7                Neural Correlates of Attitudes and Risk Perception for Food Technology Topics

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24                                                      Abstract

Food technologies provide numerous benefits to society and are extensively vetted for safety.

However, many technological innovations still face high levels of skepticism from consumers.

To promote development and use of food technologies, it is critical to understand the

psychological and neurobiological processes associated with consumer acceptability concerns.

The current study uses a neuroscience-based approach to understand consumer attitudes and

perceptions of risk associated with food technologies and investigate how such attitudes impact

consumer's processing of information related to food technologies. We used functional magnetic

resonance imaging (fMRI) to measure brain activation while participants processed infographics

related to food technology topics. For technology topics perceived as riskier (antibiotics and

hormones), activation was higher in areas of the lateral prefrontal cortex that are associated with

decisional uncertainty. In contrast, technology topics that were viewed more favorably

(sustainability and animal welfare) tended to activate the ventromedial prefrontal cortex, a region

that processes positive affect and subjective value. Moreover, for information about hormones,

the lateral PFC activation was associated with individual differences in resistance to change in

risk perception. These results reveal how attitudes and risk perception relate to how the brain

processes information about food technologies and how people respond to information about

such technologies.

*Keywords:* food technology, human subjects, risk perception, fMRI, prefrontal cortex,

attitudes

**1. Introduction**

Innovations in food technology hold great promise for improving food quality, availability, safety, and sustainability. However, like other technological innovations (Kleijnen, Lee, & Wetzelsa, 2009), new food technologies are often met with resistance in the marketplace. Consumers tend to be neophobic when it comes to foods (Pliner & Hobden, 1992), particularly foods produced with new technologies (Cox & Evans, 2008), even when expert scientists have vetted the technologies for safety (Hansen, Holm, Frewer, Robinson, & Sandøe, 2003). Such neophobia presents a barrier to development of novel technologies as well as their adoption by food producers. The high cost of investment in bringing technologies to market or deploying such technologies in food production can become financially risky when faced with the high potential for rejection by consumers (Lusk, Roosen, & Bieberstein, 2014). Thus, to promote development of safe, effective technologies for improving food sustainability and safety, it is critical to understand the psychological and neurobiological factors associated with consumer attitudes and risk perception for new technologies.

Consumer research on food technologies has uncovered several factors that influence acceptance and resistance to innovation, as well as people's willingness-to-pay for such innovations in the marketplace (Lusk et al., 2014). At a proximal level, people's attitudes and perceptions of risk play a critical role in influencing acceptance of new food technologies. Compared to organic or "natural" foods, foods produced with technologies are often viewed as having fewer benefits and higher risks (Frewer, Shepherd, & Sparks, 1994; Saba, Rosati, & Vassallo, 2000). Thus, consumers are often willing to pay more to avoid technologies such as genetically modified organisms (GMOs), hormones, or antibiotics than they are to purchase food created with them (Lusk et al., 2015; Lusk et al., 2014; Roosen et al., 2015). The origins of

consumers' less positive attitudes and heightened risk perception to food technologies remain

elusive, but factors that are known to play a role are the perceived naturalness of foods or a

technology (Tenbült, de Vries, Dreezens, & Martijn, 2005; Siegrist, 2008), tendencies to

overweight low probability risks (Slovic, 2016), perceived controllability of exposure (Siegrist,

Stampfli, Kastenholz, & Keller, 2008), familiarity (Tenbült, de Vries, Dreezens, & Martijn,

2008), trust in science (Lang & Hallman, 2005; Siegrist, Cousin, Kastenholz, & Wiek, 2007),

and personal ethical beliefs (Sparks, Shepherd, & Frewer, 1995).

76           More recently, research on food technology has begun to turn to neuroscience techniques

to understand the cognitive mechanisms related to consumer acceptance of food technology at a

finer-grained level (Bruce et al., 2014; Lusk et al., 2015). Neuroscience research on food

technologies follows the recent focus in behavioral economics on "neuroeconomic" approaches

that have proven useful for understanding a number of basic economic phenomena, such as loss-

aversion (Rick, 2011), temporal discounting (Kable & Glimcher, 2007; Ballard & Knutson,

2009), and how uncertainty influences preferences and perceptions of value (Platt & Huettel,

2008; Rushworth & Behrens, 2008). Multiple brain systems track basic behavioral economic

constructs like value and risk, including "hot" affective systems that tend to be governed by more

automatic, affective information, and "cool" systems that promote more deliberate, rational

decision making (Bechara, Damasio, & Damasio, 2000; Goel & Dolan, 2003; McClure, Laibson,

Loewenstein, & Cohen, 2004).

88           Much of neuroeconomic research has focused on the prefrontal cortex (PFC) as critical

for value-based decision making processes. The prefrontal cortex is part of the frontal lobe and

governs much of our higher-level cognitive functions such as planning and reasoning, as well as

numerous social and affective processes. In terms of its role in value-based decision making,

there are key differences within the prefrontal cortex between the lateral PFC (on the sides of the

brain) and the medial PFC (the middle part of the brain, behind the forehead and above the eyes).

The lateral PFC tends to track measures of economic risk and uncertainty, which are related to

variability in possible outcomes associated with a decision (Kahnt, Heinzle, Park, & Haynes,

2011; Schonberg, Fox, & Poldrack, 2011). It typically activates more when a variety of different

outcomes are possible and less when an outcome is completely predictable. The lateral PFC also

tends to track individual differences in risk aversion, such as people's tendency to overvalue sure

bets (Christopoulos, Tolber, Bossaerts, Dolan, & Schultz, 2009). On a mechanistic level, the

lateral PFC is thought to be involved in resolving conflicting information (e.g., outcome

variability) in cases of higher uncertainty, due to its more general role as a center for cognitive

control (Koechlin, Ody, Kouneiher, 2003; Badre & D'Esposito, 2009).

103             In contrast to the lateral PFC, the medial PFC, particularly the ventral part of it (the

underside; ventromedial PFC), tends to track the overall subjective value of a decision (Levy &

Glimcher, 2012; Bartra, McGuire, & Kable, 2013). When a decision has high subjective value,

this brain region tends to activate more, and when there is low subjective value, it activates less.

The medial PFC tracks individual differences in preference for immediate reward (Kable &

Glimcher, 2007) and sensitivity to gains versus losses (Tom, Fox, Trepel, & Poldrack, 2007).

Whereas the lateral PFC is often depicted as a "cold," rational part of the brain, the medial part is

often depicted as part of the "hot," affective part of the brain due to its sensitivity to immediate

reward (McClure et al., 2004; Krain, Wilson, Arbuckle, Castellanos, & Milham, 2006).

However, both are sensitive to cognitive and affective information. The lateral PFC is involved

in basic regulation of cravings and emotional responses (Delgado, Gillis, & Phelps, 2008; Kober

et al., 2010; Kahathuduwa, Boyd, Davis, O'Boyle, & Binks, 2016; Kahathuduwa et al., 2018).

Likewise, the ventromedial PFC integrates cognitive and more visceral affective information

when computing a subjective value (Roy, Shohamy, & Wager, 2012). For example, the

ventromedial PFC tracks people's tendency to rate wines as more subjectively valuable when

they are associated with a higher price tag than when the equivalent wine is low priced ("price

placebo effect"; Plassmann, O'Doherty, Shiv, & Rangel 2008; Plassmann & Weber, 2015).

Following general neuroeconomic research, fMRI research on the neurobiological

underpinnings of food technology choice has focused on how the PFC engages when making

willingness-to-pay judgments. Consistent with the role of the lateral PFC in resolving uncertainty

and conflict, lateral PFC has been found to be more active when participants are considering

multi-attribute food choices that require them to consider both price and technology attributes

(e.g., the price of milk and that it was produced from cloned cows; Lusk et al., 2015), and when

participants opt for a higher-priced organic food to avoid a technology (Linder et al., 2010; Lusk

et al., 2015). Likewise, activation in the lateral PFC tends to track relevant individual differences

that contribute to price-technology conflicts, such as trait-level food technology neophobia

(Bruce et al., 2014) and how much people adjust their willingness-to-pay judgments based on

advertising (McFadden et al., 2015). In contrast, the ventromedial PFC has been found to be

more associated with people's final willingness-to-pay decisions in price-technology trade-offs

(Crespi et al., 2015), consistent with its role in computing subjective value. In some cases, such

signals from the PFC have been shown to contribute above and beyond many well-established

demographic and individual difference contributors to willingness-to-pay, leading to the

conclusion that functional neuroimaging provides incremental value in predicting and

understanding consumer choices regarding food technology tradeoffs (Lusk et al., 2015).

With the relatively limited neuroscience research on how people perceive food

technologies, there are many open questions regarding how the brain processes information

about food technology and how these processes influence potential consumer behavior. Given

the critical role that information and education about technologies plays in consumer acceptance,

one important question is how the brain processes information about food technologies and how

this processing relates to perceived risk and consumer attitudes. Perceived risk and attitudes are

key pre-decisional factors that influence not only how consumers will behave when given a

choice between foods produced with new technologies or more "natural" foods, but also how

receptive they will be to new information (Hart et al., 2009; Sears & Freedman, 1967; Smith,

Fabrigar, & Norris, 2008).

In the present study, we scanned individuals while they viewed infographics describing

six food technology topics: hormones, antibiotics, vaccines, GMOs, animal welfare technologies,

and sustainability technologies (for task design see Figure 1; Supplemental Figures 1-6). The

infographics were selected from materials designed for marketing purposes and are publicly

available on Merck Animal Health's website prior to the study (https://www.merck-animal-

health-usa.com/about/us/veterinary-consumer-affairs/animal-welfare). Thus, the infographics

used are highly ecologically valid in the sense that they are from actual informational campaigns

aimed at influencing consumer acceptance. Based on an online norming study (described below),

we expected attitudes and risk perception to vary across the food technology topics such that

hormones and antibiotics would be perceived as most risky and associated with less positive

attitudes, GMOs and vaccines as intermediate, and animal welfare and sustainability

technologies as least risky and associated with the most positive attitudes.

In terms of the brain, we hypothesized that the same basic lateral and medial PFC regions

that are involved with processing decisional information in willingness-to-pay judgments would

be involved in processing the food technology infographics and that such processing would be

associated with subsequent risk perception and attitudes. To this end, we hypothesized that

lateral PFC activation would track the perceived riskiness of the technologies and would be

associated with less positive attitudes for the technologies. Specifically, we expected that the

higher perceived risk and less positive attitude technologies would be associated with more

lateral PFC activation. This prediction is based on the fact that lateral PFC often tracks

uncertainty and risk aversion in choice contexts (Schonberg et al., 2011). Likewise, we

hypothesized that ventromedial PFC activation would track positive attitudes such that the

technologies with the most positive attitudes would activate the ventromedial PFC more. This

prediction is based on the fact that ventromedial PFC often tracks liking and positive value, even

outside of choice contexts (Roy et al., 2012).

In addition to our primary goals, which are to examine how risk perception and positive

attitudes relate to brain activation during infographic processing, we also examine how

individual differences in risk perception and attitude change (from pre- to post-infographic) are

associated with individual differences in brain activation. These individual difference effects can

augment the primary associations by answering whether, for example, the hypothesized risk-

related processing in lateral PFC is generally associated with improving risk perception and

attitudes or if it is associated with resisting such change.

**2. Materials and Methods**

*2.1 Participants*

Three hundred and ninety four participants completed an online version of the study

(online norming study) to provide normative data for the neuroimaging study. These participants

were recruited through Amazon's Mechanical Turk and paid $4 for participation. Fifty-three

participants completed the neuroimaging study. Neuroimaging participants were paid $25 and

given an extra $5 for a willingness-to-pay auction that was administered after all of the

infographic fMRI scans were completed. All protocols were approved by the Human Rights

Protection Program (HRPP) of Texas Tech University (Proposal number: IRB2018-730;

Approved: 9/6/2018).

*2.2 Behavioral Protocols*

*2.2.1 Online Norming Study*

The online norming study (Figure 2) consisted of a demographic section, attitudes and

risk perception survey sections for each of the following technology/animal welfare topics:

antibiotics, vaccines, hormones, GMOs, sustainability, and animal welfare, followed by a set of

non-technology specific standardized questionnaires: Food Technology Neophobia, Trust-in-

Science, and Chemical Reasoning.

The demographics section included questions asking people to report their age, sex,

ethnicity, first language, zip code (or country) in which they spent majority of childhood, highest

level of education completed, political orientation, organic buying behavior, whether they eat

meat, and whether they subscribe to any dietary philosophies (vegan, vegetarian, etc.; see Table

1).

The attitudes and risk perception survey sections went through each technology, one at a

time, such that all attitudes questions were asked about a given technology prior to beginning the

next. The online norming group did not see any infographics. The order of the technologies was

balanced across participants using a Latin square to neutralize potential order effects. For each

technology, the attitudes surveys began with a brief description of the technology, which

participants were required to briefly summarize in their own words prior to moving on (to ensure

participants were paying attention). Next, participants were asked two questions each on

familiarity, subjective norms, trust in science (with respect to the specific technology), past

behavior with the technology (consuming or avoiding food produced with the technology), and

perceived control. All of these factors are known to potentially impact attitudes and risk

perception (Aizen, 1991; Slovic, 2016). We used wordings that are consistent with these existing

risk perception studies and the Theory of Planned Behavior (see Supplemental Table 1 for

wording for all questionnaires). However, in some cases we had to adapt wordings from typical

wordings to ensure that the same basic questions could be used for all of the technologies of

interest. After the preliminary questions, participants answered a section on risk perception and

two sections on attitudes: one on more personal attitudes and one on more general benefits. Each

of the risk and attitude sections contained eight questions, two of which were designated as "pre"

questions and added to the pre-surveys for the neuroimaging study, and six were designated as

"post" questions and asked after the infographic exposure in the neuroimaging study. Because no

infographics were shown in the online norming study, both "post" and "pre" questions were

asked at the same time in the online norming study. Examples of the wording of all questions in

the attitudes sections are listed in Supplemental Table 1.

After completing the technology-specific questions for each of the six technologies,

participants completed standardized surveys on Food Technology Neophobia scale (Cox and

Evans, 2008), a standardized Trust in Science Scale (Bak, 2001), and a set of questions from a

study on chemical risk perception (Kraus, Malmfors, & Slovic, 1992) that includes factors

related to dose-to-response reasoning, attitudes toward chemicals, chemical risk reduction, and

miscellaneous questions on chemical risk perception.

*2.2.2 Neuroimaging Study*

The neuroimaging study (Figure 2) included a demographic section, a pre-infographic

exposure survey taken outside of the scanner, infographic exposure and attitude/risk perception

surveys done inside the scanner for each technology, and a set of willingness-to-pay judgments

and non-technology specific standardized questionnaires (Food Technology, Neophobia, Trust-

in-Science, chemical risk perception) taken after all of the infographic exposures and technology

specific attitudes/risk perception surveys.

The demographic section was the same as that used for the online norming study, except

we also included a question asking for household income (Table 1). After the demographic

section, the participants completed a pre-infographic survey for each technology that included all

of the questions used in the norming study for familiarity, perceived norms, technology-specific

trust-in-science, past behavior with the technology, and perceived control, as well as two pre-

infographic questions on each of general attitudes, benefits, and risk perception.

In the infographic and attitude/risk perception section (see Figures 1 and 2), infographics

depicting the six food technology topics (antibiotics, vaccines, hormones, GMOs, sustainability,

and animal welfare; See Supplemental Figures 1-6 for the infographics used in the study) were

presented to participants separately in different scanning runs. The order of infographics was

balanced across participants using a Latin square. Within a run, participants were presented with

an infographic depicting one of the technologies three times. Prior to each infographic

presentation, participants were cued/primed (2 seconds) with what information they would be

rating next ("attitudes", "benefits", and "risks"). Priming participants about the type of questions

they would be answering next was done to encourage participants to actively process the

infographics during the presentation blocks and to scan all of the information in the infographic

across the three presentations. The cues were separated by variable duration fixation cross (2, 3,

or 4s), which participants were simply told to keep their eyes on while awaiting infographics.

The fixation cross provides a baseline that helps to statistically isolate the responses to the

different task components. After fixation, the infographic was presented for 30s. After the

infographic was presented, fixation was briefly presented (5, 6, or 7 seconds) and then six post-

infographic Likert-type questions about risks or attitudinal information (attitudes or benefits)

were presented for 4 seconds each. During these questions, participants keyed in their responses

on a sliding scale that ranged from 1 (*strongly disagree*) to 5 (*strongly agree*) by using an MR-

safe button box held in their right hand. Finally, the risk and attitudes questions were also

separated by fixation, which averaged 4 seconds and was drawn from a truncated exponential

distribution. A second and third infographic cue, infographic presentation, and question period

would then begin until all questions were answered for an infographic.

265             After the primary infographic runs, participants completed a set of willingness-to-pay

judgments and the same Food Technology Neophobia, Trust-in-Science, and chemical risk

perception surveys as were used in the online norming study. The willingness-to-pay judgments

consisted of a Becker-DeGroot-Marschack (1964) style auction. In this auction, participants were

asked to bid from $1-$5 on a variety of food items produced with food technologies (see

Supplemental Figure 7 for an example trial). Participants were told that one of the food items

would be selected randomly at the conclusion of the auction for purchase using their $5

endowment. They were told that the cost of the item would be whatever they bid, and that the

probability a specific food item would be selected was based on how much they bid, such that a

$5 bid was 5x more likely to win than a $1 bid. They were also told to consider the portion for

each food item to be worth $5 retail and thus the rational choice was to bid however much they

were willing to pay for each item. The foods the participants evaluated were beef jerky, turkey

jerky, canned chicken, chili, coffee creamer, and frosting. Participants considered these foods

with each of the following technology related prompts: "Animals raised fully organic", "Animals

raised all natural", "Animals raised with hormone implants", "Animals previously vaccinated",

"Animals previously treated with antibiotics", "Animals raised with genetically modified (GM)

feed", "Animals raised with animal welfare technologies", and "Animals raised with sustainable

food technologies". Because some of the technology options do not exist for particular foods

(e.g., hormone implants are only used in beef production) or are impossible to verify through

labeling (type of feed), at the end of the study, participants were told that they could simply

select one of whatever food item they wanted from conventional, "natural" labeled, or organic

labeled versions of each of the food options. Six participants did not have willingness-to-pay

judgments properly recorded and were excluded from that analysis.

*2.3 Image Acquisition*

289             Imaging data were acquired at Texas Tech Neuroimaging Institute on a 3T Siemens Skyra

using a 20-channel head-coil. Functional images were acquired in the axial plane using the

Siemen's product EPI sequence: TR = 2.09 s; TE = 25 ms; $\theta$ = 70°; FoV= 192 x 192 mm; matrix

= 64 x 64; number of slices = 41, slice thickness = 2.5 mm; 0.5 mm gap. Slices were tilted to

reduce orbitofrontal dropout (Deichmann, Gottfried, Hutton, & Turner, 2003). In addition, a

high-resolution anatomical image was collected for each of the participants using an MPRAGE

sequence acquired in the sagittal plane: TR = 1.9 s; TE = 2.49 ms; $\theta$ = 9°; FoV = 240 x 240 mm;

matrix = 256 x 256 mm; slice thickness = 0.9 mm, slices = 192.

*2.4.1 Behavioral Data Analysis*

Participant averages were calculated for each of the behavioral measures by averaging

across the respective scale items for each construct (e.g., averaging across all post-infographic

attitudes questions for hormones to get a single hormone attitude average for each participant).

Group-level averages and standard deviations were then calculated for each measure by

averaging across participant means. Benefits and personal attitudes were combined a priori into a

single positive attitudes measure for all analysis (behavioral and neuroimaging) because there

were no *a priori* differences predicted between benefits and personal attitudes in terms of brain

processing or behavior, and because the combination of personal attitudes and benefits only

increased reliability (see Supplemental Table 2 for Cronbach's coefficient alpha for all risk and

attitude measures).

Behavioral data from both studies were analyzed using linear mixed-effects models

implemented in R's nlme package (Pinheiro and Bates, 2006). The overall analysis strategy was

to assess whether participants' mean risk perception, attitudes, and willingness-to-pay varied

significantly across the food technologies. Follow-up t-tests were used to test specific planned

contrasts for how these measures varied across the technologies. Specifically, for risk perception

and attitudes, we tested whether hormones and antibiotics were associated with higher risk

perception and less positive attitudes compared to (1) GMOs and vaccines and (2) animal

welfare and sustainability technologies. We also tested (3) whether GMOs and vaccines were

associated with higher risk perception and lower positive attitudes than sustainability and animal

welfare technologies. For the willingness-to-pay judgments, we tested whether participants were

more willing to pay for organic and natural foods relative to (1) animals raised/treated with

antibiotics and hormones, (2) animals raised/treated with GM feed and vaccines, and (3) animals

raised with sustainability and animal welfare technologies.

To test whether attitudes or risk perception changed from pre- to post-infographic in the

neuroimaging study, we adopted a standardization procedure using the online norming data. Z-

scored risk perception (*Zrisk*) and attitude (*Zatt*) variables were calculated for each participant *j*

and technology *t* by:

$Zatt_{jt} = (att_{jt} - \mu att_t)/\sigma att_t,$                                                  (1)

where $att_{jt}$ is neuroimaging participant *j*'s mean positive attitude rating for technology *t*, $\mu att_t$

is the mean positive attitudes rating for technology *t* from the online norming study, and $\sigma att_t$ is

the standard deviation of positive attitude ratings for technology *t* from the online norming study.

Four Z values were calculated for each technology and neuroimaging participant: one for each

pre- and post-infographic scale for risk perception and attitudes. The purpose of this

standardization procedure was to neutralize mean differences between the pre- and post- attitudes

questionnaires that were simply due to differences in the pre and post question means. By

removing the online norming study's means, any remaining differences between pre- and post-

infographic should be due to changes in risk perception or attitudes from viewing the

infographics. The differences between pre- and post-infographic Z's (post- pre) were tested using

separate t-tests for each technology. The Z difference (post - pre) measures are also used in the

fMRI analysis testing for individual differences in risk perception and attitude change (see *2.4.2*

*fMRI Data Analysis*).

*2.4.2 fMRI Data Analysis*

FMRI analysis was conducted using a standard three-level general linear model (GLM)

implemented in FEAT (FMRI Expert Analysis Tool) Version 6.00, part of FSL (FMRIB's

Software Library, www.fmrib.ox.ac.uk/fsl). Data were first pre-processed using rigid-body

motion correction and skull stripping. The first-level model included explanatory variables (EVs)

for cue presentation, infographic presentation (separate EVs for risk and attitudes prompts),

stimulus presentation for risk and attitudes questions, and participants' ratings as a parametric

modulator of the rating questions. First-level models also included nuisance regressors for

motion (6 motion parameters and their temporal derivatives) and regressors to "scrub" (censor)

volumes with framewise displacement > .9mm (Siegel et al., 2014). The first level model also

included temporal derivatives for each task variable, high-pass filtering, spatial smoothing (6mm

FWHM), two-stage registration to high resolution anatomical and standard space, and pre-

whitening to account for temporal autocorrelation. Second level models included EVs for each

infographic type (antibiotics, vaccines, hormones, GMOs, sustainability, and animal welfare) and

included one contrast weighting each infographic type by its average risk rating, and one contrast

weighting each infographic by its average attitude rating (ratings were z-scored to ensure

contrast weights summed to zero). These contrasts estimate, for each participant, which brain

regions correlate with between-infographic differences in risk perception and attitudes,

respectively. Third-level models tested the average group-level effect of the second-level

contrasts, treating participant as a random effect for population inference. Additional third-level

models were used to test whether brain activation for any of the infographics was associated with

change in attitudes or risk perception from pre- to post-infographic by correlating activation with

participants' post – pre infographic Z scores (see *2.4.1 Behavioral Data Analysis*).

The primary (cluster-forming) threshold for statistical maps was set at $z = 3.1$ ($p = .001$,

one-tailed), and corrected for multiple comparisons at $p < .05$ using a cluster-extent threshold

(number of contiguous voxels exceeding the $z = 3.1$ cutoff) based on Gaussian Random Field

Theory. Our hypothesized regions-of-interest (ROIs) were the lateral prefrontal cortex and

ventromedial prefrontal cortex; however, all statistical analyses were conducted and corrected for

multiple comparisons at the whole-brain level to allow for the possibility that additional regions

would track infographic-level differences in risk perception and/or positive attitudes.

**3. Results**

*3.1 Behavioral Results*

*3.1.1 Online Norming Study.*

373            Our primary question for the online norming study was whether the technologies differed

in terms of mean positive attitudes and risk perception (Table 2). Using linear mixed effects

models, we found significant variability in the technology means across each of the scale

measures (Table 3). Note that the pre- and post-scales are separated to align with the

neuroimaging study, but because no infographics were presented in the online norming study, all

measures were taken at the same time. Planned contrasts revealed that hormones and antibiotics

were perceived as significantly riskier and associated with significantly less positive attitudes

compared to (1) vaccines and GMOs and (2) sustainability and animal welfare technologies.

Vaccines and GMOs were perceived as significantly riskier and associated with significantly less

positive attitudes compared to sustainability and animal welfare technologies (Table 4). Means

and standard deviations for other survey measures are listed in Supplemental Tables 3 & 4.

*3.1.2 Neuroimaging Study.*

385            The behavioral results of the neuroimaging study were similar to the online norming

study. There was significant variability across the technologies in all risk perception and attitudes

measures (pre- and post-infographic; Tables 2-3; Figure 3). Like the online norming study,

hormones and antibiotics were perceived as significantly riskier and were associated with less

positive attitudes compared to (1) vaccines and GMOs and (2) sustainability and animal welfare

technologies. However, vaccines and GMOs did not significantly differ from sustainability and

animal welfare technologies for any measures except for the pre-infographic attitudes measure

where they were associated with significantly less positive attitudes (Table 4). Comparing post-

infographic to-pre- attitudes using Z difference scores (post – pre) that were normalized with

respect to the online norming study's scale means and standard deviations revealed that risk

perception decreased and positive attitudes increased for all technologies after viewing the

infographics (Table 5). Means and standard deviations for other survey measures are listed in

Supplemental Table 3.

398            Analysis of willingness-to-pay judgments also revealed significant variability across the

technologies (Table 2; Figure 4), with willingness-to-pay for organic and natural labeling

exceeding (1) hormones and antibiotics, (2) vaccines and GMOs, and (3) sustainability and

animal welfare technologies (Tables 4 & 6).

*Between-infographic differences in activation*

*3.2.1 Activation related to risk processing.*

Four clusters of activation were positively associated with mean risk ratings across infographics

(greater activation for higher risk; Figure 5; Table 7): one spanning the left dorsolateral

prefrontal cortex (PFC) and left inferior frontal gyrus (IFG; P < .001), two in bilateral superior

parietal lobe (left: $p = .002$; right: $p = .040$), and one in the superior and middle temporal gyrus

around the temporo-parietal junction ($p < .001$).

410            The observed lateral PFC cluster is part of the lateral PFC region that we predicted

would be associated with between-infographic differences in risk perception. To further illustrate

how activation in the lateral PFC varied between the infographics, we extracted mean risk and

attitude activation from each subject and plotted them along with the whole-brain results in

Figure 5. Note that, because these results are from a region already showing significant tracking

of between-infographic risk, it is not appropriate to run additional statistical tests on them

(Kriegeskorte, Simmons, Bellgowan, & Baker, 2009); however, the graph is useful to visualize

how the lateral PFC is tracking risk. The graph shows that lateral PFC activation tends to be

highest for the high perceived risk topics (antibiotics and hormones), but there is less

differentiation between the lower perceived risk topics (GMOs, vaccines, animal welfare, and

sustainability).

*3.2.2 Activation related to attitude processing.*

Six clusters of activation were positively associated with attitude differences between the

infographics (higher activation for more positive attitudes; Figure 6; Table 7), and nine clusters

were negatively associated with attitude differences between the infographics (higher activation

for more negative attitudes; Figure 6; Table 7). The positively associated regions included the *a*

*priori* region of interest ventromedial prefrontal cortex ($p = .049$), along with dorsal anterior

cingulate cortex (ACC; $p < .001$), two clusters in the precuneus (cluster 1: $p < .001$; cluster 2: $p =$

.026), the supramarginal gyrus ($p = .007$), and the lingual gyrus ($p = .030$).

The observed ventromedial PFC cluster is part of the ventromedial PFC region that we

predicted would be associated with between-infographic differences in attitude positivity. The

ventromedial PFC activation is depicted, along with the whole brain activation, in Figure 6. As

the bar graph illustrates, this region again primarily distinguished between the less positive

attitude (higher perceived risk; antibiotics and hormones) technologies and the more positive

attitude technologies. Note that the overall direction of activation is deflected negative in medial

PFC, which simply reflects its lower activation relative to the baseline fixation periods. This

negative deflection is typical in cognitive tasks as this brain region is part of the "default mode

network," a network of regions that tend to be more active during rest (Raichle, 2015).

Clusters that were negatively associated with between-infographic differences in positive

attitudes were bilateral (both sides of the brain) lateral PFC regions (both $p < .001$), the left of

which overlaps with the cluster revealed for the risk perception analysis, as well as superior

parietal regions that overlapped with the risk results (both $p < .001$). The lateral PFC region was

again part of predicted lateral PFC region that we expected to be negatively associated with

attitudes (more activation for less positive attitudes).

*3.2.3 Individual Differences in Attitude Change*

In addition to examining overall risk and attitudes associated with the infographics, we

wanted to examine whether any brain regions were predictive of an individual's change in

attitudes or risk perception toward the food technologies. To this end, we entered participants'

post - pre-infographic attitude and risk perception Z change scores into third-level whole-brain

GLM analysis to test which brain regions were significantly associated with individual

differences in risk and attitude change.

Two of these analyses showed significant results: change in risk perception for the

hormone infographic and change in attitudes for the GMOs infographic. For the hormone

infographic (Figure 7A & 7C; Table 7), we found four clusters that were significantly associated

with change in risk perception: bilateral lateral PFC (Left: $p = .01$; Right: $p = .006$), superior

frontal gyrus ($p = .01$), and frontal pole ($p = .006$). Specifically, these regions were positively

associated with change in risk perception, which indicates that these regions were associated

with either resisting change in risk (as most participants decreased) or increasing perceptions of

risk. These results help to interpret the within-subject lateral PFC effects, where the lateral PFC

was associated with higher risk perception and less positive attitudes across the infographics.

Specifically, they suggest that the lateral PFC may be inhibiting attitude change for hormones, as

opposed to encouraging attitude change. However, these results seem to be specific for

hormones, as they did not appear for any of the other risk change measures.

In addition to the hormone results, we found three significant clusters that were positively

associated with attitude change for GMOs (higher activation for more positive attitude change):

in the supramarginal gyrus ($p < .001$), the thalamus ($p = .01$), and left cerebral white matter ($p =$

.02; Figure 7B & 7C; Table 7).

**4. Discussion**

Food technologies play an important role in food quality, sustainability, and global food

security, yet technological innovation is often met with resistance from consumers. The present

study used neuroimaging to reveal how the brain processes information related to food

technology topics and how these neurobiological processes vary with perceived riskiness and

attitudes associated with the technologies. Participants viewed infographics about six different

food technology topics including antibiotics, hormones, GMOs, vaccines, sustainability, and

animal welfare. We found that activation in lateral PFC tracked between-infographic differences

in risk perception and attitudes and was most activated for the higher perceived risk / less

positive attitude topics (antibiotics and hormones). In contrast, ventromedial PFC activation

tracked positive attitudes and was most activated for the topics (GMOs, vaccines, sustainability,

and animal welfare) associated with more positive attitudes. In addition to our primary, between-

infographic results, we found individual differences in risk perception change for hormones was

negatively correlated with lateral PFC activation, suggesting that, for this topic, higher lateral

PFC activation was associated with resistance to change in risk perception. Finally, part of the

supramarginal gyrus was positively correlated with individual differences in attitude change for

GMOs.

The fMRI results present a critical step forward in understanding consumer attitudes and

risk perceptions surrounding food technology. Because education and dissemination of

information are necessary tools for reducing consumer resistance to technological development,

it is important to understand how processing such information is related to differences in

attitudes and risk perception. Functional neuroimaging provides a promising window into

consumer information processing as it has the potential to show—above and beyond self-report

surveys—which information is being processed overall more positively, by examining how

activation in regions associated with positive subjective value, such as the ventromedial PFC,

track attitudes and risk perception. It also has the potential to uncover which information is being

processed more effortfully, which tends to activate regions associated more with uncertainty

processing. Brain activation patterns can thus reveal how and whether informational campaigns

are leading to effective processing by consumers, and potentially index attitude and risk

perception change.

Despite the success of the current study at identifying regions that track attitude and risk

perception differences between food technologies, it is important to note that it remains unclear

whether attitudes are affecting how the information about the technologies is being processed or

are a reflection of the information the infographics contain. For example, the increased

ventromedial PFC may reflect more positive attitudes toward animal welfare technologies and

sustainability in general, or may reflect the fact that participants like the specific contents of

these infographics better. Future research will need to dissociate individuals' baseline affective

responses to and cognitive information about food technology topics from the information

present in the infographics and determine how these factors overlap. Nevertheless, the current

results point to connections between infographic processing and attitudes/risk perception that are

useful for understanding how consumers approach information about food technologies.

The present results complement and extend previous fMRI studies on willingness-to-pay

for foods (e.g., milk, eggs) produced with food technologies. Previous studies have largely

focused on the same lateral PFC regions that we identified here. The lateral PFC tends to be

more active when participants are considering both price and technology in willingness-to-pay

judgments, in addition to tracking participants' choices to opt for more expensive organic or

natural choices (Linder et al., 2010; Lusk et al., 2015). These results are related to the present

finding that the lateral PFC tends to activate more for the less liked, higher perceived risk

technologies and may reflect the same general uncertainty-related mechanism. When people are

confronted with technologies that conflict with their preferences, the lateral PFC may be engaged

to help them resolve this uncertainty. Likewise, consistent with previous findings that the

ventromedial PFC tracks the outcomes of willingness-to-pay judgments (Crespi et al., 2015), we

found the ventromedial PFC tracks overall attitudes for the technologies.

What is critical about the present results, relative to previous willingness-to-pay studies,

is that such lateral PFC and medial PFC activation are connected to information processing

surrounding technologies outside of choice-related contexts. This suggests that the activation

found in previous willingness-to-pay studies may not reflect simple trade-offs between price and

technology, but more basic pre-decisional attitudes that feed into such choice trade-offs. For

example, it may be the case that lateral PFC activation during a choice to pay more for organic

foods specifically reflects less positive attitudes toward technologies as opposed to uncertainty

about the decisions per se. Whether the PFC activation observed in previous studies reflects an

attitudinal "input" into the decision process or an "outcome" of the decisional process (see e.g.,

Davis, Love, & Maddox, 2009) is an important question for future research. In many cases,

attitudes, risk perception and decision processes are tightly coupled, and thus the practical

upshot—that people will pay to avoid technologies that generate conflict or uncertainty—may be

the same in both scenarios.

In addition to its higher activation for technologies that were perceived as higher risk and

associated with less positive attitudes, our finding that lateral PFC activation was negatively

correlated with individual differences in change in risk perception for hormones gives important

information about the lateral PFC's potential function in the present context. The lateral PFC has

been shown in previous studies to track individual differences in decision-making and cognitive

performance (Christopoulos et al., 2009; Schonberg et al., 2011; Worthy et al., 2016). Although

the lateral PFC has been shown to track participants' willingness to pay more to avoid food

technologies and is often associated with individual differences in risk aversion, other results

suggest that activation in lateral PFC may not always be associated with increases in negative

attitudes or perceived risk. Indeed, a recent study on willingness to pay for animal welfare

technologies in egg production has shown that lateral PFC may more generally reflect updating

of willingness-to-pay based on information (McFadden, et al., 2015). This could mean that

lateral PFC activation is not necessarily positively or negatively related to acceptance of a

technology, but rather simply reflects controlled deliberation (i.e., elaboration; Petty &

Cacioppo, 1986). The outcome of such controlled deliberation may be an increase or decrease in

attitudes (or potentially even no change), depending on several factors such as argument

strength, personal relevance, cognitive ability, and participants' motivations for changing their

attitudes (Petty, Briñol, & Priester, 2009). For example, here lateral PFC was associated with

resistance to changing risk perception for hormones, but perhaps with different arguments or

with participants motivated to change their risk perceptions, it may have been associated with

decreased risk perception.

Interestingly, in the present study, the results for risk perception and positive attitudes

were largely overlapping in the sense that the same lateral PFC regions that tracked between-

infographic differences in risk perception also tended to be negatively correlated with positive

attitudes (higher activation for less positive attitudes). These results suggest, in the present case,

that risk perception and attitudes may tap many of the same neurobiological systems. This is not

a surprise as risk perception is often tightly coupled with attitudes, and attitudes are a facet of

risk perception (Kraus, Malmfors, & Slovic, 1992). However, whether this observation will

extend to other areas of risk perception or attitudes remains an open question. One reason why

the present results may overestimate the neurobiological overlap between risk perception and

more general attitude processing is that many of the technologies were associated with low risk

overall. Indeed, only the highest perceived risk categories (antibiotics and hormones)

consistently exceeded the scale midpoint (2.5) and even then, they were well below the limits of

the scale (scale max = 5; see Table 2). It is possible that more extreme risks may tap additional

brain regions associated with fear and negative affect, such as the amygdala (Feinstein, Adolphs,

Damasio, & Tranel, 2011).

A second reason we may not have observed large differences between the brain regions

tracking attitudes and risk perceptions is that the infographics chosen for the study were

developed as tools for promoting food technologies and thus did not contain extensive risk

information (e.g., of possible antibiotic resistance from livestock use). Although some of the

infographics presented information relevant to aspects of chemical risk perception, such as dose-

to-response reasoning (e.g., in the hormones and antibiotics infographics; Kraus, Malmfors, &

Slovic, 1992), or risks to livestock from wild animals or the elements (animal welfare

infographics), none of the information would be expected to increase risk perception *a priori*.

Our goal in the present study was not to induce perception of risk *per se* by presenting risky

information, but instead to test how brain activation tracked people's general perceptions of risk

about the technologies, and how such risk perception related to infographic processing. In this

way, our study was consistent with the majority of risk perception studies on chemicals and food

technologies that simply seek to measure people's perceptions of risk without telling them

specific known risks of such chemicals and technologies (e.g., Cox & Evans, 2008; Kraus,

Malmfors, & Slovic, 1992). Future studies should consider testing whether presenting

participants with information intended to increase perceptions of risk would change which brain

regions track risk perception. Indeed, a mix of information that is congenial and uncongenial to

participants' baseline inclinations may better represent the real-life information environment and

provide opportunities to study the roles of selective information search and memory on

perceptions of food technologies (Hart et al., 2009).

590             With respect to whether brain regions involved in risk perception and attitude processing

may diverge in studies using riskier technologies or those giving participants more risk-specific

information, another possible limitation of the current study is that participants may not have

followed the cue to focus on risks or attitudes/benefits during infographic processing at all. For

example, it is possible participants focused on the same information in the infographics

regardless of whether they were cued to focus on risks or personal attitudes/benefits. As we

discuss above, the cueing procedure was primarily intended to encourage active processing of the

infographics and prime participants for what types of questions they would be answering next.

Because all participants received the same cues, it is not possible to definitively answer whether

this priming changed how participants processed the infographics. Indeed, the strong consistency

of the results across cue types suggests that the participants may not have changed their

infographic processing substantially based on the cues. However, the individual difference

results are suggestive that some risk and attitude-specific processing differences across cue types

may have occurred. For example, lateral PFC activation for hormones during the risk perception

blocks specifically correlated with individual differences in risk perception change for hormones,

but this association was not observed for attitude change during the attitude change blocks.

Nevertheless, our primary goal of examining how risk perception and attitudes relate to brain

processing during infographic viewing is not dependent on participants changing how they

processed the infographics based on the cues. For example, even if all infographic viewing

blocks were processed the same (or if there were no cues presented at all), our findings that brain

activation during infographic processing tracks subsequent between-infographic differences in

risk perception and attitudes presents a useful starting point for studying how information about

food technologies is processed by the brain.

A final limitation of the present study is that the infographics we employed contained a

wide range of varied strategies to convey the safety and utility of the food technologies. Thus, it

is not possible to separately conclude which aspects of the infographics may have been stronger

or weaker in influencing attitudes and risk perception, or brain activation, the most. For example,

the hormones infographic contains information highlighting the low tissue accumulation of

hormones from hormone implants, relative to other dietary sources of estrogen, information

about sustainability and environmental benefits, and the fact that the implants replace some

naturally occurring hormones that are removed by food production practices. Any of these

strategies could be leading to the observed attitude and risk perception results and activation for

this infographic. Future studies interested specifically in isolating cognitive and neurobiological

factors that lead to increases in attitudes and consumer acceptability may wish to constrain the

arguments to be presented in more serial fashion to isolate their individual effects. Nevertheless,

the use of preexisting real-world infographics offers a strong, ecologically valid simulation of

how participants may encounter information about food technologies outside of the laboratory.

The tight coupling we observed between participants' attitudes and risk perception and brain

activation suggests that fMRI may be useful for screening such infographics before public

information campaigns are deployed.

**4. Conclusions**

The present study examined the neurobiological processes engaged when participants

viewed information related to food technologies. We found that areas of the lateral PFC tracked

heightened risk perception and less positive attitudes for technologies, whereas the medial PFC

tracked positive attitudes. These results give a unique window into the minds of consumers, as

they illustrate how differences in attitudes and risk between food technologies affect basic

information processing in the brain. Connections between the basic attitudinal-risk processing

and individual differences in activation suggest that functional neuroimaging may be a useful

tool for assessing how people process informational materials about the benefits of food

technologies, which may lead to more effective strategies for combatting resistance to such

technologies. Indeed, to promote increasing advances in food quality, sustainability, and security,

technological innovation will continue to be critical, and consumer acceptance of such

innovation will continue to play a large role in determining whether it succeeds.

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810                                                     **Figure Captions**

812     **Figure 1.** An example of the infographics presentation phase for the fMRI task. One cycle of the

813     task would give participants a cue for what to consider in the following infographic (risks,

814     attitudes, benefits). Then they completed 6 survey questions before the next cycle began. The +'s

815     indicate random fixation that was interspersed to allow the fMRI signal to be separated between

816     different task components.

**Figure 2.** A depiction of the study flow for the online norming and neuroimaging studies.

**Figure 3.** Mean post-infographics behavioral ratings for risk (A) and attitudes/benefits (B). The

ratings were obtained during the scanning blocks after the infographic presentations. The error

bars indicate +/- 1 standard error of the mean. The y-axis ranges from 1-5 which includes the full

range of each rating scale.

**Figure 4.** Mean willingness-to-pay judgments from the Becker-DeGroot-Marschack (1964) style

auction in the neuroimaging study. A = Antibiotics, V = Vaccines, N = All natural, O = Organic,

W = Animal welfare, G = GMO, S = Sustainability, H = Hormones. The error bars indicate +/- 1

standard error of the mean. The y-axis ranges from $0 – $3.5 due to the small range of averages,

but bids were allowed up to $5.

**Figure 5.** (A) Brain regions positively correlated with between infographic differences in risk

perception during the risk processing blocks (red; greater activation = higher risk) and brain

regions negatively correlated with between infographic differences in risk during the risk

processing blocks (blue; greater activation = lower risk). (B) A bar graph depicting the pattern of

activation within the observed lateral PFC cluster. The red bars indicate activation in this region

during the risk processing blocks (when participants were asked to process the infographics with

respect to risk). The yellow bars indicate activation during the independent attitudes processing

blocks (when participants were asked to process attitudes or benefits).

**Figure 6. (A)** Brain regions positively correlated with between infographic differences in

attitudes during the attitude rating blocks (red; greater activation = higher attitudes) and brain

regions negatively correlated with between infographic differences in attitudes during the

attitude rating blocks (blue; greater activation = lower attitudes). **(B, C)** A bar graph depicting

the pattern of activation within the observed medial **(B)** and lateral **(C)** PFC clusters. The red

bars indicate activation in this region during the risk processing blocks (when participants were

asked to process the infographics with respect to risk). The yellow bars indicate activation during

the independent attitudes processing blocks (when participants were asked to process attitudes or

benefits).

**Figure 7. (A)** Results from the whole brain analysis identifying areas that are positively

correlated with change in risk perception for hormones. **(B)** Scatterplot illustrating association

between the right lateral PFC and change in risk perception for hormones. **(C)** Results from

whole brain analysis identifying areas that are positively associated with change in attitudes for

GMOs. **(D)** Scatterplot illustrating association between right supramarginal gyrus and change in

attitudes for GMOs. Note that the scatterplots in these figures are primarily suitable for

evaluating the relationship (e.g., the direction of association, linearity assumption) depicted in

the brain

864                                              Tables

865    Table 1
866
867    *Demographics and Baseline Food Preferences*
868

| Measure | Online Norming Study | Neuroimaging Study |
|---|---|---|
| *N* | 394 | 53 |
| *Age* | | |
|    Range | 21-72 | 18-43 |
|    *M (SD)* | 39.3 (10.4) | 23.1 (5.6) |
| *Sex* | | |
|    Male | 186 (47.2%) | 22 (41.5%) |
|    Female | 208 (52.8%) | 31 (58.5%) |
|    Other or prefer not to say | 0 (0%) | 0 (0%) |
| *Ethnicity* | | |
|    Asian-American | 18 (4.6% | 1 (1.9%) |
|    Black or African American | 30 (7.6%) | 9 (17.0%) |
|    Hispanic | 19 (4.8%) | 14 (26.4%) |
|    Native American | 2 (0.5%) | 0 (0%) |
|    Native Hawaiian | 1 (0.2%) | 0 (0%) |
|    White or European | 319 (81.0%) | 26 (49.1%) |
|    Other | 5 (1.3%) | 3 (5.7%) |
|    Prefer not to say | 0 (0%) | 0 (0%) |
| *First language* | | |
|    English | 391 (99.2%) | 1 (1.9%) |
|    Russian | 2 (0.5% | 4 (7.5%) |
|    Spanish | 1 (0.2%) | 47 (88.7% |
|    Arabic | 0 (0%) | 2 (3.8%) |
| *Highest level of education* | | |
|    Middle/junior high school | 0 (0%) | 0 (0%) |
|    Some high school | 27 (6.9%) | 4 (7.5%) |
|    Some college | 130 (33.0%) | 31 (58.5%) |
|    College degree | 196 (49.7%) | 6 (11.3%) |
|    Some post-graduate work | 5 (1.3%) | 2 (3.8%) |
|    Post-graduate degree | 36 (9.1%) | 10 (18.9%) |
| *Household income* | | |
|    <19.9k | - | 20 (31.3%) |
|    20-39.9k | - | 7 (10.9%) |
|    40-59.9k | - | 5 (7.8%) |
|    60-79.9k | - | 5 (7.8%) |
|    80-99.9k | - | 19 (29.7%) |
|    >100k | - | 8 (12.5%) |
| *Political Orientation* | | |
|    Very liberal | 92 (23.4%) | 5 (9.4%) |
|    Somewhat liberal | 129 (32.7%) | 20 (37.7%) |

| | | |
|---|---|---|
| Neither liberal nor conservative | 76 (19.3%) | 15 (28.3%) |
| Somewhat conservative | 66 (16.8%) | 10 (18.9%) |
| Very conservative | 31(7.9%) | 3 (5.7%) |
| *Buys organic* | | |
| Only buy organic | 0 (0.0%) | 0 (0.0%) |
| Buy organic when alternative exists | 73 (18.5%) | 5 (9.4%) |
| Frequently buy for select produce | 182 (46.2%) | 20 (37.7%) |
| Only when convenient or affordable | 24 (6.1%) | 3 (5.7%) |
| Rarely buy | 32 (8.1%) | 8 (15.1%) |
| Don't pay attention to | 25 (6.3%) | 2 (3.8%) |
| Don't buy organic | 58 (14.7%) | 15 (28.3%) |
| *Eats meat* | | |
| Yes | 370 (93.9%) | 51 (96.2%) |
| No | 24 (6.1%) | 2 (3.8%) |
| *Dietary philosophy* | | |
| Vegan | 6 (1.5%) | 1 (1.9%) |
| Vegetarian | 27 (6.9%) | 2 (3.8%) |
| Pescatarian | 12 (3.0%) | 1 (1.9%) |
| Paleo | 10 (2.5%) | 3 (5.7%) |
| Carnivore | 28 (7.1%) | 3 (5.7%) |
| Omnivore | 59 (15.0%) | 9 (17.0%) |
| Low calorie | 29 (7.4%) | 6 (11.3%) |
| Low sodium | 33 (8.4%) | 4 (7.5%) |
| I just eat what I like | 260 (66.0%) | 45 (84.9%) |
| Other | 31 (7.9%) | 5 (9.4%) |

869     *Note.* Dashes indicate the measure was not included in that study.

870 Table 2

872 *Mean and Standard Deviations for Technology-Specific Survey Measures Across studies*

| Measures | Online Norming Study | Neuroimaging Study |
|---|---|---|
| | *M* (*SD*) | *M* (*SD*) |
| *Antibiotics* | | |
| Risk (pre) | 3.12 (1.13) | 2.97 (0.96) |
| Risk (post) | 3.17 (1.06) | 2.65 (0.86) |
| Attitudes (pre) | 2.59 (1.11) | 2.97 (0.79) |
| Attitudes (post) | 2.94 (1.05) | 3.63 (0.76) |
| *Vaccines* | | |
| Risk (pre) | 2.30 (1.02) | 2.70 (0.74) |
| Risk (post) | 2.37 (0.99) | 2.15 (0.74) |
| Attitudes (pre) | 3.46 (0.95) | 3.47 (0.67) |
| Attitudes (post) | 3.67 (0.89) | 4.12 (0.64) |
| *Hormones* | | |
| Risk (pre) | 3.24 (1.06) | 3.25 (0.84) |
| Risk (post) | 3.30 (1.01) | 2.91 (0.93) |
| Attitudes (pre) | 2.30 (1.04) | 2.54 (0.98) |
| Attitudes (post) | 2.48 (0.97) | 3.12 (0.84) |
| *GMO* | | |
| Risk (pre) | 2.81 (1.27) | 2.70 (0.92) |
| Risk (post) | 2.82 (1.22) | 2.34 (0.84) |
| Attitudes (pre) | 2.98 (1.23) | 3.10 (1.01) |
| Attitudes (post) | 3.18 (1.17) | 3.77 (0.87) |
| *Sustainability* | | |
| Risk (pre) | 2.14 (0.94) | 2.48 (0.75) |
| Risk (post) | 2.14 (0.91) | 2.20 (0.85) |
| Attitudes (pre) | 3.97 (0.92) | 3.80 (0.80) |
| Attitudes (post) | 3.89 (0.84) | 3.98 (0.56) |
| *Animal welfare* | | |
| Risk (pre) | 1.99 (0.87) | 2.74 (0.67) |
| Risk (post) | 1.96 (0.83) | 2.13 (0.73) |
| Attitudes (pre) | 3.93 (0.79) | 3.52 (0.65) |
| Attitudes (post) | 4.01 (0.72) | 3.96 (0.59) |

*Note.* All response options ranged from 1 (*strongly disagree*) to 5 (*strongly agree*).

909     Table 3

911     *Multilevel Model Summaries for Online Norming and fMRI Studies*

| Study | Measure | Numerator *df* | Denominator *df* | *F* | *p* |
|---|---|---|---|---|---|
| *Online* | Risk percept. (pre) | 5 | 1965 | 161.48 | <.001 |
| *Norming* | Attitudes (pre) | 5 | 1965 | 277.4 | <.001 |
| | Risk percept. (post) | 5 | 1965 | 198.6 | <.001 |
| | Attitudes (post) | 5 | 1965 | 258.03 | <.001 |
| *Neuroimaging* | Risk percept. (pre) | 5 | 260 | 8.84 | <.001 |
| | Attitudes (pre) | 5 | 260 | 24.81 | <.001 |
| | Risk percept. (post) | 5 | 260 | 11.76 | <.001 |
| | Attitudes (post) | 5 | 260 | 25.75 | <.001 |
| | Willingness-to-pay | 7 | 322 | 10.79 | <.001 |

913     *Note.* Percept. = perception. *P*-values are based on cluster size probability distributions.

914    Table 4

916    *Test Statistics for Planned Contrasts for the Online Norming Study and the fMRI Study*

| Study | Measure | Contrast | df | t | p |
|---|---|---|---|---|---|
| *Online Norming* | Risk percept. (pre) | Hormones & Antibiotics > Animal welfare & Sustainability | 393 | 23.71 | <.001 |
| | | Hormones & Antibiotics > GMOs & Vaccines | 393 | 14.65 | <.001 |
| | | GMOs & Vaccines > Animal welfare & Sustainability | 393 | 11.62 | <.001 |
| | Attitudes (pre) | Hormones & Antibiotics < Animal welfare & Sustainability | 393 | 28.64 | <.001 |
| | | Hormones & Antibiotics < GMOs & Vaccines | 393 | 17.86 | <.001 |
| | | GMOs & Vaccines <Animal welfare & Sustainability | 393 | 16.79 | <.001 |
| | Risk percept. (post) | Hormones & Antibiotics > Animal welfare & Sustainability | 393 | 25.1 | <.001 |
| | | Hormones & Antibiotics > GMOs & Vaccines | 393 | 15.92 | <.001 |
| | | GMOs & Vaccines > Animal welfare & Sustainability | 393 | 13.54 | <.001 |
| | Attitudes (post) | Hormones & Antibiotics < Animal welfare & Sustainability | 393 | 27.84 | <.001 |
| | | Hormones & Antibiotics < GMOs & Vaccines | 393 | 18.64 | <.001 |
| | | GMOs & Vaccines <Animal welfare & Sustainability | 393 | 13.73 | <.001 |
| *Neuroimaging Study* | Risk percept. (pre) | Hormones & Antibiotics > Animal welfare & Sustainability | 52 | 4.69 | <.001 |
| | | Hormones & Antibiotics > GMOs & Vaccines | 52 | 4.64 | <.001 |
| | | GMOs & Vaccines > Animal welfare & Sustainability | 52 | 1.06 | .29 |
| | Attitudes (pre) | Hormones & Antibiotics < Animal welfare & Sustainability | 52 | 9.07 | <.001 |
| | | Hormones & Antibiotics < GMOs & Vaccines | 52 | 5.93 | <.001 |
| | | GMOs & Vaccines < Animal welfare & Sustainability | 52 | 4.36 | <.001 |
| | Risk percept. (post) | Hormones & Antibiotics > Animal welfare & Sustainability | 52 | 6.60 | <.001 |
| | | Hormones & Antibiotics > GMOs & Vaccines | 52 | 5.07 | <.001 |

| | | | | |
|---|---|---|---|---|
| | GMOs & Vaccines > Animal welfare & Sustainability | 52 | 0.93 | .35 |
| Attitudes (post) | Hormones & Antibiotics < Animal welfare & Sustainability | 52 | 7.65 | <.001 |
| | Hormones & Antibiotics < GMOs & Vaccines | 52 | 8.35 | <.001 |
| | GMOs & Vaccines < Animal welfare & Sustainability | 52 | 0.33 | .74 |
| Willingness-to-pay | Organic & Natural > Hormones & Antibiotics | 46 | 4.26 | .001 |
| | Organic & Natural > GMOs & Vaccines | 46 | 3.02 | .004 |
| | Organic & Natural > Animal welfare & Sustainability | 46 | 1.72 | .09 |

918     *Note.* Percept. = perception. Pre and post refer to before and after participants were presented
919     with the infographics.

920 Table 5

922 *Post – Pre-Infographic Differences in Risk and Attitudes*

| Study | Measure | Z (post – pre) | df | t | p |
|---|---|---|---|---|---|
| *Risk Perception* | Antibiotics | -0.35 | 52 | -3.11 | .003 |
| | Vaccines | -0.62 | 52 | -6.44 | <.001 |
| | Hormones | -0.38 | 52 | -3.10 | .003 |
| | GMOs | -0.28 | 52 | -2.55 | .01 |
| | Sustainability | -0.30 | 52 | -2.41 | .02 |
| | Animal Welfare | -0.65 | 52 | -4.13 | <.001 |
| *Attitudes* | Antibiotics | 0.32 | 52 | 3.63 | <.001 |
| | Vaccines | 0.50 | 52 | 5.24 | <.001 |
| | Hormones | 0.44 | 52 | 3.77 | <.001 |
| | GMOs | 0.41 | 52 | 4.92 | <.001 |
| | Sustainability | 0.29 | 52 | 2.78 | .007 |
| | Animal Welfare | 0.45 | 52 | 3.10 | .003 |

927    Table 6

929    *Willingness-to-Pay Judgments from Becker-DeGroot-Maschak Style Auction*

| Target | M (SD) |
|---|---|
| Animals previously treated with antibiotics | 2.36 (0.96) |
| Animals previously vaccinated | 2.51 (0.98) |
| Animals raised all natural | 2.89 (1.12) |
| Animals raised fully organic | 2.97 (1.13) |
| Animals raised with animal welfare technologies | 2.73 (1.08) |
| Animals raised with genetically modified feed | 2.38 (0.99) |
| Animals raised with sustainable food technologies | 2.71 (1.00) |
| Animals raised with hormone implants | 2.09 (0.83) |

931    *Note*. All payment judgments were in US dollars. The possible range was $1-$5 for each item.

934    Table 7

936    *fMRI Results*

| Contrast | Region | Cluster size ($k$) | Cluster $p$-value | Peak MNI coordinate <x,y,z> | Peak Z |
|---|---|---|---|---|---|
| *Mean risk correlation > 0 (positively correlated with perceived risk)* | | | | | |
| | Lateral prefrontal cortex (dorsolateral and inferior frontal gyrus) | 1496 | <.001 | <-48,28,2> | 5.20 |
| | Superior and middle temporal gyrus / temporo-parietal junction | 458 | <.001 | <-54,-36,0> | 4.82 |
| | Left lateral occipital cortex/ superior parietal lobule | 318 | .002 | <-28, -60, 42> | 4.24 |
| | Right lateral occipital cortex/ superior parietal lobule | 170 | .040 | <38, -58, 44> | 4.03 |
| *Mean risk correlation < 0 (negatively correlated with perceived risk)* | | | | | |
| | Lingual gyrus | 175 | .030 | <10, -60, 4> | 4.36 |
| *Mean attitudes correlation > 0 (positively correlated with attitudes* | | | | | |
| | Dorsal anterior cingulate cortex | 585 | <.001 | <-4,24, 20> | 4.54 |
| | Precuneous / posterior cingulate cortex | 512 | <.001 | <0,-40,46> | 4.44 |
| | Supramarginal gyrus | 229 | .007 | <62,-36,36> | 3.88 |
| | Lingual gyrus | 188 | .03 | <-30,-44,-6> | 4.52 |
| | Precuneous | 173 | .026 | <-14,-64,22> | 3.96 |
| | Ventromedial prefrontal cortex / ventral anterior cingulate cortex | 147 | .049 | <-12,46,-2> | 4.24 |
| *Mean attitudes correlation < 0 (negatively correlated with attitudes)* | | | | | |
| | Left middle frontal gyrus (dorsolateral PFC) and inferior frontal gyrus | 1765 | <.001 | <-48,12,36> | 5.38 |

| | | | | |
|---|---|---|---|---|
| Left lateral occipital cortex/superior parietal lobule | 999 | <.001 | <-26,-58,42> | 5.11 |
| Left inferior temporal gyrus | 968 | <.001 | <-46,-56,-12> | 5.73 |
| Right occipital pole | 745 | <.001 | <36,-92,2> | 4.83 |
| Cerebellum | 670 | <.001 | <-6,-80,-32> | 4.57 |
| Right middle frontal gyrus (dorsolateral PFC) | 648 | <.001 | <50,24,28> | 4.63 |
| Right lateral occipital cortex / superior parietal lobule | 393 | <.001 | <34,-56,52> | 4.54 |
| Right inferior temporal gyrus | 379 | <.001 | <54,-50,-12> | 4.97 |
| Left occipital pole | 239 | .006 | <-28,-94,-8> | 4.47 |
| *Hormone Risk Change (positively correlated with change in risk)* | | | | |
| Right frontal pole | 230 | .006 | <28,52,20> | 4.28 |
| Right middle frontal gyrus (dorsolateral PFC) | 229 | .006 | <40,2,56> | 4.02 |
| Left middle frontal gyrus (dorsolateral PFC) | 194 | .01 | <-30,0,58> | 3.98 |
| Superior frontal gyrus | 194 | .01 | <2,48,38> | 3.36 |
| *GMO Attitude Change (positive correlated with change in attitude)* | | | | |
| Supramarginal gyrus | 708 | < .001 | <56,-38,26> | 5.53 |
| Thalamus | 214 | .01 | <-22,-20,12> | 5.14 |
| White matter | 198 | .02 | <-30,-30,30> | 4.19 |

940                                          **Supplementary Material**

942     **Supplemental Table 1**

944     Wording of the attitudes and risks questions were based on typical risk perception (Slovic, 2016)

945     and Theory of Planned Behavior survey construction (Ajzen, 1991).

947     *Technology-Specific Survey Questions*

949             Asked for each technology

951             5-point scale: *strongly disagree, somewhat disagree, neither agree nor disagree,*

952             *somewhat agree, strongly agree*

954             **Technologies / phrasing:**

956             vaccinating livestock/ vaccinated livestock.

958             sustainable food technology (/ies)

960             using hormones on livestock/hormone treated livestock

962             genetically modified (GM)

964             using antibiotics on livestock/ antibiotic treated livestock

966             animal welfare technology

969             **Familiarity (pre only)**

971             1. I am familiar with the practice of t.

973             2. I am knowledgeable about the practice of t.

975             **Perceived Norms (pre only)**

977             1. Most people who are important to me approve of t.

979             2. Most people who are like me support t.

981             **Trust in Science (pre only)**

983             1. Scientists understand the risks posed by t.

985             2. I trust scientists to explain the risks posed by t.

**Past Behavior (pre only)**

1. In the past three months, I have consumed food produced from t.

2. In the past three months, I have avoided food produced from t.

**Perceived Control (pre only)**

1. I am able to control how much I am exposed to food produced from t.

2. I am able to avoid purchasing food produced from t.

**Risks**

    **Pre:**

    1. The risks posed by t are acceptable.

    2. t presents a risk to the global food supply.

    **Post:**

    1. t presents a risk to the environment.

    2. t presents a risk to me personally.

    3. t presents a risk to future generations.

    4. People are likely to suffer negative health consequences from t for food production.

    5. There is no safe level of exposure to food (dairy, eggs, meat) from t.

    6. Even a small amount t affects the safety of food.

**Attitudes (personal)**

    **Pre:**

    1. I intend to support the use of t for food production.

    2. It is good to buy food produced from t.

    **Post:**

1. Consuming food produced from t is healthy.

2. I approve of t.

3. Food produced from t should be available for everyone.

4. t for food production is smart.

5. Overall, t is a good application of technology.

6. I would rather purchase food produced from t.

**Attitudes (benefits)**

    **Pre:**
1. t benefits society.

2. t the environment.

    **Post:**
1. t benefits me personally.

2. t benefits the livestock.

3. t promotes animal welfare.

4. t helps make food available for everyone.

5. t helps make food affordable for everyone.

6. Overall, t is ethically sound.

1067    **Supplemental Table 2**

1068

1069    *Cronbach's coefficient alpha for each survey measure from the online norming study.*

Measures

|  | α |
|---|---|
| *Antibiotics* | |
| Risk (pre) | .82 |
| Risk (post) | .93 |
| Attitudes (pre) | .94 |
| Attitudes (post) | .96 |
| Familiarity | .84 |
| Norms | .90 |
| Trust in science | .81 |
| Behavior | .62 |
| Control | .93 |
| *Vaccines* | |
| Risk (pre) | .83 |
| Risk (post) | .94 |
| Attitudes (pre) | .91 |
| Attitudes (post) | .96 |
| Familiarity | .89 |
| Norms | .89 |
| Trust in science | .85 |
| Behavior | .55 |
| Control | .89 |
| *Hormones* | |
| Risk (pre) | .75 |
| Risk (post) | .94 |
| Attitudes (pre) | .93 |
| Attitudes (post) | .96 |
| Familiarity | .85 |
| Norms | .90 |
| Trust in science | .80 |
| Behavior | .72 |
| Control | .89 |
| *GMO* | |
| Risk (pre) | .88 |
| Risk (post) | .96 |
| Attitudes (pre) | .94 |
| Attitudes (post) | .97 |
| Familiarity | .82 |
| Norms | .89 |
| Trust in science | .85 |
| Behavior | .67 |
| Control | .88 |
| *Sustainability* | |

| | |
|---|---|
| Risk (pre) | .78 |
| Risk (post) | .92 |
| Attitudes (pre) | .93 |
| Attitudes (post) | .95 |
| Familiarity | .93 |
| Norms | .91 |
| Trust in science | .81 |
| Behavior | .38 |
| Control | .89 |
| *Animal welfare* | |
| Risk (pre) | .74 |
| Risk (post) | .91 |
| Attitudes (pre) | .87 |
| Attitudes (post) | .94 |
| Familiarity | .94 |
| Norms | .88 |
| Trust in science | .80 |
| Behavior | .35 |
| Control | .87 |

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1076    **Supplemental Table 3**
1077
1078    *Means and standard deviations of survey measures for the online norming study and the*
1079    *neuroimaging study.*

| Measures | Online Norming Study M (SD) | Neuroimaging Study M (SD) |
|---|---|---|
| *Antibiotics* | | |
| Familiarity | 3.38 (1.06) | 3.16 (1.22) |
| Norms | 2.77 (1.05) | 3.08 (0.99) |
| Trust in science | 3.74 (1.05) | 3.91 (0.84) |
| Behavior | 3.38 (1.04) | 3.75 (0.93) |
| Control | 2.89 (1.15) | 2.80 (1.03) |
| *Vaccines* | | |
| Familiarity | 3.01 (1.18) | 2.83 (1.31) |
| Norms | 3.54 (0.88) | 3.45 (0.77) |
| Trust in science | 3.89 (1.03) | 4.03 (0.83) |
| Behavior | 3.74 (0.88) | 3.82 (0.72) |
| Control | 2.55 (1.05) | 2.60 (0.97) |
| *Hormones* | | |
| Familiarity | 3.38 (1.06) | 3.38 (1.04) |
| Norms | 2.33 (0.94) | 2.55 (0.91) |
| Trust in science | 3.49 (1.11) | 3.71 (0.93) |
| Behavior | 3.43 (1.10) | 3.65 (0.97) |

| | | |
|---|---|---|
| Control | 3.01 (1.14) | 3.12 (1.05) |
| *GMO* | | |
| Familiarity | 3.80 (0.87) | 3.76 (0.92) |
| Norms | 2.80 (1.06) | 3.16 (0.99) |
| Trust in science | 3.48 (1.21) | 3.87 (1.02) |
| Behavior | 3.67 (1.10) | 3.97 (0.87) |
| Control | 3.03 (1.11) | 2.96 (1.13) |
| *Sustainability* | | |
| Familiarity | 2.73 (1.17) | 2.70 (1.20) |
| Norms | 3.64 (0.91) | 3.41 (0.70) |
| Trust in science | 3.87 (0.96) | 3.97 (0.77) |
| Behavior | 3.72 (0.77) | 3.71 (0.80) |
| Control | 2.86 (1.02) | 2.87 (0.77) |
| *Animal welfare* | | |
| Familiarity | 2.54 (1.15) | 2.01 (1.05) |
| Norms | 3.81 (0.87) | 3.19 (0.67) |
| Trust in science | 3.92 (0.86) | 3.82 (0.70) |
| Behavior | 3.66 (0.77) | 3.44 (0.78) |
| Control | 2.60 (0.98) | 2.73 (0.84) |

1080

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1083    **Supplemental Table 4.** *Mean, standard deviation, and reliability statistics (standardized alpha)*
1084    *for standardized survey measures. Note: Standardized survey measures were taken after seeing*
1085    *infographics in the neuroimaging study.*
1086

|  | Online Norming Study | Neuroimaging Study |
|---|---|---|
| Measure | *M (SD)* | *M (SD)* |
| Food Tech. Neophobia | 3.04 (0.85) | 2.77 (0.62) |
| Trust in Science | 3.92 (0.87) | 4.04 (0.65) |
| Chemical risk perception: Dose-to-response reasoning | 3.36 (0.77) | 3.25 (0.70) |
| Chemical risk perception: Attitudes toward chemicals | 3.26 (0.86) | 2.96 (0.60) |
| Chemical risk perception: Chemical risk reduction | 2.62 (0.86) | 2.59 (0.63) |
| Chemical risk perception: Miscellaneous | 2.86 (0.52) | 2.89 (0.40) |

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**There are far more farm animals in the United States than people:**
**323 million** people vs. **9.3 billion** cows, pigs, turkeys and chickens processed in the U.S.[1,2,3,4]

*You may have heard that 80% of antibiotics in the United States are used in agriculture, but that statistic makes more sense when it's put into perspective.[2]*

323 million

* Other species are also included in the 80% statistic like sheep, goats, fish and companion animals - dogs, cats and horses. They increase the number of animals but are not reflected on this chart.

9.3 billion + animals*

**Antibiotics are used to treat, control and prevent illness in animals.** Antibiotics are thoroughly tested and regulated and are used judiciously by farmers and veterinarians.[7]

**FDA** The FDA sets "withdrawal times" based on research to assure antibiotics have cleared an animal's system before it enters the food supply.[8]

**USDA** The USDA's Food Safety and Inspection Service routinely tests food to ensure it is free of antibiotic residues.[9]

Antibiotics that are medically-important to humans must be administered under direct veterinary supervision.[10]

**CDC** The CDC is working to reduce antibiotic use in humans and says at least 30% of antibiotics prescribed in U.S. doctor's offices and emergency rooms are unnecessary.[11]

*Since some farm animals are generally more massive than humans, they require a larger volume of antibiotics to treat, prevent and control disease.[5,6]*

195 lbs.

1,300 lbs.

283 lbs.

**Most antibiotics are used mostly in animals or in humans, not in both.[4]**

| Use by Volume | Humans | Animals |
|---|---|---|
| Penicillins | 44% | 6% |
| Cephalosporins | 15% | Less than 1% |
| Sulfa | 14% | 3% |
| Quinolones | 9% | Less than 1% |
| Macrolides | 5% | 4% |
| Tetracyclines | 4% | 42% |
| Ionophores* | 0% | 33% |

* Ionophores are never used in human medicine

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1091       *Supplemental Figure 1.* Antibiotics infographic used in the study.

1093    *Supplemental Figure 2.* Sustainability infographic used in the study.

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1095    *Supplemental Figure 3*. GMO infographic used in the study.

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1097 *Supplemental Figure 4.* Animal welfare infographic used in the study.

ARE **SAFE**

A three-ounce serving of beef from a steer implanted with estrogen contains

**1.9**

nanograms of estrogen[1]

A three-ounce serving of beef from a steer NOT implanted with estrogen contains
**1.3** nanograms of estrogen[1]

A three-ounce serving of potatoes contains

**225**

nanograms of estrogen[1]

A three-ounce serving of cabbage contains

**2,000**

nanograms of estrogen[1]

Every day, an average woman produces

**513,000**
nanograms of estrogen[2]

Every day, an average man produces **136,000** nanograms of estrogen[2]

ARE **PRACTICAL**

 Bulls' hormone systems are removed to curb aggression for the safety and welfare of the animals (now called "steers") and the people who interact with them, and to make beef more tender and flavorful. Implants restore enough of a steer's naturally-produced hormone levels to **grow efficiently**.[3]

 Heifers (female cattle that have not given birth) have hormone systems focused on reproduction. Hormone implants **balance a heifer's natural hormone levels** to allow it to grow more muscle instead of fat.[4]

**Hormone implants help balance natural hormone levels** in cattle to allow them to convert their feed into lean muscle instead of excess fat, which helps keep beef affordable.[4]

ARE **SUSTAINABLE**

To raise the same amount of beef **WITHOUT** hormone implants, it would take:[5,6,7]

**11**

**MILLION MORE**
cattle in the U.S. beef herd

**18**
**MILLION MORE**
acres of land for grazing and growing feed

**515**
**BILLION MORE**
gallons of water for producing feed and maintaining animals

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1099 *Supplemental Figure 5.* Hormone infographic used in the study.
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1102     *Supplemental Figure 6.* Vaccine infographic used in the study.
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1104
1105

How many dollars do you want to bid on this item?
Press 1 to decrease; 2 to increase

Beef Jerky

Raised with hormone implants.

| 1 | 2 | 3 | 4 | 5 |

1106
1107    *Supplemental Figure 7.* An example willingness-to-pay trial from the Becker-DeGroot-
1108    Marschack (1964) style auction in the neuroimaging study.
1109