



**COGENT  
RESEARCH**  
A LIMITED LIABILITY COMPANY

## A-CLAIM VS B-CLAIM STUDY

---

### ANALYTICAL REPORT

---

4/3/2006

Conducted for:  
Nestlé Nutrition

Conducted by:  
Cogent Research

## TABLE OF CONTENTS

I. INTRODUCTION AND METHODOLOGY.....	1
II. ANALYSIS .....	4
III. RESEARCH RESULTS.....	6
IV. APPENDIX:.....	9

## I. INTRODUCTION AND METHODOLOGY

**Objectives & Design.** This report summarizes the findings of quantitative research conducted by Cogent Research on behalf of Nestlé. The purpose of the study was to determine whether or not consumers – in this case mothers of infants 12 months or younger – can distinguish between two levels of health claims about an infant formula product. Specifically, the research was to examine the level of scientific certainty ascribed to each claim.

The study had a monadic design, meaning each respondent was exposed to only one claim, thus removing order or wording preference bias. Comparisons were made between the responses of two independent but statistically similar groups.

Respondents were shown one of two health claim statements for an infant formula product, as shown below, and then asked to use a 7-point scale to indicate the certainty of the scientific evidence that feeding a 100% whey-protein partially hydrolyzed formula will reduce the risk of healthy babies developing common food allergy symptoms.

- **CLAIM LEVEL A:**  
FDA advises that clinical research in healthy infants with family history of allergy conclusively shows that feeding a 100% Whey-Protein Partially Hydrolyzed formula reduces the risk of common food allergy symptoms.
- **CLAIM LEVEL B:**  
Emerging clinical research in healthy infants with family history of allergy shows that feeding a 100% Whey-Protein Partially Hydrolyzed formula may reduce the risk of common food allergy symptoms.

The method of data collection for this study was a web survey. All data was collected from November 14-21, 2005. The sample for this study was provided by Lightspeed Research. Lightspeed Research maintains a panel of approximately 1.5 million members. Lightspeed Research manages panelists' exposure to surveys, removing panel members from the pool for a specified time after every completed survey. The size, quality, and diversity of the panel afford us the ability to select samples that have been balanced to the US census, or pre-selected based upon specific criteria (such as gender or age) when looking to survey a small and specific population (as in this case). The latter approach, known as quota sampling, has been validated and is widely accepted by the research community.

To ensure that our quota sampling does not introduce any significant biases, the outgoing sample was selected at random from the panel. Lightspeed Research's sample selection program chose a random sample of panelists with certain pre-determined broad demographic characteristics (having a child one year or younger) to whom invitations were sent, based on estimated response rates to achieve the desired number of completes. The questionnaire then contained screening criteria to ensure that we surveyed the appropriate subsets of the population. Specifically, screening criteria ensured all respondents:

- Have a baby 12 months or younger
- Formula feed or intend to begin in the next month

We also monitored the respondent pool closely to ensure that various types of mothers were well represented on key issues such as:

- Total number of children in household
- Age of infant
- Mother's education level

A total of 600 women were surveyed, 300 of whom evaluated Claim Level A and 300 of whom evaluated Claim Level B. The claim to which each woman was exposed was chosen at random. The two cells are sufficiently comparable on key demographic variables, with no statistically significant differences.

When reviewing results, keep in mind that a sample of 300 interviews is subject to a sampling error of  $\pm 5.7$  percentage points (at the 95% confidence level). In other words, we can be 95% confident that the percentage of women in the true population who would answer "y" is within 5.7 percentage points of the percentage who answered "y" in our sample. Note that 5.7 points is the difference required for statistical significance at the midpoint of the range of responses, assuming an equal distribution. In some cases, at the high or low end of the distribution, the actual sampling error may be smaller. We have tested each individual statistic in the data for statistical significance.

Comparisons between the groups of 300 women who saw each of the two claims are subject to a sampling error of  $\pm 8.0$  percentage points (at the 95% confidence level). That is, the difference in percentage of women in each group who answer "y" must be at least 8.0 points to be statistically significant.



- The mean ratings for the two claims are significantly different at the 95% confidence level:
  - **4.65 for Claim A** [*FDA advises that clinical research in healthy infants with family history of allergy conclusively shows that feeding a 100% Whey-Protein Partially Hydrolyzed formula reduces the risk of common food allergy symptoms.*]
  - **3.65 for Claim B** [*Emerging clinical research in healthy infants with family history of allergy shows that feeding a 100% Whey-Protein Partially Hydrolyzed formula may reduce the risk of common food allergy symptoms.*].
- Top-2 box ratings for the two claims are significantly different: Nearly one in three respondents (31%) rate Claim A “6” or “7” on a seven-point scale, with “7” indicating the scientific evidence is “very certain” that “feeding a 100% whey-protein partially hydrolyzed formula will reduce the risk of healthy babies developing common food allergy symptoms.” In comparison, fewer than one in ten respondents (8%) rate Claim B “6” or “7” on a seven-point scale, with “7” indicating the scientific evidence is “very certain” that feeding the formula “may reduce the risk of common food allergy symptoms.”
- Bottom-2 box ratings for the two claims are significantly different: Fewer than one in ten respondents (9%) rate Claim A “1” or “2” on a seven-point scale, with “1” indicating the scientific evidence is “very uncertain.” In comparison, more than one in five (22%) rate Claim B “1” or “2” on a seven-point scale.

### III. RESEARCH RESULTS

1. Are you:	<b>Total</b>
n=	600
Male	0%
Female	100%

2_1. Including yourself, how many people in your household are 18 years or older?	<b>Total</b>
n=	600
1	5%
2	85%
3	6%
4	3%
5 or more	1%

2_2. How many people in your household are under age 18?	<b>Total</b>
n=	600
1	43%
2	33%
3	16%
4	6%
5 or more	3%

3. Are you the mother of an infant 12 months old or younger?	<b>Total</b>
n=	600
Yes	100%
No	0%

4. Which statement best describes how you are presently feeding your most recent baby?	<b>Total</b>
n=	600
I breast feed only and do not feed any formula	3%
I breast feed and supplement with formula	22%
I formula feed only	75%

5. [IF Q6=1] In the next month, do you plan to start feeding formula to your baby?	<b>Total</b>
n=	16
Yes	100%
No	0%

6. [CLAIM LEVEL A] Please take a few moments to carefully read the following statement about infant formula.

*FDA advises that clinical research in healthy infants with family history of allergy conclusively shows that feeding a 100% Whey-Protein Partially Hydrolyzed formula reduces the risk of common food allergy symptoms.*

Based on what the statement says or suggests, how certain is the scientific evidence that feeding a 100% whey-protein partially hydrolyzed formula will reduce the risk of healthy babies developing common food allergy symptoms?

	<b>Total</b>
n=	300
1 - Very uncertain	6%
2	3%
3	10%
4	30%
5	20%
6	14%
7 - Very certain	17%
MEAN RATING	4.7

6. [CLAIM LEVEL B] Please take a few moments to carefully read the following statement about infant formula.

*Emerging clinical research in healthy infants with family history of allergy shows that feeding a 100% Whey-Protein Partially Hydrolyzed formula may reduce the risk of common food allergy symptoms.*

Based on what the statement says or suggests, how certain is the scientific evidence that feeding a 100% whey-protein partially hydrolyzed formula will reduce the risk of healthy babies developing common food allergy symptoms?

	<b>Total</b>
n=	300
1 - Very uncertain	10%
2	12%
3	21%
4	36%
5	14%
6	3%
7 - Very certain	5%
MEAN RATING	3.6

9. Now a few final questions for statistical purposes only. How many months old is your new baby?

	<b>Total</b>
n=	600
Less than one month	1%
1 month, but less than 2 months	4%
2 months, but less than 3 months	7%
3 months, but less than 4 months	8%
4 months, but less than 5 months	7%
5 months, but less than 6 months	7%
6 months, but less than 7 months	7%
7 months, but less than 8 months	9%
8 months, but less than 9 months	9%
9 months, but less than 10 months	11%
10 months, but less than 11 months	10%
11 months, but less than 12 months	8%
12 months	12%

10. What was the last year of school you completed?

	<b>Total</b>
n=	600
Some high school	3%
High school graduate	22%
Some college	38%
College graduate	26%
Post graduate studies or degree	9%
A program after high school other than college	2%

#### IV. APPENDIX:

Demographic composition of subgroups that saw each claim:

	Claim A	Claim B
<b>Number of children</b>		
First-time mothers	40%	47%
Mothers with two or more children	60%	53%
<b>Age of most recent baby</b>		
0-3 months	20%	20%
4-6 months	20%	22%
7-9 months	31%	27%
10-12 months	29%	31%
<b>Education</b>		
High school or less	25%	25%
Some college or college degree	65%	63%
Postgraduate	10%	12%

*NOTE: The data included in this report has not been weighted. However, when the data is weighted to make the samples identical, the findings do not change.*

**For more information, contact:**

Christy White

Principal

Cogent Research

125 CambridgePark Drive

Cambridge, MA 02140

Phone: 617-441-9944

Fax: 617-441-9966

[www.cogentresearch.com](http://www.cogentresearch.com)