomes. If desired, future research could solve the
506 abovementioned limitations by using a personal identifier (e.g., a personalized RFID tag) to link
507 participants to their choices. In this case, participants may be linked to their individual (repeated)
508 choices and a more robust model (e.g., an RC MNL or Hierarchical Bayesian estimation) can be used
509 to account for the diversion of the IIA assumption and individual heterogeneities (see, for example,
510 Godden et al., 2023). One remark has to be made concerning the portion sizes used in the caloric
511 labels. Since there isn't a universally agreed-upon standard for indicating portion sizes, this study
512 used national dietary guidelines and commonly accepted portion sizes as a reference. In the future,
513 it may be worth investigating how altering these relative portion sizes could also serve as an
514 effective nudge, as suggested by previous research (e.g., Do Vale et al., 2008). It remains unexplored
515 whether changing this portion size would indeed be an effective nudge, considering that it is still
516 obligatory to also express the calories per 100 grams.

517
518 Third, as with any study, there is a trade-off between external and internal validity. Increases to
519 external validity (such as by setting up a field experiment) come at the cost of sacrifices to the
520 internal validity of a study. While the field study offers many benefits in terms of ecological validity,
521 concessions had to be made that potentially challenged the internal validity of the study. First,
522 participants had the freedom to select the location where they took their snacks. However, this
523 approach does not eliminate the possibility of self-selection bias as participants may have self-
524 selected into a specific condition, making it less preferable than a completely random allocation
525 method. Additionally, we acknowledge that the control condition in our study was not subject to the
526 same rotation across different locations as the two labeling conditions. Future research should
527 consider implementing rotation across all conditions, effectively controlling for the potential
528 influence of snack location. Moreover, it is possible that participants' exposure to a certain label on
529 one occasion (e.g., in the morning) further influenced their subsequent snack choices, even when
530 there was no or a different label present at that time. If individuals were indeed exposed to different
531 label types (either at a specific moment or throughout the day), we would expect their snack choices
532 in the three conditions to converge. As a final potential threat to the internal validity of the findings,
533 participants who may have noticed the difference in labeling may have deduced that they were
534 being monitored as part of an experiment and adjusted their behavior accordingly. To mitigate
535 potential observer bias, we followed the guidelines proposed by Källemark et al. (2022) as outlined
536 in the methodology section, thus minimizing the potential impact of this bias as much as possible.
537 Nevertheless, while participants' awareness of being observed may have exerted an effect on the
538 overall choice of nuts (the healthier snack), it does not explain the observed differences in snack
539 choices between the conditions. The fact that we still found a significant effect of the Nutri-Score
540 label suggests the robustness of our findings. On the other hand, even though previous research has
541 found that up to 91% of participants pay attention to a nutritional label and that the time to first

542 fixation is similar for different labels (Nohlen et al., 2022), it is possible that participants did not
543 notice the labels and were not affected by them. However, this again confirms the robustness of our
544 findings, as this would only have decreased the effect size found for the Nutri-Score. The difference
545 in effectiveness between the calorie labels and Nutri-Score might be explained by a difference in
546 visual attention to the label. Previous research found that a color-coded label was more attended to
547 than the same monochrome label (Bialkova et al., 2014) and that the Nutri-Score required less time
548 to process than a monochrome label (Gabor et al., 2020). It is thus possible that the effects of calorie
549 labels might become significant if consumers are forced to pay attention to them, but it can be
550 argued that this is against the nature of the experiment.

551 Finally, the portion size of the nuts (50 g) was larger than the portion sizes of the candy bars (10.5 g)
552 and cookies (6.5 g). It could have reduced the positive effect of the Nutri-Score label if participants
553 considered the portion of nuts too big for a snack, similar to the effect of large versus small packages
554 of potato chips in the study of do Vale et al. (2008). However, as this was the same for all conditions,
555 the effect would have been similar for both labels. Moreover, models assuming that participants
556 take more than one cookie at a time, only mildly differ in coefficients and show identical results in
557 terms of magnitude (log odds), direction (sign of the log odds) and significance (based on the p-
558 value). Future research could repeat the current experiment with other types of snacks, weights and
559 nutritional contents (e.g., calories) to generalize the findings. It is noteworthy, however, that while
560 reducing portion sizes may effectively reduce consumers' (unhealthy) calorie intake, this approach
561 does not receive approval from the majority of the public (Cadario & Chandon, 2019). In contrast,
562 most consumers have no problem accepting a nutritional label and even prefer it (Nohlen et al.,
563 2022). Nevertheless, it has been generally accepted that combining healthy eating nudges, and
564 especially different types of nudges (e.g., combining a behavioural nudge and a cognitive nudge), can
565 yield the most impactful and sustainable results in promoting healthier dietary choices (Broers et al.,
566 2017; Cadario & Chandon, 2020). Future research should, therefore, aim to identify the most
567 effective combination of nudges, with the Nutri-Score being one potentially successful component,
568 as indicated by this study.

569 As the first of its kind, this study extends our insights into the usefulness of nutritional labels for free
570 snack choice in a social context. Future research may dig deeper into the underlying mechanism of
571 the current findings. Moreover, to fully inform the European government in deciding on a
572 mandatory food label, the effectiveness of the Nutri-Score label in guiding snack choice should be
573 tested more frequently in naturalistic settings, allowing the participants to be themselves.

574 7. Conclusion

575 Calorie labels did not significantly change free snack choices at a conference. Nutri-Score labels
576 significantly increased the probability of choosing nuts over candy bars. Participants were more
577 likely to choose the healthier option (nuts) in the morning than in the afternoon, during an intensive
578 intellectual day. This study shows how nutritional labels can be used to nudge consumers towards
579 healthier free snack choices and extends current insights with results from a naturalistic field
580 experiment. Limitations with respect to the naturalistic setting have been formulated. Future
581 research should aim to combine several healthy eating nudges to assess their cumulative impact,
582 with, for instance, relative portion sizes integrated alongside nutritional labeling.

583

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593

594 Appendix A: Measures of Hunger

595

596 Prior studies have demonstrated that hunger alters individuals' food selection behavior. For
597 example, in comparison to selecting food items in a satiated state, individuals experiencing hunger
598 tend to exhibit lower consistency between their food choices and their stated preference for
599 utilitarian foods (Otterbring et al., 2023) and a greater inclination to select high-caloric foods with
600 greater speed (Garlasco et al., 2019).

601 In an effort to rule out hunger as a covariate, even though this was a naturalistic field experiment,
602 participants to the same conference who participated in an unrelated survey at the conference
603 booth of the University of Antwerp were asked how hungry they were (single item, 7 point Likert
604 scale: 0 = not hungry at all – 7 = very hungry). In *Figure A1* these measures of hunger are plotted
605 against the time of taking the survey. The absence of a discernible pattern indicates that the hunger
606 levels among conference participants did not vary significantly at specific intervals throughout the
607 experiment. This finding implies that hunger does not serve as a confounding factor in the selection
608 of snacks during the various observation periods.



609

610 **Figure A1:** Hunger measures plotted against the time of taking the survey.

611

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