The Role of Category Average Reference Points and Health Halos in Purchase Intentions of Healthy and Hedonic Food

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Health claims can cause obsessive calorie intake. Two studies show that category average reference points can impact purchase intentions via healthiness perception. Moreover they can limit the consumption enhancing effect of health claims as they help correct biased calorie expectations. This applies to hedonic and healthy categories.

[to cite]:

[url]:
http://www.acrwebsite.org/volumes/1017541/volumes/v42/NA-42

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EXTENDED ABSTRACT

Although we eat and drink every day, we often find it difficult to discern the nutritional quality of food (Chernev 2008). Marketers have known this for a long time and responded with respective health claims on food packages, such as “low-fat,” “organic” or “creamy” (Wertenbroch 1998). Research has shown, however, that such claims can be misleading and sometimes cause malnutrition, including obsessive calorie intake (Chandon and Wansink 2007; Wansink and Chandon 2006).

Nutrition labels are assumed to correct for misleading health claims (Chandon 2013). They are mandatory on most prepackaged products in the US and Europe in order to make consumers’ choices healthier (Burton, Garretson, and Velliquette 1999). Existing labels, however, possess only limited effectiveness when it comes to real purchase behavior (Kiesel and Villas-Boas 2013; Mathios 1998; Mojduszka, Caswell, and Harris 2000; Sacks, Rayner, and Swinburn 2009; Sacks et al. 2011). One reason is that most existing numerical labels are harder to interpret than easy-to-understand verbal health claims (Kiesel and Villas-Boas 2013).

A promising avenue to solve the dilemma of unhealthy food choice is the use of average category reference points (CARPs) as a basis for comparative judgments (Viswanathan 1994). CARPs display the average amount of calories and key nutrients in one category and therefore qualify otherwise meaningless nutrition information such as “contains 200 calories.” Thus, external CARPs may correct potentially existing internal reference points, and make food look like vices or virtues (Chernev and Gal 2010).

Although reference points referring to a category average generally have been acknowledged as affecting choice construction (Bettman, Luce, and Payne 1998), existing research has not investigated the impact of such information on food choice. Even more importantly, it is unclear how CARPs can influence purchase intentions. A starting point is that CARPs can alter healthiness perceptions (Viswanathan and Hastak 2002). Healthiness perceptions, then, may translate into increased purchase intentions. For example, learning that a food item has a relatively high calorie content (compared to the ‘average item’ in the category) could reduce healthiness perceptions and stimulate expected guilt while choosing, independent of the absolute energy content. Conversely, learning that a food item such as ice cream has relatively few calories (compared to the ‘average ice cream’) could take away the guilt and justify increased consumption even when it still contains more calories than most other food.

Healthiness perceptions, however, also depend on the category, as different product categories are perceived as more or less healthful per se. While healthful food is often perceived as less tasty (Balasubramanian and Cole 2002; Raghunathan, Naylor, and Hoyer 2006), tasty products are perceived as high in negative nutrients and calories (Belei et al. 2012). In contrast, a product from a healthful category is expected to be low in calories and negative nutrients like sugar and therefore more healthful (a “category halo”). It is also known that different category types affect consumers differently depending on self-control. Consumers with high self-control tend to satiate faster on unhealthy foods, yet consumers with low self-control do not show that pattern for healthy foods (Redden and Haws 2013; Smith 2004). We find in Study 1 that CARPs affect purchase intention and that this effect is fully mediated by healthiness perception. In addition, the positive effect of CARPs is stronger in hedonic product categories. Moreover, we show the moderating role of self-control to be twofold. A low CARP can help consumers with high self-control to consume less of the healthy category; yet, high CARP can lead to positive disconfirmation of the products caloric content. The same applies to the hedonic category for consumers with low self-control. They tend to over-consume on hedonic products. The high CARP leads to positive disconfirmation of the product caloric content and thus purchase intention increases.

In Study 2 we extend previous literature that found that health claims impact healthiness perception (e.g., Ford et al. 1996; Garretson and Burton 2000; Kozup, Creyer, and Burton 2003), by showing that the positive effect of health claims on healthiness perception is not existing but for hedonic categories. Moreover, our findings replicate results of previous studies that showed that health claims lead to increased purchase intention (Kiesel and Villas-Boas 2013) by decreased consumption guilt. Most importantly, we examined if the health halo effect generalizes to conditions where the CARP signals conflicting information. In line with our contention, the halo effect disappeared when the CARP was low. This is an important addition to existing research as consumers have been shown to limit their search to the health claim if present (Kiesel and Villas-Boas 2013; Williams 2005). Howlett et al. (2009) showed that the health halo can be weakened after comparison of actual calorie content and expectation on the calories content. Expectations, however, are subject to bias (Wansink and Chandon 2006), while a CARP is an unambiguous anchor.

From a policy perspective category average reference points represent a powerful mean to nudge consumers towards the choice of more healthy products. CARPs could be used as additional front of pack label or as shelf tag. But policy-makers should be very careful in specifying categories. Our results show that, apart from the ability to reveal betrayal with health claims, high category average reference points can lead to justification of the consumption of unfavorable food, both for rather healthy or hedonic product types. Mis-specification of categories could lead to high CARPs and thus to overconsumption of bad nutrients. Another issue in using CARPs is that food manufacturers could increase category specific averages by introducing products high in bad nutrient. More easily, food manufacturers could communicate self-invented overly high average category points using multiple channels in order to impact consumers to choose “worse” products. We strongly encourage policy-makers to prohibit food makers to communicate such information.

REFERENCES


