



# Food in Scotland Consumer Tracking Survey **Wave 5**

December 2017

**SUMMARY REPORT**



# Contents

1. Executive Summary .....	1
2. Background and objectives.....	4
3. FSS is a trusted organisation .....	6
4. Food is safe.....	14
5. Food is authentic (authenticity and labelling).....	27
6. Responsible food businesses flourish.....	32
7. Consumers choose healthier diets .....	38
8. Method and sample .....	47
9. Appendix A.....	50





# 1. Executive Summary

Food Standards Scotland's (FSS) Food in Scotland Consumer Tracking Survey measures changes in Scotland's attitudes, behaviours and knowledge in relation to food over time. The survey is undertaken biannually and comprises a set of consistent questions at each wave, with modules focusing on **food safety and authenticity**, and **diet and nutrition**, running annually.



FSS has six strategic outcomes it is working towards delivering:

- 1. Food is safe**
- 2. Food is authentic**
- 3. Responsible food businesses flourish**
- 4. Consumers have healthier diets**
- 5. FSS is a trusted organisation**
- 6. FSS is efficient and effective**

The survey was developed and designed to explore consumers' interests in Scotland in relation to food, in order for FSS to put those interests at the heart of the work it does.

**This report is for the fifth wave of tracking.**

Kantar TNS was commissioned by FSS to undertake this research, and surveyed a representative sample of adults in Scotland using an online self-completion approach.

At each wave c.1,000 adults aged 16+ were interviewed:

- between 8<sup>th</sup> and 15<sup>th</sup> December 2015 for wave one;
- between 28<sup>th</sup> June and 6<sup>th</sup> July 2016 for wave two;
- between 8<sup>th</sup> and 21<sup>st</sup> December 2016 for wave three;
- between 19<sup>th</sup> June and 4<sup>th</sup> July 2017 for wave four; and
- between 7<sup>th</sup> and 20<sup>th</sup> December 2017 for wave five.

Full methodology and sample details can be found in Chapter 8.

## 1.1 Key Findings

### 1.1.1 Strategic Outcome 5 – FSS is a trusted organisation

- Further increases in awareness of, and trust in, FSS, means that both these measures are at the highest level seen to date.
- Awareness of FSS' remit has not changed in the last 6 months, and ratings of FSS' performance have stabilised following initial improvements at the start of tracking. The most positive FSS associations and ratings continue to be for ensuring food safety.
- Over the last year consumers' main concerns about food related issues have remained broadly stable, except for food prices which continues to increase slowly over time, particularly among the younger ages and lower social grades.
- Views towards the impact of Brexit on food related issues remain negative, particularly on food safety.

### 1.1.2 Strategic Outcome 1 – Food is safe

- There has been little change in the following of recommended food safety practices over the last year, with the average number of recommended practices followed being essentially the same as previously.
- Self-reported incidence of food poisoning has increased slightly over the past two years, with those experiencing food poisoning having a widespread assumption that it is from the out of home environment, and fewer than one in ten acknowledging they could be personally to blame.
- Consumer attitudes also clearly show a lack of understanding of the likelihood and seriousness of food poisoning in the home.

### 1.1.3 Strategic Outcome 2 – Food is authentic

- Claimed understanding of labelling has improved further, and consumers are less worried about misleading food origin information and authenticity than previously.
- Use of labels shows little change over time though they continue to be widely used for date information.
- However, despite the increase in claimed understanding of labels there has been little change in understanding of 'use by' dates, and there remains a fifth of consumers who refer to best before dates as an indication of food safety.
- There has also been a notable increase at the latest wave in the proportion who consider 'smell' as a good way to decide if food is safe (rather than using labelling).

#### **1.1.4 Strategic Outcome 3 – Responsible businesses flourish**

- A further increase in agreement that food safety and hygiene information is easily available shows consumers are increasingly aware of this, and where to find it.
- Awareness of the Food Hygiene Information Scheme (FHIS) has also increased significantly, though use and the degree to which it influences decision making is steady.
- Consumers appear less concerned about food businesses paying attention to food safety and hygiene, perhaps reflecting a greater awareness of hygiene schemes and therefore a feeling this is being monitored.
- Whilst cleanliness and hygiene remain key factors for consumers when deciding where to eat out, the result of the most recent inspection is least important, with appearance and reputation continuing to be most commonly used.

#### **1.1.5 Strategic Outcome 4 – Consumers have healthier diets**

- Perceptions of the healthiness of one's own diet dipped in the winter. However, consumers' perceptions of their family's diet remain generally stable over tracking.
- There is still high agreement that Scotland's diet is unhealthy, despite a slight weakening in the latest wave.
- Concerns about unhealthy ingredients, which had previously been growing, have reversed at this latest wave.
- There is a significant decline in worry about unhealthy foods on price promotion.

## 2. Background and objectives

### 2.1 Background

Food Standards Scotland (FSS) is the public sector food body for Scotland and is a non-ministerial office, part of the Scottish Administration, alongside, but separate from, the Scottish Government.

FSS's vision is “**to create a food and drink environment in Scotland that benefits, protects and is trusted by consumers.**”

FSS's three statutory objectives are to:

- a) Protect the public from risks to health which may arise in connection with the consumption of food;
- b) Improve the extent to which members of the public have diets which are conducive to good health; and
- c) Protect the other interests of consumers in relation to food.

### 2.2 Study objectives

The Food in Scotland Consumer Tracking study is managed by Kantar TNS, an independent research company, on behalf of FSS. The main purpose of the research is to monitor information on consumer attitudes, knowledge and reported behaviours in Scotland across a range of food issues.

The survey is undertaken biannually and comprises a set of consistent questions at each wave on the FSS brand with two alternating modules: **food safety and authenticity** and **diet and nutrition**. The questions are mainly aligned to cover FSS's six strategic outcomes.

1. **Food is safe**
2. **Food is authentic**
3. **Responsible food businesses flourish**
4. **Consumers have healthier diets**
5. **FSS is a trusted organisation**
6. **FSS is efficient and effective**



FSS uses the findings from Wave 1 as a baseline against which changes in food safety and healthy eating knowledge, attitudes, behaviours can be monitored over time.

This report highlights the findings from the **fifth** wave of research tracking and focuses mainly on the three FSS strategic outcomes below:

1. Food is safe
2. Food is authentic
3. Responsible businesses flourish

The measures related to the outcomes that 'FSS is trusted' and 'FSS is efficient and effective' are repeated at every wave and therefore the results from all the previous waves are shown in this report for comparative purposes.

The measures relating to this wave's modules were previously conducted in wave three, though some measures were asked in all waves, and therefore not all data points are available for all measures. Where possible, all comparative data is shown.

**Please note that any trends or variations in the results referred to in the text as 'significant', references a difference between the two results which is statistically significant. For example, when comparing two waves or two population groups, these have been proven through statistical analysis (Independent Samples T-Test) as likely to be real differences (at the 95 per cent confidence limits) as opposed to differences which are the result of sampling error or chance.**

### 3. FSS is a trusted organisation

**What this means:** FSS is trusted by people and food businesses, and the other organisations that we interact with, to act in accordance with our values and principles and to put consumers first. This section of the report explores the public's opinion and knowledge of FSS and its responsibilities.

In summary, we found that:

- Further increases in awareness of, and trust in, FSS, means that both these measures are at the highest level seen to date.
- Awareness of FSS' remit has not changed in the last 6 months, and ratings of FSS' performance have stabilised following initial improvements at the start of tracking. The most positive FSS associations and ratings continue to be for ensuring food safety.
- Over the last year consumers' main concerns about food related issues have remained broadly stable, except for food prices which continues to increase slowly over time, particularly among the younger ages and lower social grades.
- Views towards the impact of Brexit on food related issues remain negative, particularly on food safety.

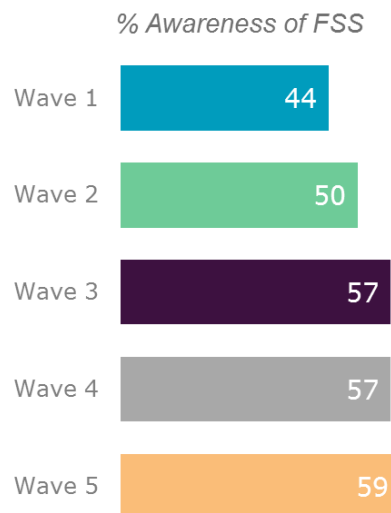


### 3.1 Brand recognition and performance

Figures 3.1 and 3.2 show that both awareness and trust in FSS have seen a very positive increase in the last six months, to the highest levels seen to date, despite there being very little movement between the previous two waves.

**Figure 3.1 Proportion aware of Food Standards Scotland (Q7)**

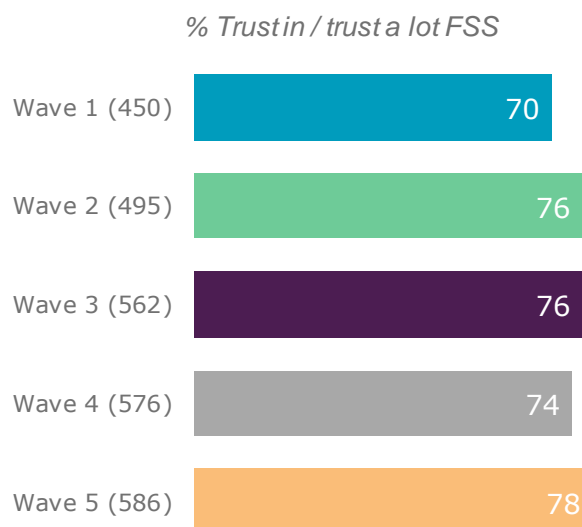
Base: All respondents W1 (1003), W2 (1000), W3 (1000), W4 (1000), W5 (1000)



All respondents were shown the FSS logo and told that “Food Standards Scotland’ has taken over from the ‘Food Standards Agency’ as the organisation responsible for making sure people eat healthily and safely in Scotland”, and asked if they had heard of Food Standards Scotland before. 59% of the population claimed they had heard of the FSS in wave five, an increase on the previous wave (57%) and significantly higher than the 44% and 50% respectively recorded at wave one and two. Although the rate of increase appears to be slower than compared to two years ago, this is still positive. The 45-54 age group saw a sharp rise in awareness to 64%, making them the most aware age group.

### Figure 3.2 Proportion that trust Food Standards Scotland (Q9)

Base: All respondents aware of FSS W1 (450), W2 (495), W3 (562), W4 (576), W5 (586)



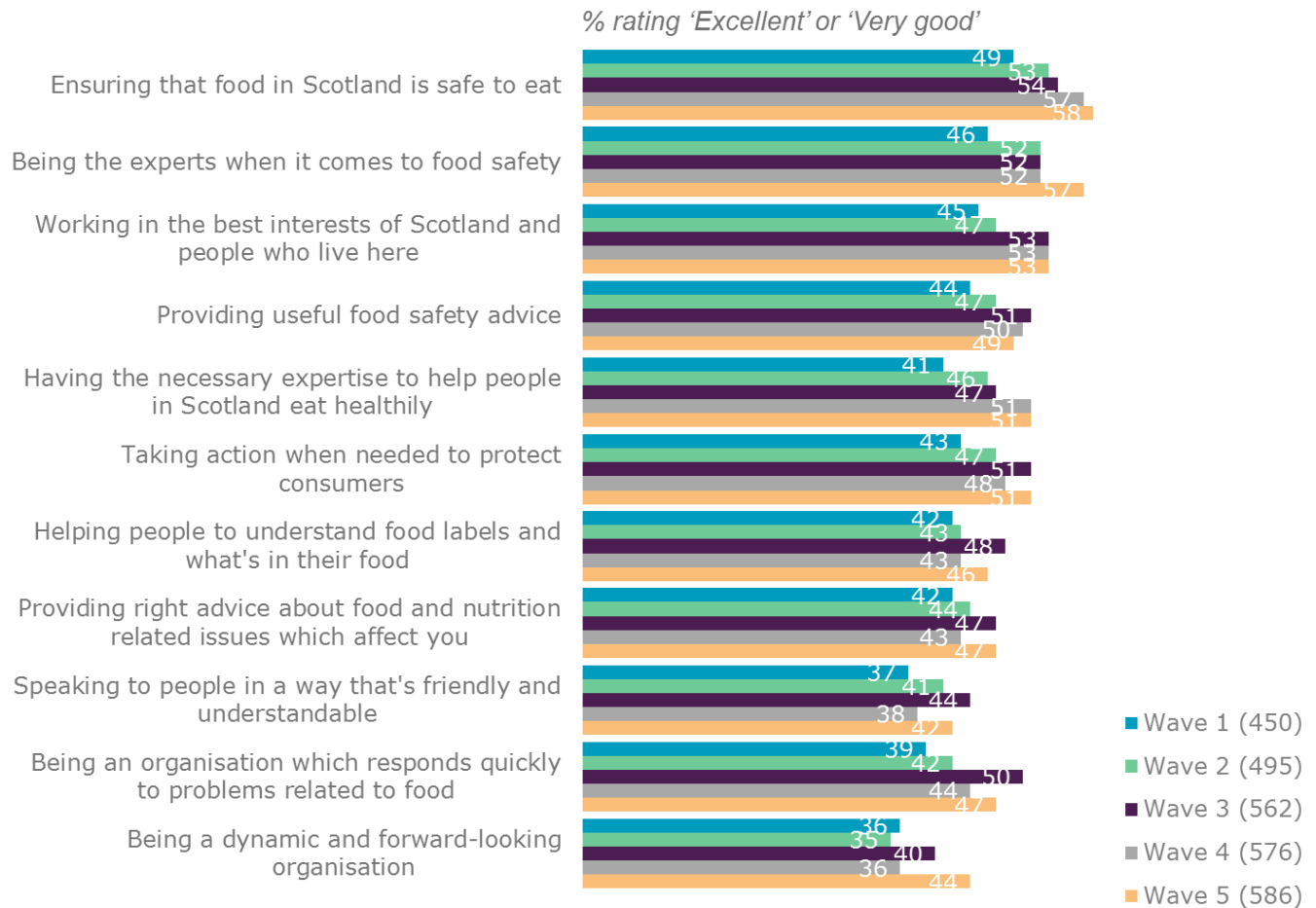
Trust in FSS has increased, recovering from a slight dip in wave four. At wave five 78% **of those aware of the organisation** said they ‘trust it’ or ‘trust it a lot’ to do its job, showing high levels overall. When rebased among all respondents, this equates to 46% of the population who trust FSS in wave five.

Respondents who were aware of FSS were also asked to rate the organisation on a variety of brand proposition statements using a five-point scale, ranging from ‘excellent’ to ‘poor’. The combined percentage rating FSS at a top two box level (‘excellent’, ‘very good’) is shown in Figure 3.3.

Ratings of FSS have stabilised following initial improvements, with performance across many areas in line with one year ago (wave three). The most positive associations are the same as at previous waves and have recorded further increases: *ensuring food is safe to eat* increasing from 54% in wave three to 58% in wave five, and *being the experts when it comes to food safety* from 52% in wave four to 57% in wave five. Both of these then impact the positive ratings for working in the best interests of Scotland and providing useful food safety advice, all of which perform well.

**Figure 3.3 Proportion rating FSS 'Excellent', 'Very good' (Q10)**

Base: All respondents W1 (450), W2 (495), W3 (562), W4 (576), W5 (586)



Several measures which saw a dip at wave four have now recovered to levels similar to those seen in wave three. Of the two lowest rated areas (which still perform well), *being a dynamic and forward-looking organisation* has risen from 36% in wave four to 44% in wave five and *responding quickly to food related problems* from 44% in wave four to 47% in wave five.

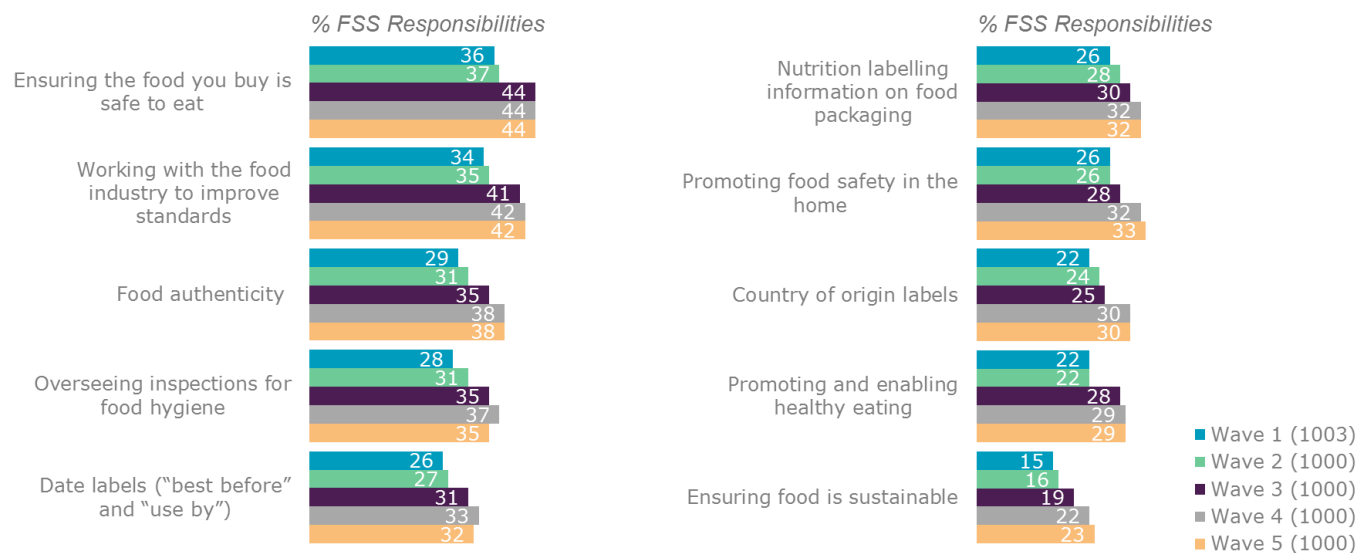
**Overall, the level of awareness and trust in FSS is further increasing and is at a good level. Ratings of FSS have improved on the key outcomes of food being safe, alongside ratings of other areas stabilising or some recovering from a dip at the previous wave.**

## 3.2 Knowledge of FSS's responsibilities

The survey also gauged awareness of the remit of FSS by asking respondents to indicate, from a list, those areas which they thought were the responsibility of FSS. The results shown in Figure 3.4 are calculated from the total sample and not just those aware of the organisation.

**Figure 3.4 What issues respondents think FSS is responsible for (prompted) (Q8)**

Base: All respondents W1 (1003), W2 (1000), W3 (1000), W4 (1000), W5 (1000)



Despite the increases in awareness and trust seen in the brand recognition and performance section (3.1), understanding of the role of the organisation has essentially remained unchanged since wave four. FSS remains most likely to be associated with food safety and food standards, such as *ensuring the food you buy is safe to eat* (44%) and *working with the food industry to improve standards* (42%).

Awareness of the organisation's remit for *food authenticity* (38%), *overseeing hygiene inspections* (35%) and other aspects of *labelling* and *safety in the home* (33%) remain moderately well-known. Consumers are least familiar with the FSS responsibility of *promoting and enabling healthy eating* (29%).

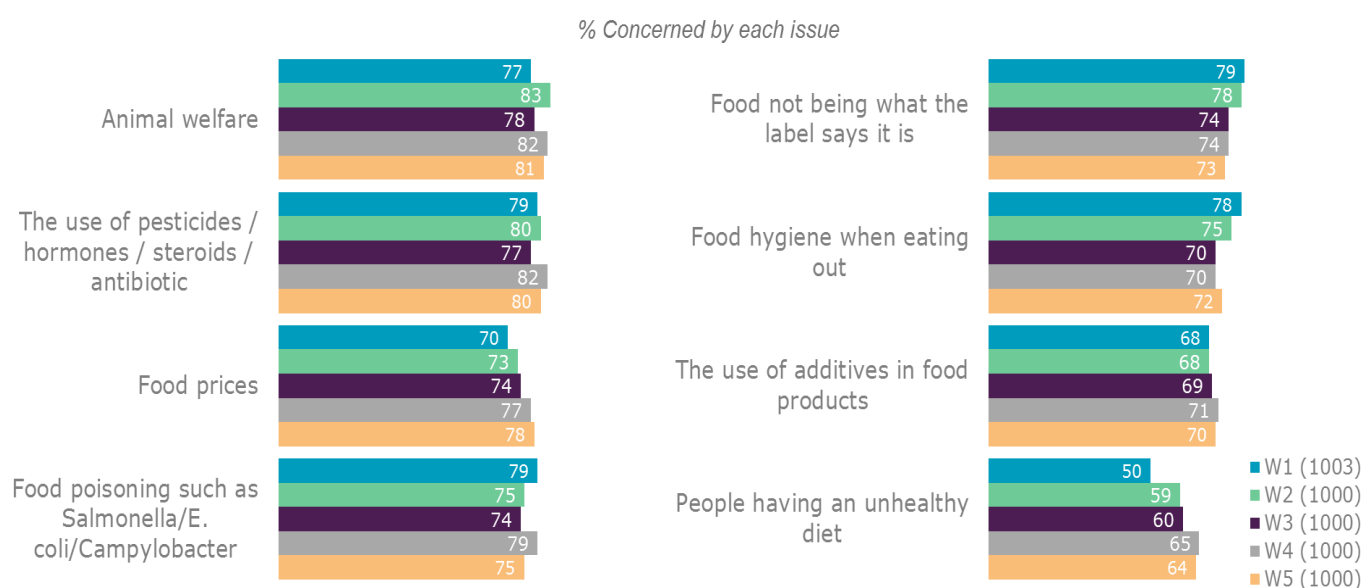
## 3.3 Protecting other interests of consumers in relation to food

Questions are asked early in the survey to establish which issues are of greatest concern to the general public.

Firstly, respondents were asked which issues, from a prompted list, concerned them and which do not. The top eight concerns (from a list of 16) are shown in Figure 3.5.

**Figure 3.5 Food issues causing concern - % concerned by each issue (prompted)**

Base: All respondents W1 (1003), W2 (1000), W3 (1000), W4 (1000), W5 (1000)



The main issues with which the public claims to be concerned have generally been the same over the course of tracking, albeit that the order may have changed slightly wave-on-wave. The only area which has shown a steady increase in concern at every subsequent wave is *food prices* (70% at wave one increasing to 78% at wave five). Concern over *food not being what the label says it is* seems to be declining overall (79% at wave 1 to 73% at wave five) alongside *food hygiene when eating out* (78% at wave 1 to 72% in wave five), although the latter has increased slightly since wave four. *People having an unhealthy diet*, which has previously shown more of an increase in concern than other measures, has also stabilised at 64% compared to 65% at wave 4 suggesting this may be slightly less top-of-mind.

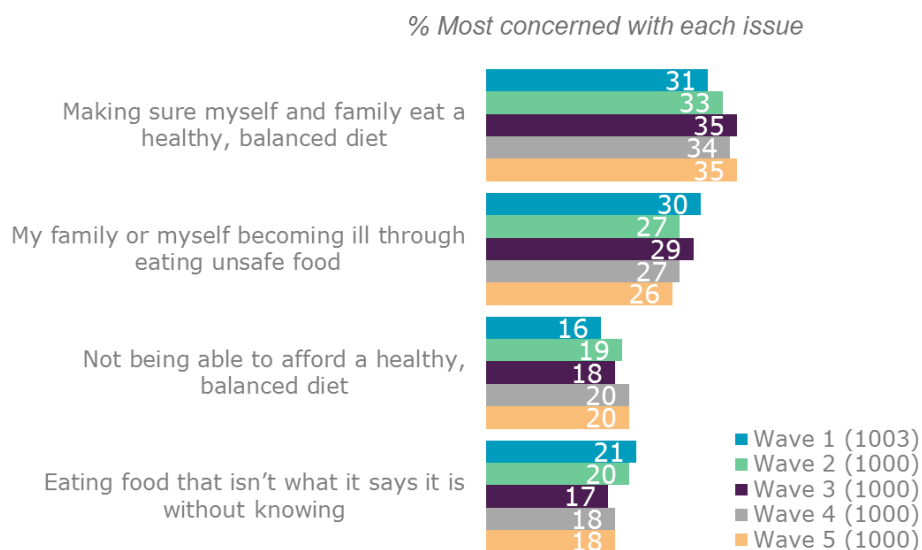
There were some notable differences in concerns across the demographic sub-groups within the population. Females were significantly more concerned across a number of issues such as *animal welfare*, labelling issues and food hygiene issues (e.g. 75% of males were concerned by *animal welfare* compared to 85% of females). Concern over *food prices* declines with age, with 87% of 16-24 concerned compared to 69% of those aged 65 and over. Similarly, those in the lower social grades<sup>1</sup> become increasingly more concerned over *food prices* (65% of ABs rises to 87% of DEs).

Respondents were also asked, out of a prompted list, to rate the issue that most concerned them, shown in Figure 3.6.

<sup>1</sup> Please see Appendix A for a full breakdown of the occupations by socio-economic grade

### Figure 3.6 Food issues causing the most concern

Base: All respondents W1 (1003), W2 (1000), W3 (1000), W4 (1000), W5 (1000)

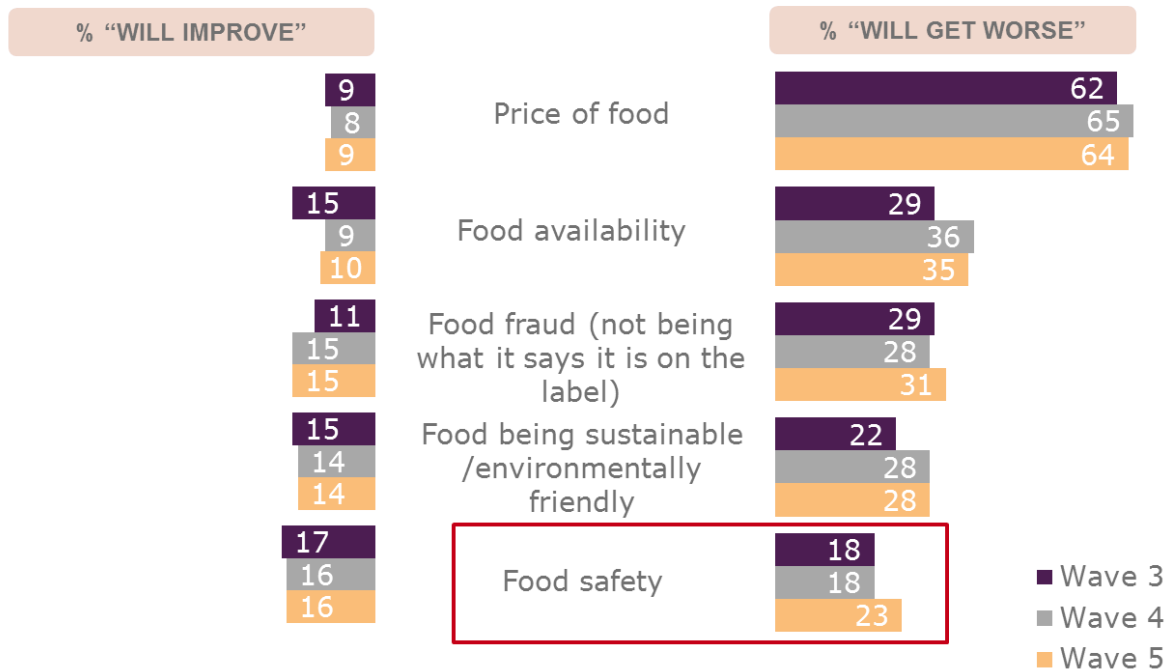


Healthy eating remains a top concern, mentioned by 35% at wave five, whilst there has been a decline over time in concern about becoming ill by eating unsafe food (26% at wave five). Looking into who is most concerned about eating unsafe food, this is spread quite evenly across the different demographic groups except for the age group 55-64 who are significantly more concerned over this than any other ages (33% of this age group said this was their top concern, compared to around 25% of the other age groups). Affordability remains the top concern for one fifth (20%), whilst there has been a small decline over time in the proportion concerned about food authenticity, from 21% in wave 1 to 18% in wave five.

A new question was added to the tracking at wave three to gauge public perceptions towards the potential impact of Brexit on food issues. Specifically, respondents were shown a variety of food issues and asked if they thought each 'will get better', 'will get worse' or 'will stay the same' following Brexit. The results are summarised in Figure 3.7.

### Figure 3.7 Impact of Brexit on food issues

Base: All respondents W3 (1000), W4 (1000), W5 (1000)



Perceptions of the impact of Brexit have remained broadly similar, with the exception of significantly greater concern about *food safety* (now at 23% compared to 18% previously). As previously, only a minority believe Brexit will have a positive impact on food issues.

While many factors around Brexit saw a rise in concerns from wave three to wave four, these have mostly stabilised (excluding *food safety*), so while the concerns remain in the public consciousness there is not currently any evidence that they are becoming more of a concern than previously.

**Consumer concerns have generally fluctuated over the course of the tracking with the exceptions of a continuing increase in concern towards ‘food prices’ and decrease in concerns around ‘food authenticity’ and ‘hygiene when eating out’. Views towards the impact of Brexit on food related issues have remained negative, particularly on food safety.**

## 4. Food is safe

By this FSS means that food is produced in line with relevant legislation, and that food placed on the market is not contaminated or injurious to health. Where appropriate, food is supplied with accurate instructions to ensure safe storage and handling, and consumers understand the risks and how to protect themselves and others from foodborne illness.

The 'Food is Safe' strategic outcome was the main focus of the first, third and fifth waves of tracking.

In summary, we found that:

- There has been little change in the following of recommended food safety practices over the last year, with the average number of recommended practices followed being essentially the same as previously.
- Self-reported incidence of food poisoning has increased slightly over the past two years, with those experiencing food poisoning having a widespread assumption that it is from the out of home environment, and fewer than one in ten acknowledging they could be personally to blame.
- Consumer attitudes also clearly show a lack of understanding of the likelihood and seriousness of food poisoning in the home.



This chapter of the report compares findings across waves one, three and five on the extent to which 'safe' food preparation behaviours are currently being followed, and looks at the overall proportion of the population complying with recommended practice around the 4 Cs: – chilling, cooking, avoiding cross-contamination and cleaning. These questions were not asked in wave two or four tracking.

All of the results in this chapter relating to the 4 Cs are based on the c.95% of the sample who indicated that they had some responsibility for cooking and preparing food in their household.

For context, consumers were asked early in the survey whether they believe they have clear information on how to prepare and cook food safely and hygienically. Nearly all felt that they do, with around nine in 10 consistently indicating this is the case across tracking (92% at wave one, 90% at wave two, 88% at wave three, 91% at wave four and 92% at wave five). At wave five, over 90% of all demographic

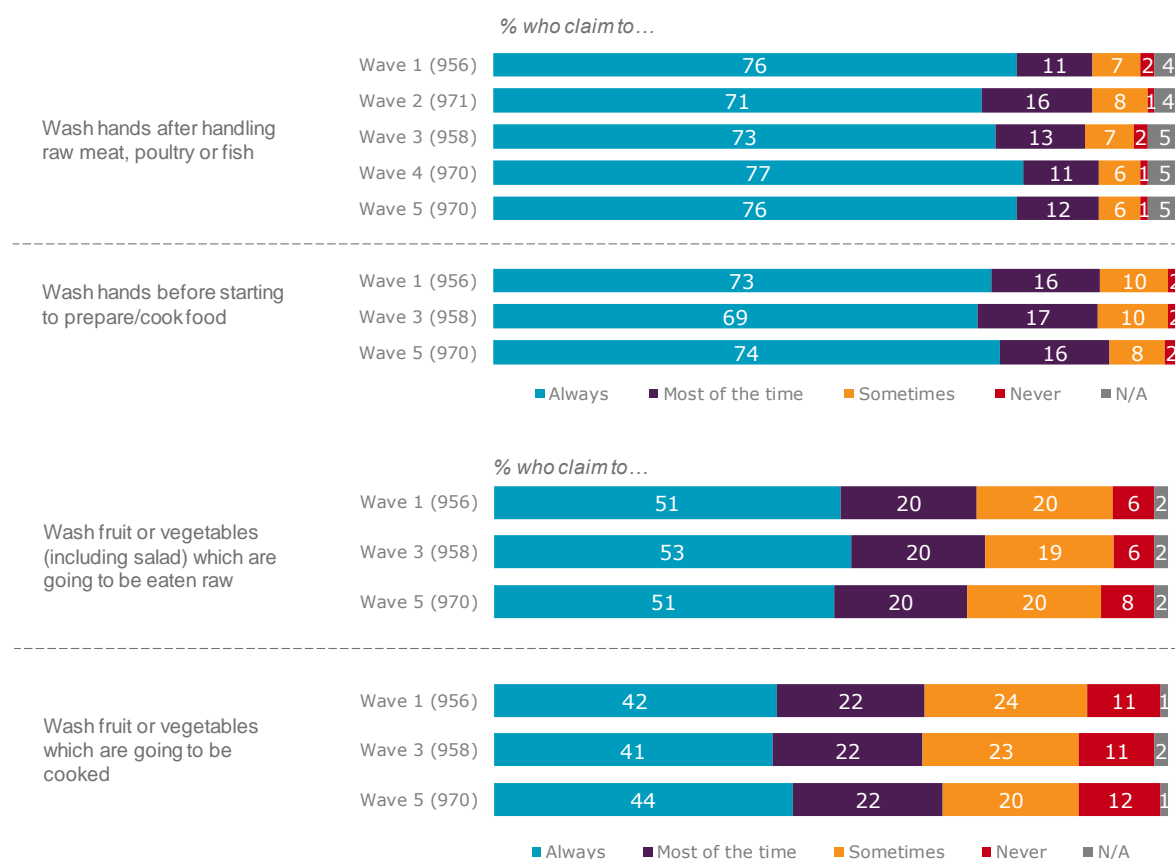
groups felt they had clear information, with the only exception being the slightly lower 87% recorded among 16-34 year olds.

## 4.1 Cleaning

There are three 'cleaning' behaviours associated with food safety and in order to comply with the recommended guidelines, each of these should **always** be carried out when preparing or cooking food. Figure 4.1 shows the proportion claiming that they do each of these practices either 'always', 'most of the time', 'sometimes' or 'never'. Data for a fourth cleaning behaviour – washing fruit or vegetables which are going to be cooked – is also shown. A very small proportion indicated that each statement was not applicable to them.

**Figure. 4.1: Extent to which recommended cleaning behaviours are followed (Q19)**

Base: all respondents involved in preparing/ cooking food W1 (956), W3 (958), W5 (970)



Since wave one there have been some changes over time in terms of cleaning behaviours, with the levels seen at wave 5 broadly in line with those recorded at the start of tracking (albeit with levels dipping at waves 2 and 3). Most follow the recommended practice of hand washing before handling food or after handling raw meat. Generally, there have not been any significant increases or decreases in the

behaviours which leaves room for improvement, especially in terms of washing fruit and vegetables which continues to be less prevalent than other cleaning behaviours (51% always for those that will be eaten raw).

In summary, while most of the population are following the recommended practice on washing hands, improvement on washing fruit and vegetables is required.

## 4.2 Chilling

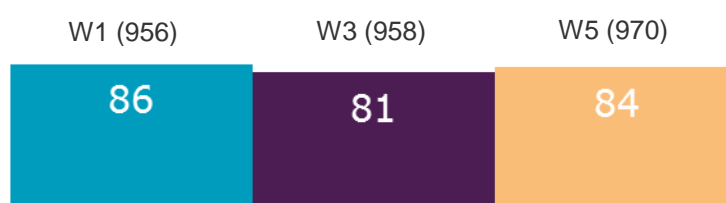
There are three recommended guidelines for chilling food and a range of measures was used to test compliance/ knowledge levels of each:

- Knowing correct fridge temperature;
- Checking fridge temperature accurately;
- Defrosting meat/ fish in fridge (or cool place); and

To keep the survey engaging, respondents were presented with an image of a thermometer and asked to move a slider to the point that they thought indicated the correct fridge temperature.

### Figure 4.2. Know the correct fridge temperature (Q23)

Base: all respondents involved in preparing/ cooking food W1 (956), W3 (958), W5 (970)

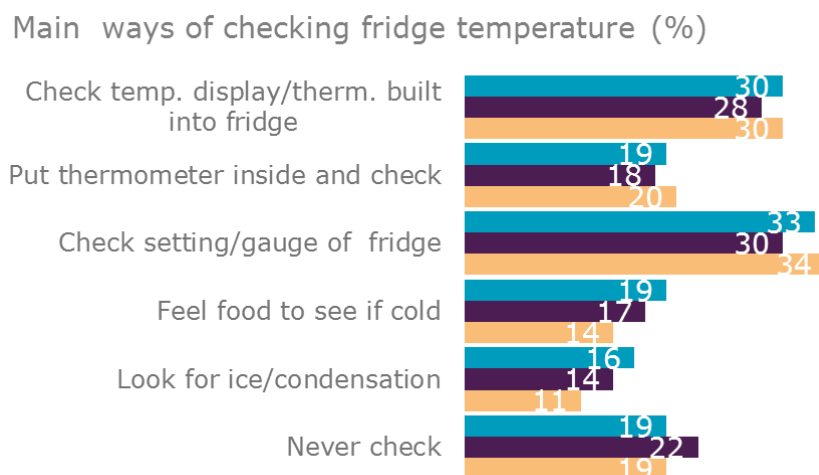


At wave one, 86% of those responsible for food preparation/ cooking correctly selected between 0 and 5 degrees centigrade, which fell to 81% at wave three and then rose to 84% in wave five, showing similar fluctuations as seen in the cleaning section but no significant changes.

As shown in Figure 4.3, among those consumers who check their fridge temperature (c.80%), the proportion who do so in a correct way remains much lower than knowledge of the correct fridge temperature, showing a gap in knowledge around chilling.

### Figure 4.3. Normal method to check temperature in fridge – prompted (Q22)

Base: all respondents involved in preparing/ cooking food and who check their fridge temperature W1 (956), W3 (957), W5 (970)

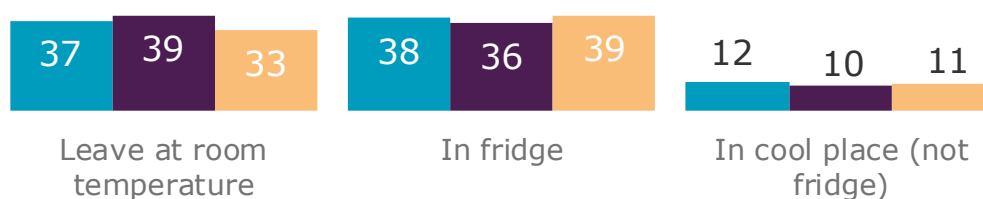


The two recommended ways of reliably checking the fridge temperature are checking the in-built fridge display/ thermometer or putting a thermometer in the fridge. Usage of both methods has remained consistent since wave one, with around three in ten indicating that they check the temperature by using the built in thermometer, and one fifth saying they put a thermometer inside to check (20% at wave five). A significant proportion however also use other ways, most commonly checking the fridge/ gauge settings (34% at wave 5). The number of people feeling food to see if it is cold has dropped significantly since wave one from 19% to 14% at wave five, with looking for ice/condensation also falling from 16% at wave one to 11% at wave five, suggesting that people may be realising that these old rules of thumb are not reliable.

With respect to defrosting, Figure 4.4 shows that the findings have remained largely stable compared to wave one and three. Around half of the sample correctly indicated that they would defrost meat or fish either in the fridge (38% in wave one, 36% in wave three and 39% in wave five) or in a cool place (12% in wave one, 10% in wave three and 11% in wave five). Although a considerable amount of the remaining sample indicated they would allow food to defrost at room temperature, this has seen a drop from wave three (39%) to wave five (33%). Only a small portion claimed they defrost in the microwave (6% in wave five).

#### Figure 4.4 Top 3 ways of defrosting meat or fish (Q20)

Base: all respondents involved in preparing/ cooking food W1 (956), W3 (926), W5 (970)



Respondents were also asked about one further chilling behaviour, being asked for the length of time an open packet of cooked/ cured ham would be left open before deciding not to eat it. The Figure 4.5 shows the responses.

#### Figure 4.5 Length of time would keep opened packet of cooked/ cured ham before deciding not to eat it (Q32)

Base: all respondents involved in preparing/ cooking food W1 (956), W3 (926), W5 (970)

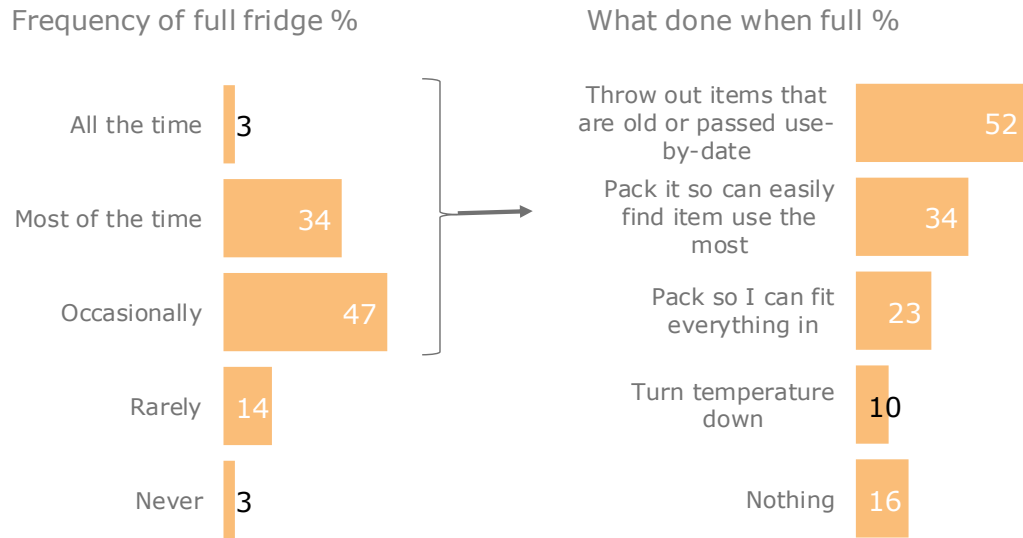


The fact that the consumer should follow the instructions on the packet for safe eating of food (which has been determined by the manufacturer) is reflected in the variety of responses at this question. 22% of the sample selected 'up to 2 days' across all waves. The largest proportion of people still say they would keep cooked meat up to three days (29%), but 20% in wave five would keep it longer than four days. The varied answers also have a fifth of the sample relying on the labels when it comes to cooked meat and small number (7% in wave five) did not eat this kind of food.

In order to probe further on chilling, new questions were asked in wave five around fridge use, the results of which are shown in Figure 4.6.

**Figure 4.6 Frequency of having a full fridge and actions taken when full**

Base: all respondents W5 (1000), all respondents who often have a full fridge W5 (830)



Consumers were firstly asked to indicate how often their fridge is completely full. Only a small proportion (3%) stated that their fridge is full all the time, but one third (34%) indicated it was full 'most of the time' and a further 47% 'occasionally'.

The 84% of consumers who had a full fridge occasionally or more often were then asked what they did when their fridge is full. A variety of responses were selected from a prompted list, with the most common action being 'throwing out items that are old or passed their use-by date (52%)'.

Finally those with a full fridge were asked to state spontaneously what they thought happens to food in their fridge if the temperature is too high. Again, a variety of responses were given, but there appears to be good awareness of the impact of high fridge temperatures with 58% stating that 'food spoils / goes off / goes bad', and a further 18% specifically mentioning bacteria or that food becomes unsafe / could cause illness.

### 4.3 Cross-contamination

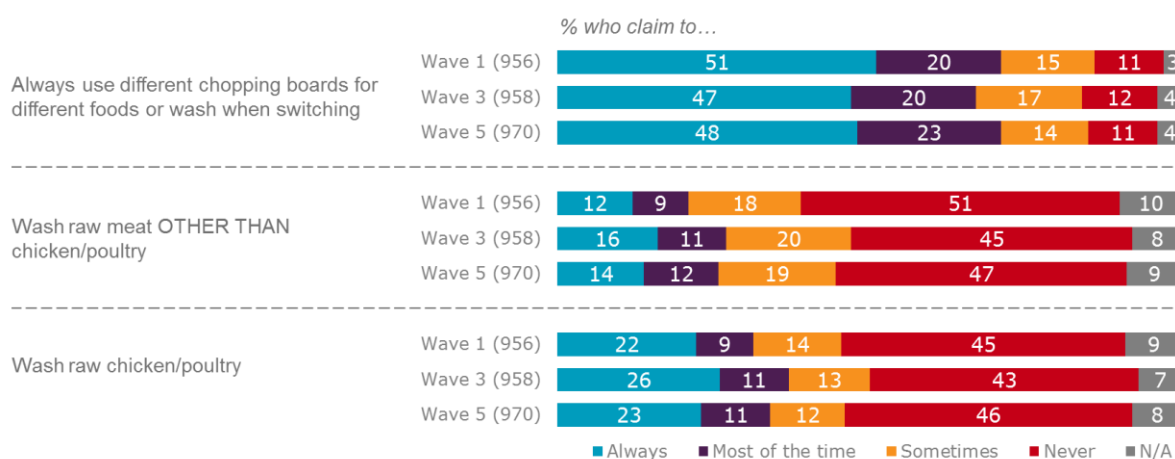
Compliance with behaviours associated with avoiding the spread of germs and with correctly storing food were also assessed. The six behaviours associated with cross-contamination are shown below. It should be noted that at previous waves seven behaviours were measured, with ‘Don’t wash raw fish or seafood’ removed in wave 5.

Don't	Do
Store open tins in the fridge	Raw meat/ poultry should be stored in fridge in sealed container
Wash raw chicken/poultry	Raw meat/ poultry should be stored on bottom shelf of fridge
Wash raw meat	Use different chopping boards for different foods or wash chopping boards when switching between foods

Compliance levels across each of the six behaviours varied considerably. Figure 4.7 shows compliance with three of the measures, with around half consistently following each of these practices. At wave five, 48% indicated that they **always** use *different chopping boards for different foods* (i.e. between raw and ready to eat foods). When it comes to *washing raw meat other than chicken/ poultry*, though 47% at wave five follow the recommendations and **never** do this, there remains around one in seven who claim they always do this. In terms of specifically *washing raw chicken/ poultry*, 46% in wave five claim they **never** do this, but we find around one quarter (23% in wave five) who always do this (and a further 11% who do so most of the time).

**Figure 4.7 Proportion following recommended cross-contamination behaviours (Q19)**

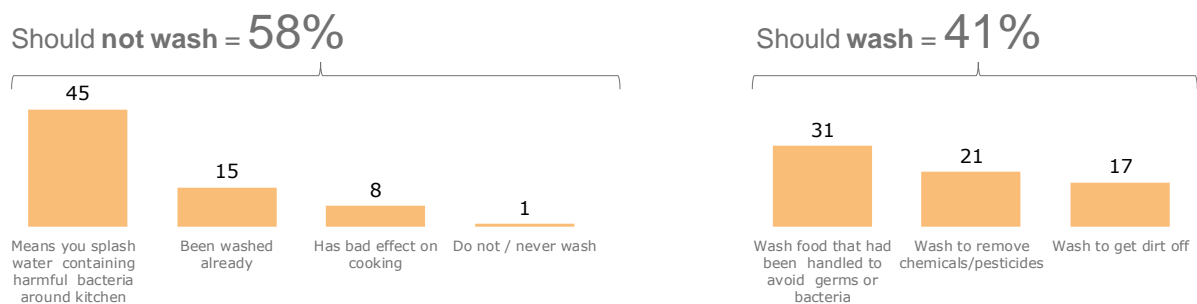
Base: all respondents responsible for cooking/preparing food W1 (956), W3 (958), W5 (970)



A new question was added in wave five to better understand consumers' views on washing of raw poultry. Respondents were provided with a prompted list and asked of their views, regardless of whether they ever eat or cook with chicken/ poultry. The results of this are shown in Figure 4.8.

### Figure 4.8 Views on washing raw poultry (prompted) (Q206)

Base: all respondents responsible for cooking/preparing food W1 (956), W3 (958), W5 (970)



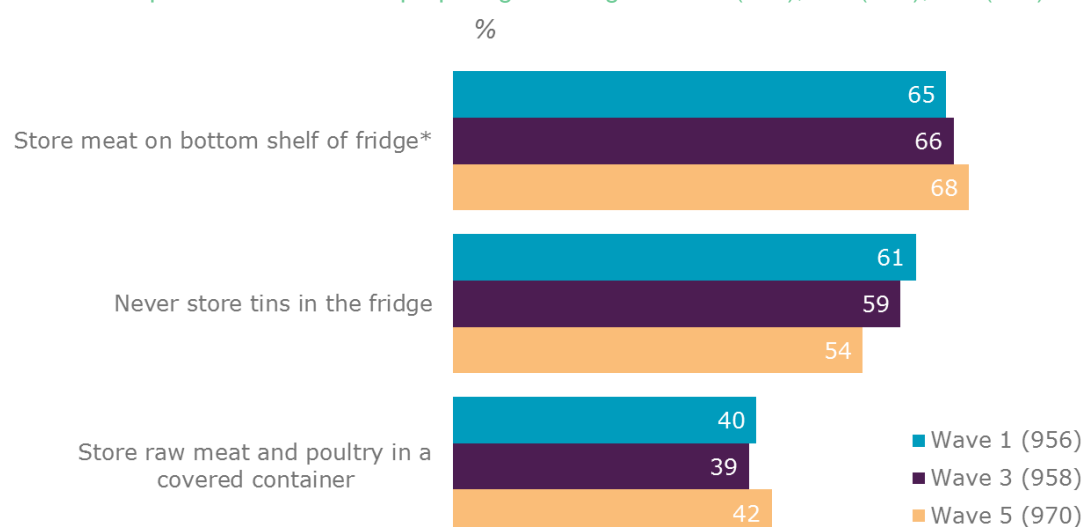
The views expressed were generally in line with the following of the recommended practice, with 58% expressing a view which indicated they thought you should not wash raw poultry, with 41% believing that you should. Among those who believed it should not be washed, the main reason was that it *means you splash water containing harmful bacteria around the kitchen* (45%), showing that there is already good recognition of the danger of splashing bacteria. Those in the AB social grades were significantly more likely to select this response (53% compared to 43% of C1C2DEs), which in turn meant this group held the strongest opinion against washing raw poultry (64% indicated you should not wash).

Conversely, 31% believed poultry should be washed because there is a need to *wash food that had been handled to avoid germs/ bacteria*, whilst 21% wanted to *wash to remove chemicals/ pesticides* and 17% *to get dirt off*. Groups which were significantly more likely to hold the view that chicken should be washed included men (45% compared to 38% of women) and both younger and older age groups (47% of 16-24s and 49% of 65+, compared to 30% of 35-44 year olds). In summary, though there is some recognition of the dangers of washing poultry, there are certain groups where there is still a need to educate.

In relation to the other three cross-contamination behaviours, as shown in Figure 4.9, 54% of respondents in wave five claimed they never store tins in the fridge, a significant decline from 61% in wave one – whilst this is not a key priority, further promotion of this practice would also be beneficial. However, some progress is evident on storage of meat in the fridge, illustrated by the increase in the proportion storing meat on the bottom shelf (65% in wave one to 68% in wave five) and storing meat in a covered container (40% in wave one to 42% in wave five).

**Figure 4.9 Proportion following recommended storage behaviours (Q19)**

Base: all respondents involved in preparing/ cooking food W1 (956), W3 (958), W5 (970)



## 4.4 Cooking

To gauge compliance with recommended cooking practices, responses to six different measures were obtained. These are shown in Table 4.1.

**Table 4.1 Recommended cooking behaviours**

<b>Always</b> cook food until it is steaming hot throughout
<b>Never</b> eat chicken or turkey if the meat is pink or has pink or red juices
<b>Never</b> eat burgers or sausages if the meat is pink or has pink or red juices
<b>Never</b> eat whole cuts of pork or pork chops if the meat is pink or has pink or red juices
Reheat cooked food ( <b>only once</b> )
When reheating, check food is cooked all the way through ( <b>by checking the middle is hot</b> )

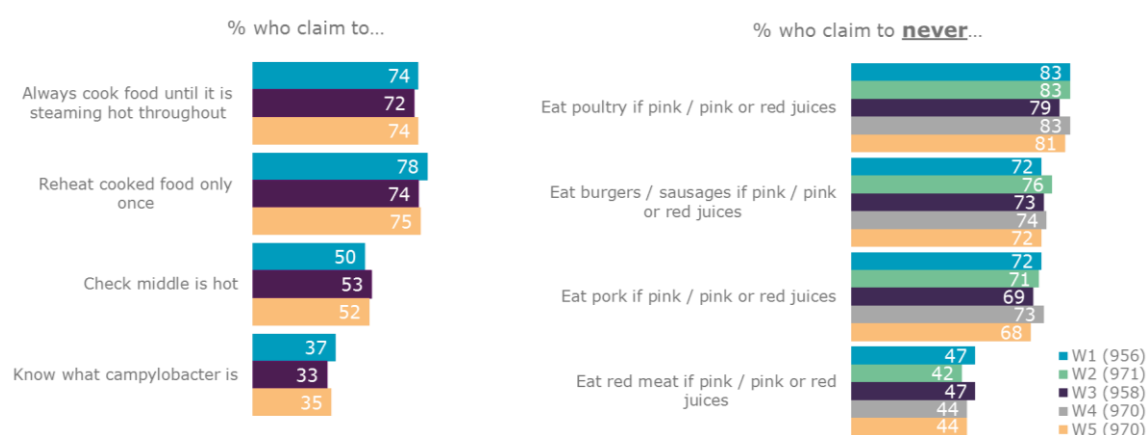
Three of these guidelines relate to the methods used to determine whether food is safe to eat (and are tracked at each wave) and three relate to whether food has been safely cooked/reheated. For all six guidelines, the findings at wave five are largely consistent with those obtained at previous waves.

Figure 4.10 shows similar proportions wave on wave indicating that they **never eat poultry if pink/ with pink or red juices** (81% at latest wave). Similarly, the proportion who claim to **never eat burgers/ sausages if pink/ with pink or red juices** (72% wave five) and **never eat red meat if pink/ with pink or red juices** (44% wave five) are in line with levels recorded at previous waves (with the lower level for the latter reflecting that that it is acceptable to eat whole cuts of beef and lamb that are pink

e.g. a steak). However, there has been a decline in the proportion who claim to **never** eating pork if pink/ with pink or red juices which is at 68% in this most recent wave compared to 73% in wave four.

#### Figure. 4.10 Extent to which cooking behaviours are followed (Q34)

Base: all respondents involved in preparing/ cooking food W1 (956), W2 (971) W3 (958), W4 (970). W5 (970)



In terms of cooking or reheating food, a large majority continue to indicate that they *reheat cooked food only once* (75% in wave five), although this is still lower than the levels of agreement at wave one (78%).

Most indicated that they **always** cook food until it is steaming hot throughout (74% in wave one, 72% in wave three and 74% in wave five), whereas checking reheated food is hot throughout continues to record the lowest level of compliance of the six recommended safe cooking behaviours; only half the sample (52% at wave five) selected *check the middle is hot* as the correct response.

As well as *checking the middle of the food is hot*, the other common methods to check food has been re-heated properly are similar to wave three and include checking if *it looks hot/ sizzling/ bubbling* (36% at wave five) or *checking it's an even temperature throughout* (31% at wave five). 20% also reported that they *check if there is steam coming out of it* in the most recent wave and smaller proportions used other methods such as *taste it* (16%), *use a thermometer/probe* (14%) or *use a timer to ensure it has been cooked for a certain amount of time* (11%).

## 4.5 Overall compliance with the 4Cs

Across all 19 recommended food behaviours there is a huge variation in compliance levels. The extent to which each behaviour is followed is highlighted in Figure 4.11, along with how this has changed over the course of tracking.

## Figure 4.11. Proportion undertaking '4Cs' behaviours

Base: all responsible for preparing and cooking food W1 (956), W3 (958), W5 (970)

"C"	Recommended Practice	Correct Answer	Wave 1 %	Wave 3 %	Wave 5 %
	Wash hands before starting to cook or prepare food	Always	73%	69%	74%
	Wash hands immediately after handling raw meat, poultry or fish	Always	76%	73%	76%
	Wash fruit or veg (inc. salad) which are going to be eaten raw	Always	51%	53%	51%
	Temperature inside fridge should be between 0 and 5C		86%	81%	84%
	Meat usually defrosted in fridge (or in a cool place other than fridge)		50%	46%	49%
	Check fridge temperature using thermometer or built in thermometer		46%	46%	47%
	Would keep an open packet of cooked/cured ham for up to 2 days before deciding not to eat it		22%	22%	22%
	Raw meat / poultry in fridge should be stored in a covered container*		40%	39%	42%
	Raw meat / poultry should be stored at bottom of fridge*		65%	66%	68%
	Use different chopping boards for different foods or wash chopping boards when switching between foods	Always	51%	47%	48%
	Wash raw chicken or poultry	Never	45%	43%	46%
	Wash raw meat other than chicken / poultry	Never	51%	45%	47%
	Store open tins in the fridge	Never	61%	59%	54%
	Cook food until it is steaming hot throughout	Always	74%	72%	74%
	Reheat cooked food no more than once	Once (never)	78% (11%)	74% (12%)	75% (13%)
	When reheating check food is cooked all the way through (among all who ever reheat)	Check middle is hot	50%	53%	52%
	Eat chicken or turkey if the meat is pink or has pink or red juices	Never	83%	79%	81%
	Eat burgers or sausages if the meat is pink or has pink or red juices	Never	72%	73%	72%
	Eat whole cuts of pork or pork chops if the meat is pink or has pink or red juices	Never	72%	69%	68%

The average number of behaviours followed has remained steady at 11.3 (vs. 11.3 at wave five and 11.7 at wave one), though it is important to note that at previous waves the average was out of 20 recommended practices whereas with the removal of "Wash raw fish or seafood" the calculation at wave five is now out of 19 recommended practices, meaning there has been a marginal improvement.

There are also differences in the extent to which practices are followed by demographics and in particular the results indicate that younger age groups are more in need of efforts to improve the following of guidelines. Specifically:

- **Gender:** Men record significantly lower levels of undertaking cleaning practices, and focus for improvement should be on hand washing, meat storage and checking food is reheated;
- **Age:** Younger age groups are significantly less likely to follow recommended practices. However, they are only slightly less likely to follow chilling practices and the only area where 16-24s perform better than other groups is checking food is reheated properly;
- **Social grade:** C1s tend to be less likely to follow practices than other social grades, but this could be due to this group being more likely to include younger age groups;
- **Children in household:** There are few differences by whether children are in the household, but those without are significantly more likely to not store tins in the fridge, eat pink pork or eat pink poultry.

Similar to the previous waves, there are different levels of adherence for the recommended practices and there are still a few that need more widespread

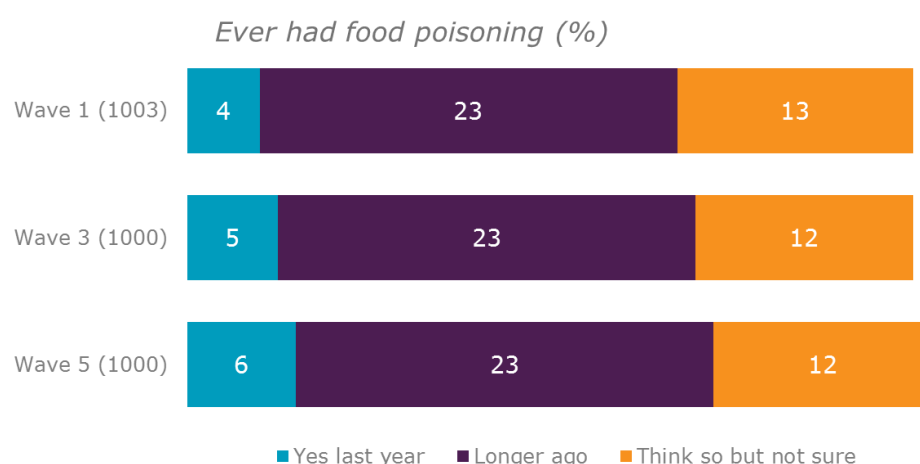
adoption by educating the public further. In particular, some of the behaviours around handling and storing raw meat or poultry are lower than they could be showing these common misconceptions need clear information, targeted directly.

## 4.6 Food poisoning incidents

The survey also measures how often food poisoning has been contracted and how. Figure 4.12 shows that self-reported incidence of food poisoning, with consumers asked whether they had ever had food poisoning and if so when the last occasion had been. At wave five, whilst 12% claimed they thought they had but weren't sure, 6% claimed they had had food poisoning in the last year, and a further 23% had, but longer ago. Overall, therefore, two fifths claimed to have ever experienced food poisoning – a consistent level over the last few waves – highlighting why ensuring good food hygiene remains an issue.

**Figure 4.12. Proportion who have ever had food poisoning**

Base: W1 (1003), W3 (1000), W5 (1000)



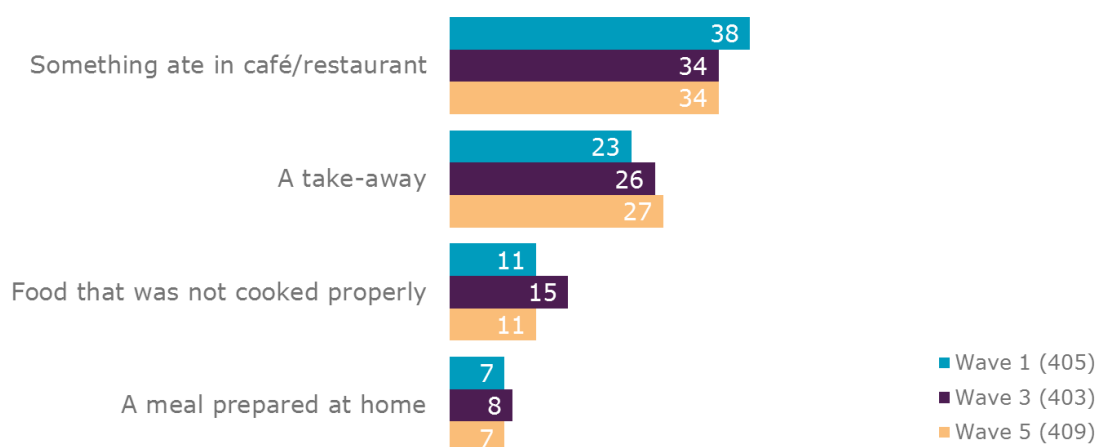
To gain further detail on this, at wave five a new question was included in the survey to understand whether those claiming to have experienced food poisoning had had this confirmed by a GP/ Doctor. Among those claiming to have ever experienced food poisoning (i.e. the 41% as shown above), 46% stated that they had contacted their GP about it (which equates to 19% of all adults), and 22% stated that their GP had confirmed that it was food poisoning (9% of the total sample), with campylobacter and salmonella being the most common cause (mentioned by 5% and 6% respectively).

Those claiming to have experienced food poisoning were also asked where they think they got food poisoning, on the last occasion. The results are shown in Figure 4.13.

### Figure 4.13. Source of food poisoning on last occasion

Base: all who have ever had food poisoning W1 (405), W3 (403), W5 (409)

Cause of food poisoning on last occasion (%)



Among those experiencing food poisoning there continues to be a widespread assumption that this resulted from food prepared in the out of home environment, with fewer than one in ten acknowledging they could be personally to blame.

In addition, consumer attitudes clearly show a lack of understanding of the likelihood and seriousness of food poisoning in the home. At waves one, three and five, consumers were asked the extent to which they agreed that *I am unlikely to get food poisoning from food prepared in my own home*, and at each wave three fifths (58%) agreed that this was the case. Four further attitude statements were added at wave five, with results clearly indicating conflicting attitudes:

- 19% agreed that *No one gets very ill from food prepared in their own kitchen*;
- 31% agreed that *There are serious health risks to young children and elderly from food prepared at home*;
- 83% agreed that *There are lots of easy things to do in the kitchen to reduce risk of food poisoning*;
- 28% agreed that *I use the 5 second rule sometimes as a way of deciding if something is safe to eat/cook*.

Younger groups are significantly more likely to claim to have experienced food poisoning in the last year, yet their attitudes appear to leave them more at risk, and are more conflicted. 11% of 16-34s claim to have had food poisoning in the last year, compared to just 3% of those aged 35 and over. In spite of this, this younger age group are significantly more likely to agree that no one gets very ill from food they have prepared in their own kitchen – 28% vs. 15% of 35+. They are, however, less likely to apportion blame to eating out – 8% of those who have experienced it say it was due to food prepared at home (vs. 4% of 35+) or due to food not being cooked properly (15% vs. 8% of 35+).

## 5. Food is authentic (authenticity and labelling)

**By this FSS means that food is of the nature, substance and quality as described by the supplier. This includes its:**

- Nature - the foodstuff is from the specified plant, animal or geographical location described;
- Substance - the ingredients of the food are as described and in the appropriate quantities;
- Quality - the food meets the requirements of any quality marketing standard which has been applied, and that the product's specific qualities have not deteriorated.

In summary, we found that:

- Claimed understanding of labelling has improved further, and consumers are less worried about misleading food origin information and authenticity than previously.
- Use of labels shows little change over time though they continue to be widely used for date information.
- However, despite the increase in claimed understanding of labels there has been little change in understanding of 'use by' dates, and there remains a fifth of consumers who refer to best before dates as an indication of food safety.
- There has also been a notable increase at the latest wave in the proportion who consider 'smell' as a good way to decide if food is safe (rather than using labelling).



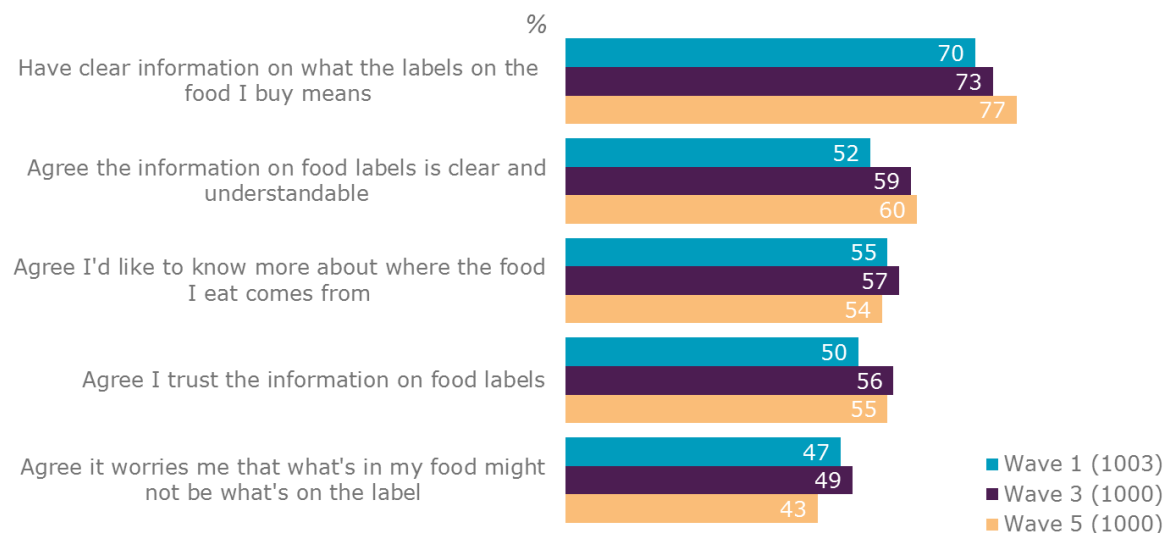
This chapter of the report focuses on a number of attitudinal statements relating to food sources and food labelling, as well as reporting on the extent to which consumers use and understand the purpose of 'use by' and 'best before' dates. The majority of these questions were only asked at waves one, three and five.

## 5.1 Interest in food authenticity

As shown in Figure 5.1, consumers are less worried about misleading food origin information and authenticity than has been the case at previous waves. The proportion who agree that *I'd like to know more about where the food I eat comes from* has fallen slightly to 54% in wave five from 57% in wave three, and the proportion who claim that *it worries me that what's in my food might not be what's on the label* has fallen significantly from 49% in wave three to 43% in wave five. Even with these declines, a significant proportion of consumers remain interested in the authenticity and origin of their food. Trust in food labels also shows no change at this latest wave (55% compared to 56% at wave three).

**Figure 5.1 Attitudes to food labelling (Q52)**

Base: All respondents W1 (1003), W3 (1000), W5 (1000)



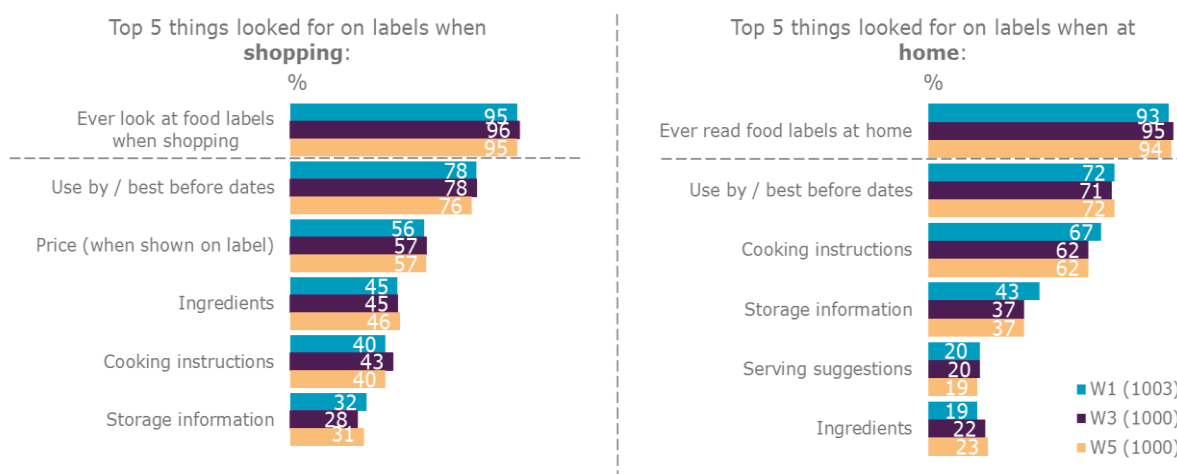
## 5.2 Usage and understanding of food labels

Figure 5.1 also shows claimed understanding of food labels has improved further as 77% of respondents said they *have clear information on what the labels on the food I buy means*, compared to 73% in wave three and 70% in wave one. Despite this, there has not been much improvement in the last year in agreement with the statement: *the information on food labels is clear and understandable* (60% in wave five compared to 59% in wave 3), showing where improvements can still be made.

The survey results continue to provide clear evidence of the importance of food labels for consumers, with nearly all agreeing that they **ever** look at food labels when shopping (95% at wave five) and read food labels at home (94% at wave five). The main reasons for looking at labels when shopping and when at home are summarised in Figure 5.2.

**Figure 5.2 Main things looked at on labels when shopping/at home – prompted (Q39)**

Base: all respondents W1 (1003) W3 (1000) W5 (1000)



The large majority indicating that they look at labels for the use by / best before date both in the shops and at home highlights that this is the most widely used piece of information on labels. This has seen essentially no change across the two years of tracking.

Overall, *use by dates*, *ingredients*, *cooking instructions* and *storage instructions* are what customers prioritise on labels, whether at home or while out shopping. There is no change in use of labels for storage information either when shopping or at home (31% and 37% respectively at wave five). *Price* is considered and important when shopping.

### 5.3 Food safety indicators

Respondents were also asked to indicate the main thing they look for or think about when deciding whether a food is safe to eat or use in cooking. Figure 5.3 summarises responses to this question. Previously the use by date was the most common thing referred to, by around three in ten, followed by people checking how it smells, which was mentioned by 26% at wave one and 24% at wave 3. At wave five, however, there has been a notable increase in the proportion who consider 'smell' as a good way to decide if food is safe, rising to 30% (and therefore tying with use by date).

**Figure 5.3 Main things considered when deciding if food is safe to eat (Q26)**

Base: all respondents W1 (1003) W3 (1000) W5 (1000)

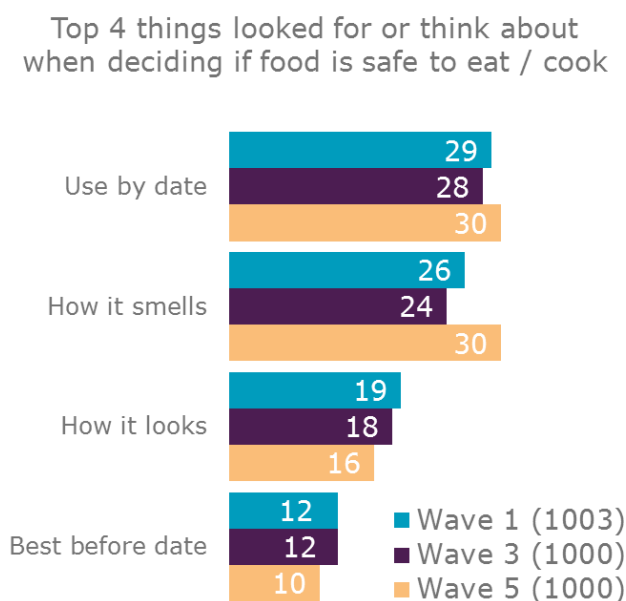


Figure 5.4 further highlights the use of use by dates when considering food. Checking of use by dates has been steady over tracking with 62% claiming they check before cooking this wave, and 65% that they check these when buying food.

As noted in the previous reports, although dates on packaging are used as a source of information, consumers are not necessarily aware of the difference between the different dates on labels. As shown in Figure 5.4, when asked which type of date label was the best indicator of whether food is safe to eat, the proportion correctly selecting 'use by date' has remained consistent at around seven in ten. There also remains a fifth of consumers who refer to best before dates as an indication of food safety.

**Figure 5.4 Use by dates (Q28, Q29, Q27)**

Base: all respondents W1 (1003) W3 (1000) W5 (1000)

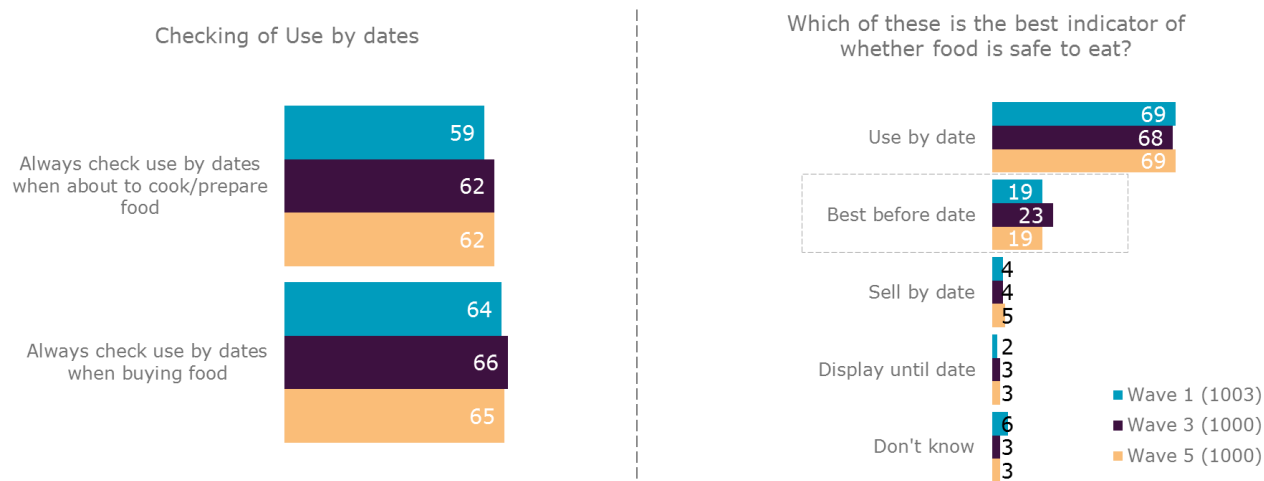
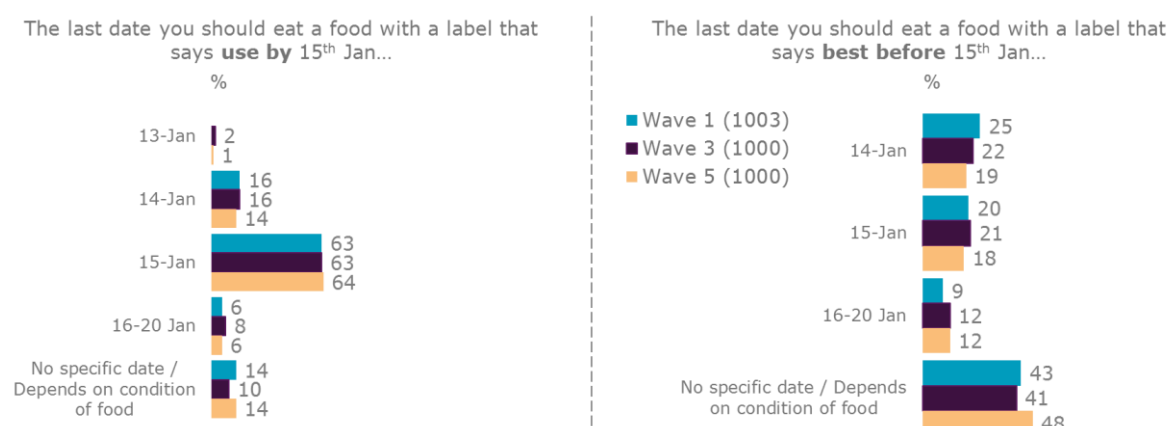


Figure 5.5 further highlights the continued confusion around ‘use by’ and ‘best before’ dates with a variety of answers given for when is the last date you should eat food, particularly the ‘best before’ date.

### Figure 5.5 The last date you should eat food with a label that says... (Q30/Q31)

Base: all respondents W1 (1003) W3 (1000) W5 (1000)



Roughly two thirds (63% at wave one and three, 64% at wave five) correctly indicated the last day an item with a use by date of 15<sup>th</sup> January could safely be eaten was 15<sup>th</sup> January. 14% believe it be 14<sup>th</sup> January (very few thought before this), and while only 6% said after the 15<sup>th</sup>, a significant remainder do not think the date relevant but depends on the condition of the food. There has been little change in any of these measures across the three waves. When considering the last date for eating a food with a best before of 15<sup>th</sup> January, the most common date given remains 19<sup>th</sup> January, though this has fallen over time, with the most common answer now being that there is no specific date and it depends on the condition of the food (48%).

**In summary, consumers are less worried about misleading food origin information and authenticity than has been the case at previous waves. The number of consumers who agree that they have clear information on what food labels mean is still improving. There is a consistent, high proportion of consumers who regularly check the date label at the point of preparing food. However, an increase in those who use smell to check if food is safe to eat shows there is still room for improvement in terms of use-by dates as the best indicator of food safety.**

## 6. Responsible food businesses flourish

**FSS's regulatory approach is in line with the principles of better regulation. It rewards compliant businesses and supports them both in domestic and export markets. FSS deals effectively with those that are non-compliant, to either achieve compliance, or deliver meaningful sanctions that prevent non-compliant businesses from operating.**

In summary, we found that:

- A further increase in agreement that food safety and hygiene information is easily available shows consumers are increasingly aware of this, and where to find it, providing a good platform for FSS to build on.
- Awareness of the Food Hygiene Information Scheme (FHIS) has also increased significantly, though use and the degree to which it influences decision making is steady.
- Consumers appear less concerned about food businesses paying attention to food safety and hygiene.
- Whilst cleanliness and hygiene remain key factors for consumers when deciding where to eat out, the result of the most recent inspection is least important, with appearance and reputation continuing to be most commonly used.



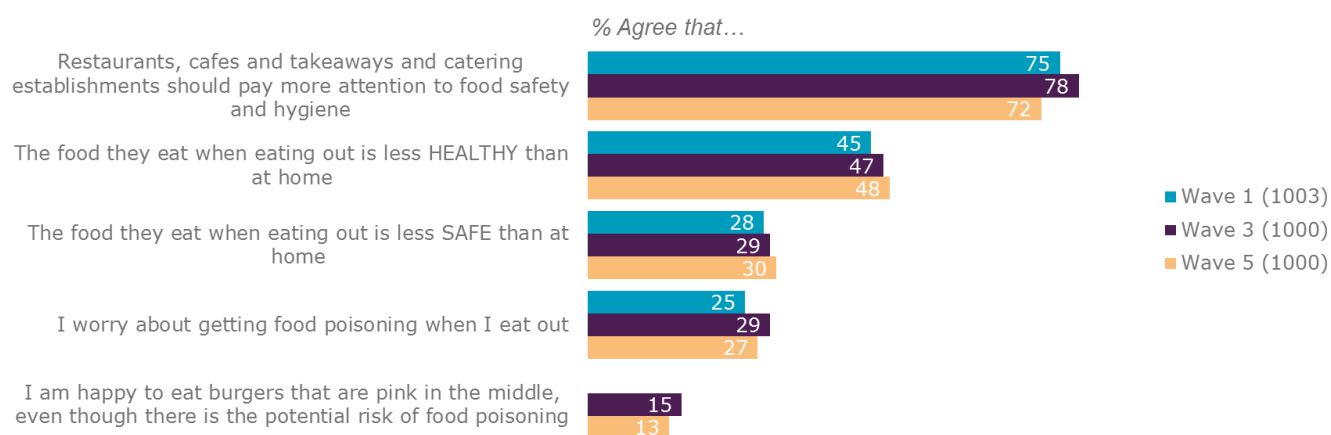
This chapter focuses on factors consumers consider when eating out, with particular reference to food hygiene and the Food Hygiene Information Scheme (FHIS) operated by FSS. Most of the questions in this section have been asked in waves one, three and five.

## 6.1 Attitudes towards eating out

Figure 6.1, which summarises agreement with a variety of statements around eating out, shows that there has been a notable decrease in the proportion of consumers agreeing that *restaurants, cafes and takeaways and catering establishments should pay more attention to food safety and hygiene* (down to 72% in wave five from 78% in wave three). In section four we saw that more people blame food they have eaten out for food poisoning than food prepared at home, which is reflected by the third of consumers agreeing in the figure below that *the food they eat when eating out is less safe than at home* (30% at wave five), and the 27% who agree that *I worry about getting food poisoning when I eat out*.

**Figure 6.1 Proportion agreeing with statements about eating out of the home... (Q46/ Q52)**

Base: all respondents W1 (1003) W3 (1000) W5 (1000)



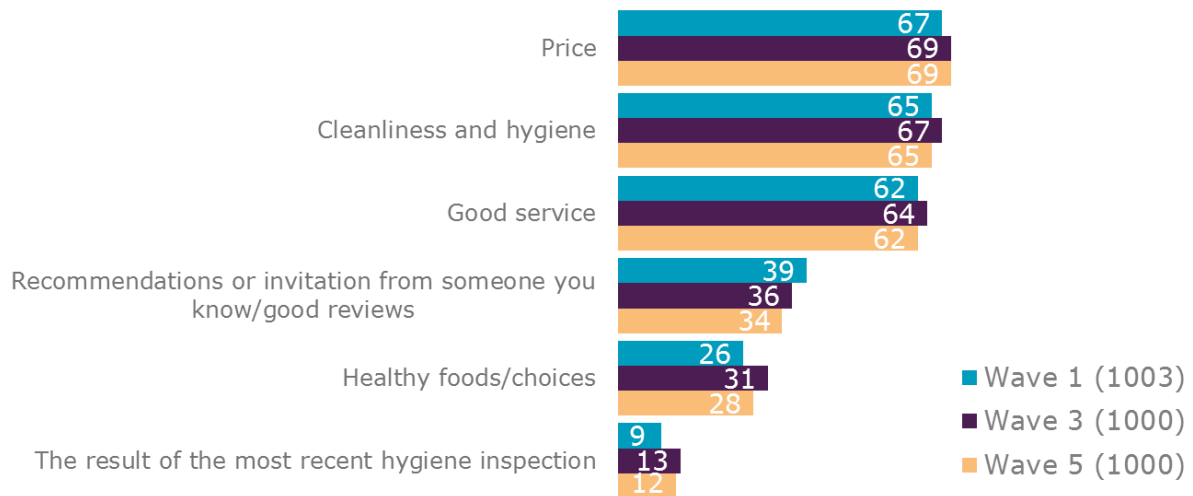
Acceptance of eating burgers that are pink in the middle remains low overall, although there is still 13% of the population who would be happy to do so despite the risk of food poisoning. This is driven by the younger age group (16-34).

## 6.2 Factors when deciding where to eat out

When it comes to deciding **where** to eat out, the top six factors used when deciding are shown in Figure 6.2

**Figure 6.2 Top 6 factors when deciding where to eat out – prompted (Q44)**

Base: All respondents W1 (1003), W3 (1000) W5 (1000)

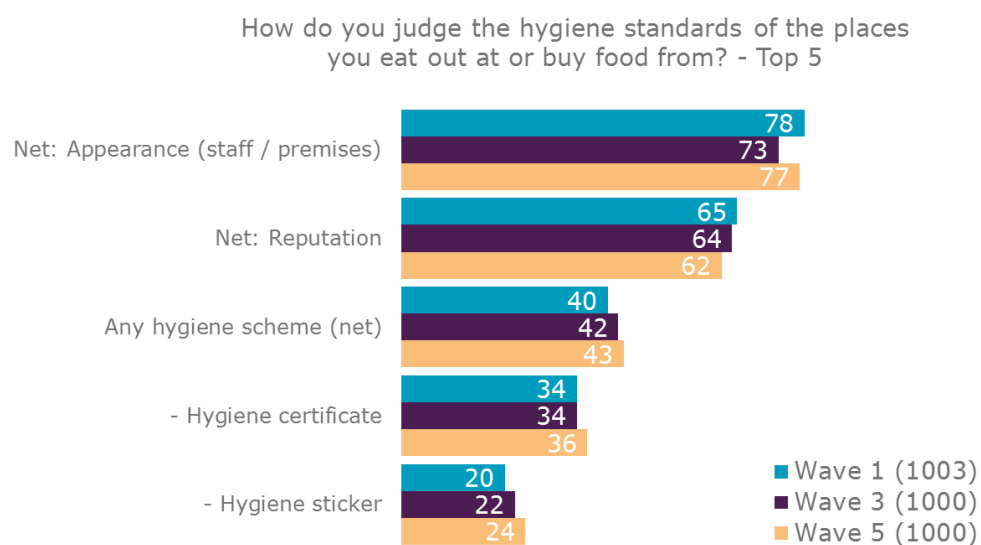


Increases which were seen at wave three in the importance of healthy choices and the most recent hygiene inspection when deciding where to eat out have not been sustained, with both dropping back slightly at wave five to 28% and 12% respectively. Overall, cleanliness remains a key factor for consumers and was still the second most important factor on prompting (65%), slightly behind *price* (69%). With *the results of the most recent hygiene inspection* remaining low (12%), this suggests that while *cleanliness and hygiene* are important to consumers, few are using formal measures to judge hygiene when eating out. It is interesting to note that whilst the importance of almost all factors has fallen slightly at this latest wave, the importance of price has remained consistent at 69% - further highlighting the importance of affordability to consumers.

In terms of the main factors used to judge the hygiene standards (shown in Figure 6.3), the most popular answer was *appearance (staff and/ or premises)*, which has recovered from a dip at wave three to similar levels seen in wave one (78% in wave one, 73% in wave three, 77% in wave five). There has been a further small increase in the use of hygiene schemes / stickers when judging standards (42% in wave three, 43% in wave five), though these remain secondary to appearance and reputation.

**Figure 6.3 Top 5 factors used to judge hygiene standards of places to eat out at/ buy food from – prompted (Q47)**

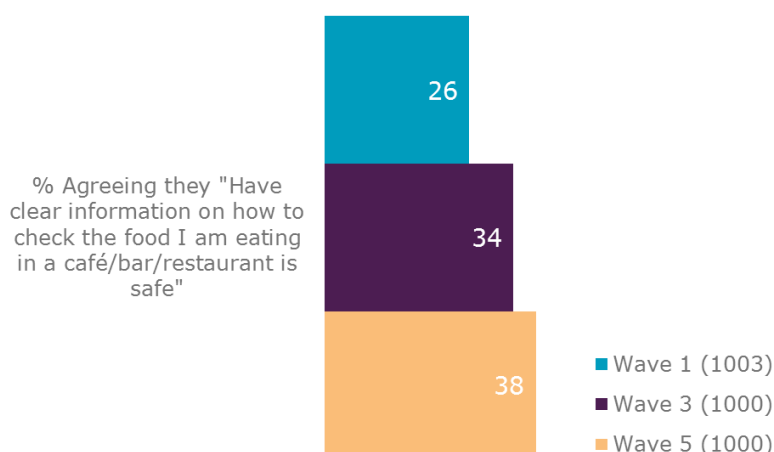
Base: All respondents W1 (1003), W3 (1000) W5 (1000)



As shown in Figure 6.4, there has been a consistent increase across the waves in the proportion of consumers who agree that they have clear information on *how to check whether the food I am eating in a café/ bar/ restaurant is safe* (38% in wave five, up from 34% in wave three, up from 26% in wave one), showing consumers are increasingly aware of this information being available. Consumers also showed high awareness of where information on the most recent hygiene inspection can be found, which was collected in a new question at wave five. As shown in Figure 6.5, when selecting from a prompted list, 43% indicated that they would look at the FSS website to find this information, whilst 29% would look at the window of the food business and 18% at the local council website. This in turn provide a good platform on which FSS can build in the future with greater promotion of hygiene schemes.

**Figure 6.4 Agreement with clearness of informations on safety of food when eating out (Q15)**

Base: All respondents W1 (1003), W3 (1000) W5 (1000)



**Figure 6.5 Source of information on an establishment's most recent hygiene inspection (prompted) (Q211)**

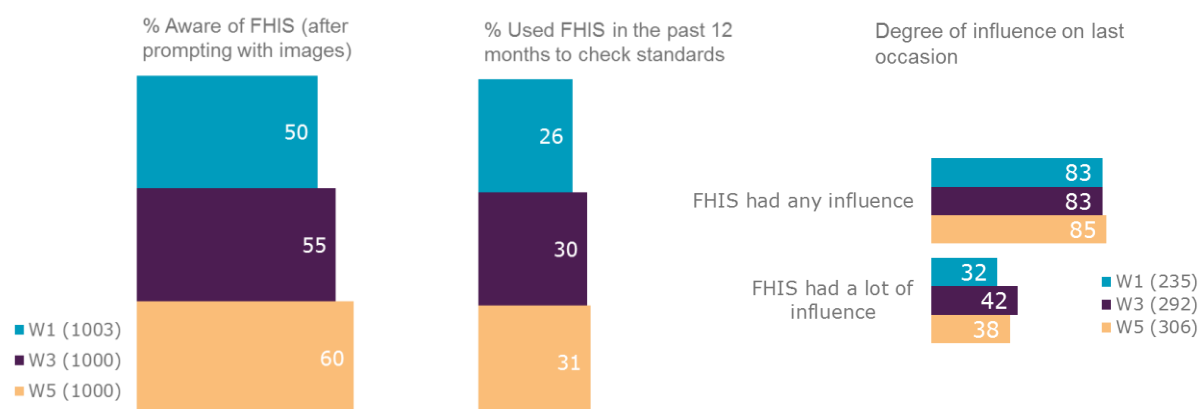
Base: All respondents W1 (1003), W3 (1000) W5 (1000)



Further questions also gauged awareness and usage of the food hygiene information scheme (FHIS), by showing respondents images of an FHIS certificate, the logo and a 'pass' sticker. Figure 6.6 shows the results when all respondents were shown images and asked if they had seen them before.

**Figure 6.6 Awareness and usage of FHIS (Q48 / Q49)**

Base: All respondents W1 (1003), W3 (1000) W5 (1000)



Recognition of the FHIS materials (certificate, logo and a 'pass' sticker) increased significantly wave-on-wave (50% in wave one, 55% in wave three, 60% in wave five), suggesting that consumers have become more familiar with the scheme over time and reinforcing the earlier finding of a greater proportion claiming they have clear information on how to check whether the food they are eating when eating out is safe to eat. However, the proportion who claim to have used the FHIS scheme showed no change at wave five at 31%. Among those who had used the scheme in the last

12 months, the vast majority (84%) claim to have checked the certification on the window / door of the establishment (the same as at wave three), whilst 14% claim to have checked on the internet (compared to 15% at wave three). Among the same group who used the scheme in the past 12 months, the degree to which it influences decision making is also steady, suggesting there is a need to stress the benefits of using the scheme. However, it is encouraging that it remains the case that the vast majority of those who have used the scheme claimed that it influenced their decision.

**In summary, consumers appear to be increasingly aware of the availability of information about food safety and hygiene when eating out, and are potentially less concerned than previously about this due to a feeling that this is being independently monitored. There has been a further improvement in recognition and use of the FHIS certificate over the last 12 months, however price and general hygiene remain the key factors when deciding where to eat out.**

## 7. Consumers choose healthier diets

This chapter of the report covers measures that relate to the FSS strategic outcome 'Consumers choose healthier diets'. It focuses on concerns and attitudes towards consumers' own diet, their children's diet, and that of the nation.

In summary we found that:

- Perceptions of the healthiness of one's own diet dipped in the winter. However, consumers' perceptions of their family's diet remain generally stable over tracking.
- There is still high agreement that Scotland's diet is unhealthy, despite a slight weakening in the latest wave.
- Concerns about unhealthy ingredients, which had previously been growing, have reversed at this latest wave.
- There is a significant decline in worry about unhealthy foods on price promotion.



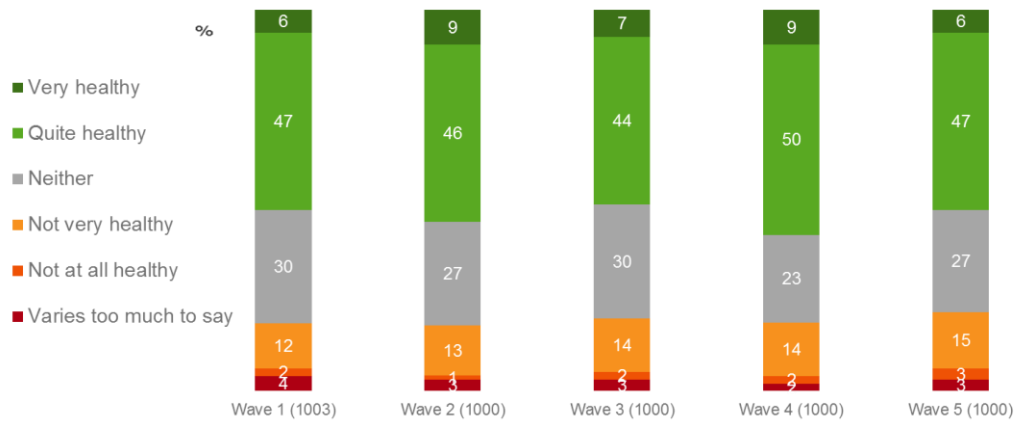
'Consumers having healthier diets' is not a main focus of the wave five tracking, however some attitude statements towards healthy eating and food in general have been monitored at each wave and are summarised in this section.

### 7.1 Perceptions of own / family's diet

To provide some context to healthy eating, survey respondents were asked to rate the healthiness of their own food and drink consumption as well as that of other people in their household. These results are summarised in Figure 7.1 and Figure 7.2.

### Figure 7.1 Perceived healthiness of own diet (Q53)

Base: All respondents W1 (1003), W2 (1000), W3 (1000), W4 (1000), W5 (1000)



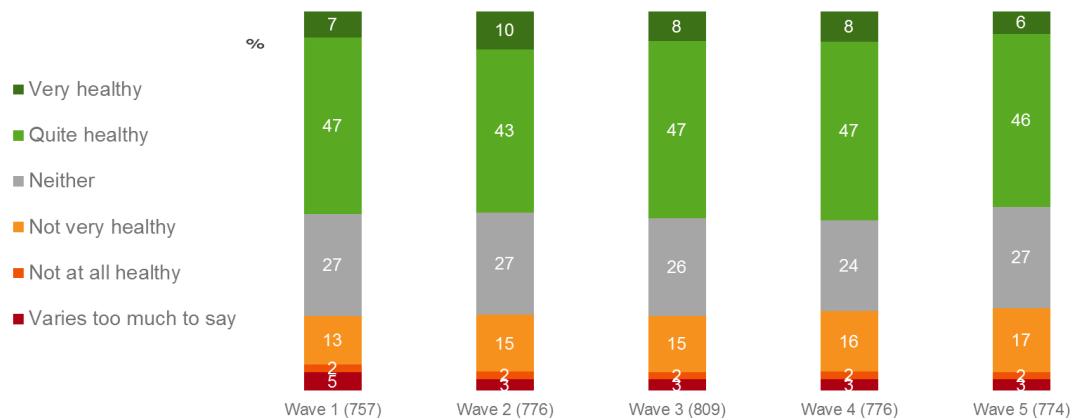
Perceptions of the healthiness of one's own diet have again dipped in the winter, reinforcing the existing hypothesis of seasonal effects on healthiness of diet, as results have been lower in waves one, three and five, all of which had fieldwork undertaken in December. Over half of respondents (53%) regarded their diet as 'healthy', but only 6% claimed it was 'very healthy'. One fifth indicated that the food and drink they eat was unhealthy, though only 3% indicated it was 'not at all healthy'.

The groups that perceive themselves to have the most healthy diet at wave five are: females (56% very or quite healthy compared to 49% of males) and ABC1s (58% compared to 46% C2DEs).

As shown in Figure 7.2, there has been little change in perceptions of the diet of other people in the household, with no seasonal trend evident over the course of the tracking.

### Figure 7.2 Perceived healthiness of household's diet (Q54)

Base: All with more than 1 person in the household W1 (757), W2 (776), W3 (809), W4 (776), W5 (774)

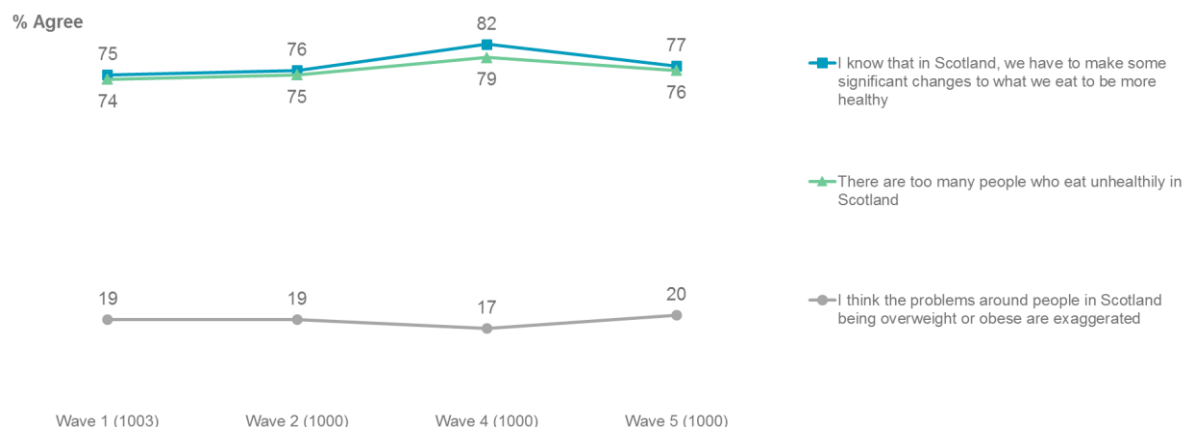


Each wave has recorded consistent results, with responses spread across the range of answers. 51% in total at wave five indicated their family's diet is healthy, with most (46%) stating it is 'quite healthy' – similar to levels seen at previous waves. The absence of seasonality may suggest that consumers think of their family as sticking to a certain level of healthiness that tends not to vary.

The survey also asked respondents the extent to which they agreed with statements relating to unhealthy eating specifically in Scotland. The results are shown in Figure 7.3.

### Figure 7.3 Unhealthiness of Scotland's diet (Q56)

Base: All respondents W2 (1000), W4 (1000), W5 (1000)



There is still high agreement that Scotland's diet is unhealthy, despite a slight weakening in the latest wave. In wave five, 77% of people agreed *I know that in*

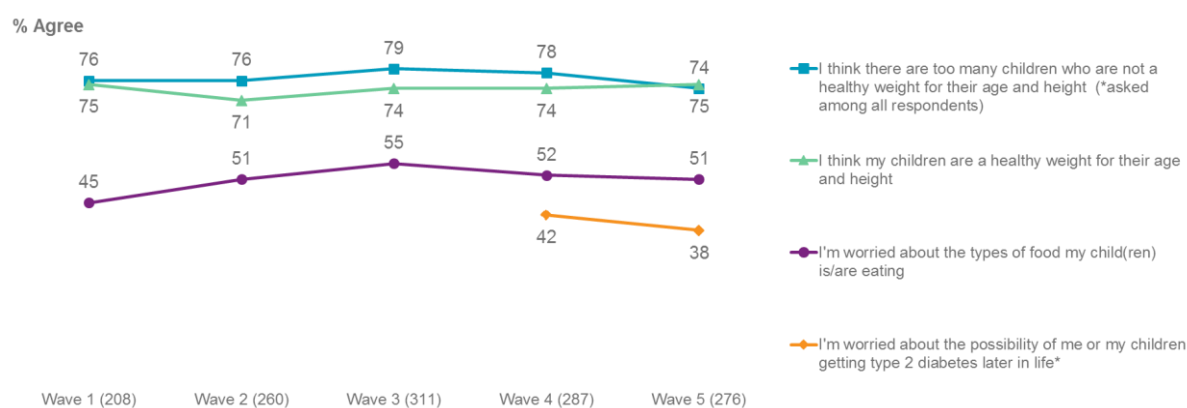
Scotland, we have to make some significant changes to what we eat to be more healthy (down from 82% in wave four) and 76% agreed *there are too many people who eat unhealthily in Scotland* (down from 79% in wave four). Alongside this there was an increase in the proportion who agreed *I think the problems around people in Scotland being overweight or obese are exaggerated*, from 17% in wave four to 20% in wave five.

## 7.2 Attitudes towards children and unhealthy eating

Parents were also asked some additional attitudinal questions regarding their children's diet, health and well-being. These results are shown in Figure 7.4.

**Figure 7.4 Attitudes to children's diet (% Agreeing) (Q56)**

Base: All respondents W1 (1000), W2 (1000), W3 (1000), W4 (1000), W5 (1000)



**Among all respondents**, there has been a significant decline in the belief that there are too many overweight children, from 78% in wave four to 74% in wave five.

**Parents** continue to think there is no problem with their own children with a similar proportion (75%) agreeing that *my children are a healthy weight for their age and height*. Agreement with this has remained stable across the two years of tracking. Around half of parents are concerned about *the types of food their children are eating*. Whilst this increased over the first year of tracking from 45% to 55% at wave three, a decline to 52% at wave four (indicating less concern) has now stabilised at wave five (51%).

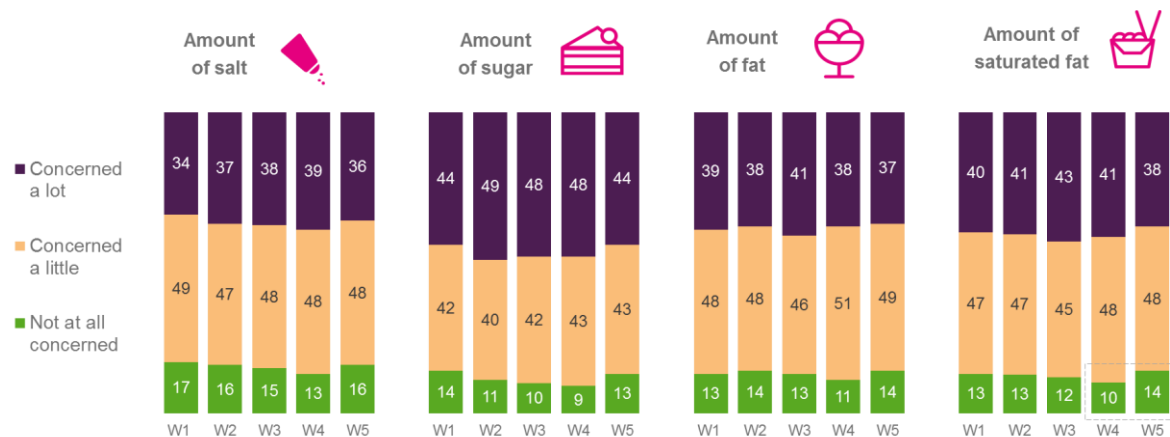
There has been a drop in the proportion of parents who *worry about the possibility of me or my children getting type 2 diabetes later in life*, from 42% in wave four to 38% in wave five. It is important to note that due to the change in wording of the statement to include 'type 2' at wave four, the results from previous waves are not directly comparable.

## 7.3 Concerns on food issues

Questions were used to determine the level of concern with the amount of salt, sugar, fat and saturated fat in food. Figure 7.5 shows the percentage indicating they were concerned with each ingredient in food.

**Figure 7.5 Level of concern with ingredients in food (Q55)**

Base: All respondents W1 (1003), W2 (1000), W3 (1000), W4 (1000), W5 (1000)



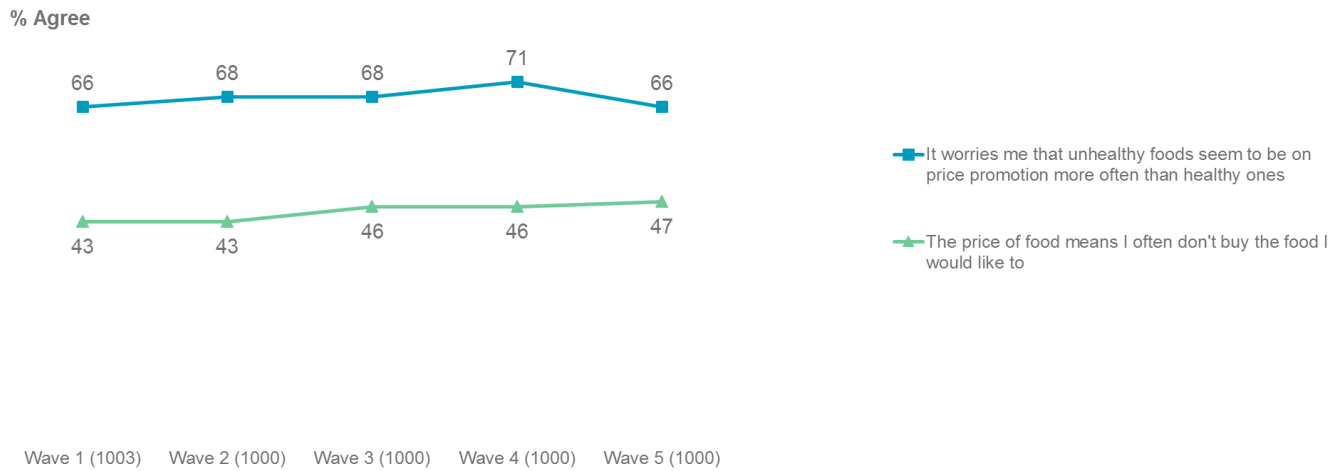
The proportion of consumers indicating that they were concerned 'a lot' or 'a little' stood at 84% for salt, 87% for sugar, 86% for fat and 86% for saturated fat at wave five. The ingredient causing the most widespread concern continues to be sugar with 44% stating they are concerned 'a lot' (although down from 48% at wave four).

Though this still represents a high level of concern overall for each of these ingredients, the increase in concern over time which had been evident at previous waves appears to have been reversed at this latest wave. It may be that this reflects a feeling that action is starting to be taken to tackle these ingredients.

The hypothesis that there is a perception that action is being taken to tackle unhealthy food is further supported by Figure 7.6, which shows a significant decline in worry about unhealthy foods on price promotion. 66% of respondents agreed that *it worries me that unhealthy foods seem to be on price promotion more often than healthy ones*, a significant decline compared to 71% agreement at wave four.

**Figure 7.6 Attitudes to unhealthy food prices (% Agreeing) (Q11)**

Base: All respondents W1 (1003), W2 (1000), W3 (1000), W4 (1000), W5 (1000)

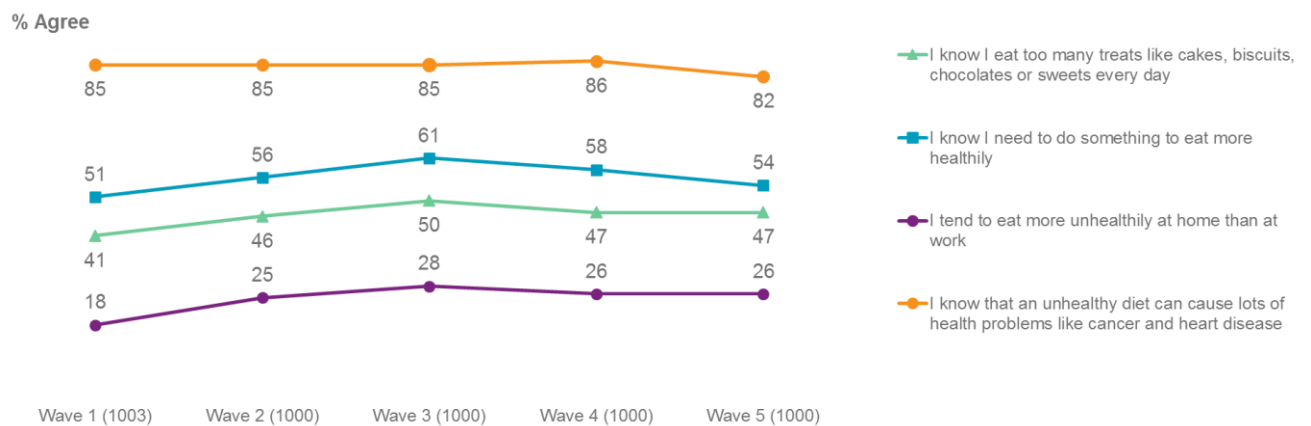


## 7.4 Attitudes towards healthy eating

Figure 7.7 shows the proportion of consumers who agree with each of the attitudes towards healthy eating behaviours.

**Figure 7.7 Attitudes towards personal diet (% Agreeing) (Q56)**

Base: All respondents W1 (1003), W2 (1000), W3 (1000), W4 (1000), W5 (1000)



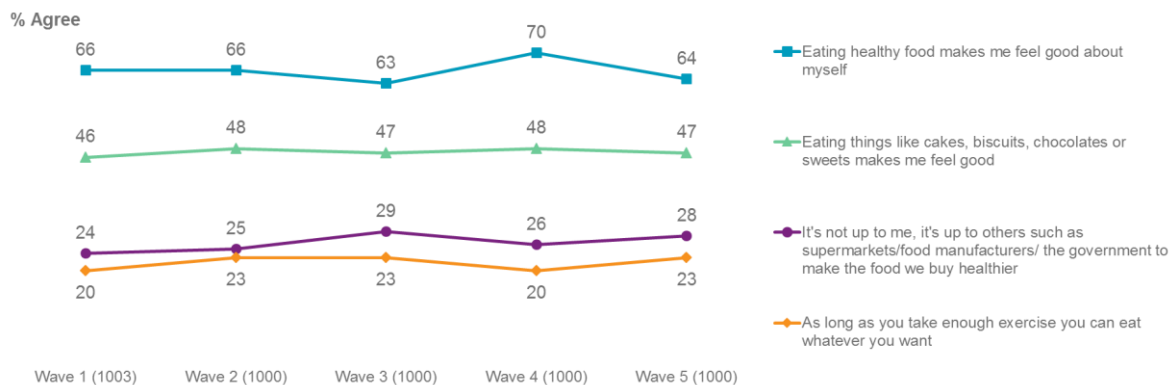
This wave has seen a significant decline in the awareness of health risks posed by an unhealthy diet, as 82% of people agreed *I know that an unhealthy diet can cause lots of health problems like cancer and heart disease*, compared to 86% in wave four – though this remains a very high level of recognition.

There has also been a further significant decline in the proportion who agree that *I need to do something to eat more healthily*. Whilst this rose significantly over the first year of tracking from 51% to 61%, it has since declined to 58% at wave four and

now 54% at wave five. This decline in perceptions of the importance of personal responsibility may be a concern.

### Figure 7.8 Attitudes towards healthy eating (% Agreeing) (Q56)

Base: All respondents W1 (1000), W2 (1000), W3 (1000), W4 (1000), W5 (1000)

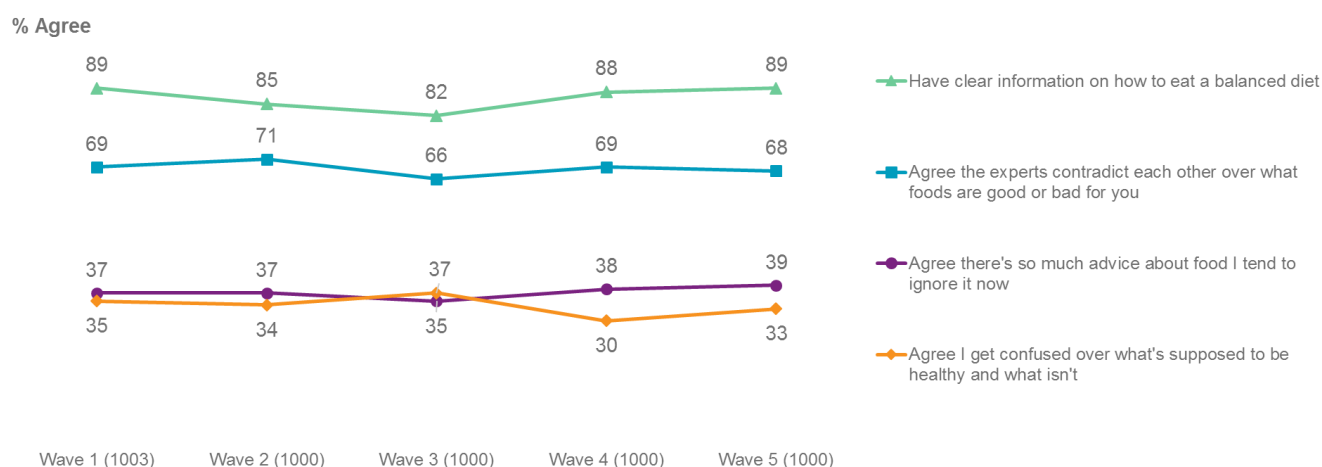


Of note with the next group of attitude statements, as shown in Figure 7.8, the proportion agreeing that *eating healthy food makes me feel good about myself* has fallen back to levels seen in wave three, following an increase at wave four (70% down to 64%), so whilst this has fluctuated there is essentially little change over the course of tracking. There is also little change in the proportion agreeing that *eating things like cake, biscuits and chocolate or sweets makes me feel good* (47% at wave five), highlighting the extent of the problem in changing behaviours and encouraging healthy choices. With 23% agreeing *that as long as you take enough exercise you can eat whatever you want* – again showing little change from previous waves - further education is required to convince the public they cannot rely purely on physical fitness and that they also need to make good food choices.

Whilst there has only been a small increase at the latest wave in the level of agreement that *it's not up to me, it's up to others such as supermarkets, food manufacturers, the government to make the food we buy healthier* (to 28%), this appears to show an upward trend (from 24% at the start of tracking) towards the onus for healthy eating being placed on these organisations (and potentially in turn an expectation that they take action).

**Figure 7.9 Perceptions of information/advice on a balanced diet (% Agreeing) (Q15/ Q11/ Q56)**

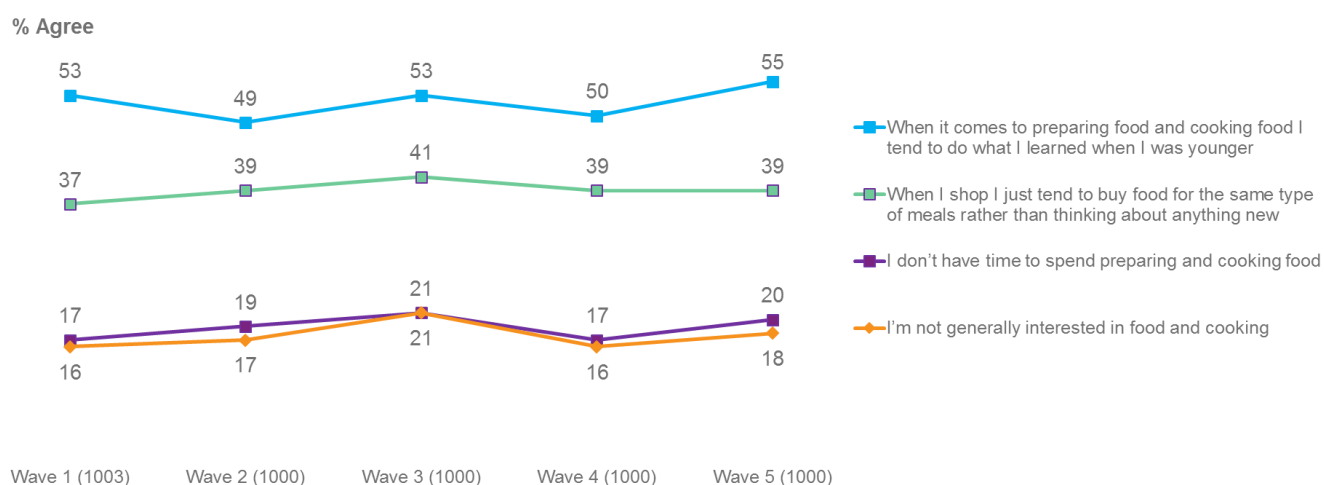
Base: All respondents W1 (1003), W2 (1000), W3 (1000), W4 (1000), W5 (1000)



When asked about the information and advice they have available to them about having a healthy and balanced diet, as shown in Figure 7.9, perceptions have fluctuated over time but show little change since the start of tracking. 89% of people at the most recent wave agreed that they *have clear information on how to eat a balanced diet* (which has now recovered from a dip to 82% at wave three). In spite of this, two thirds of consumers agreed that *the experts contradict each other over what foods are bad for you*, and one third (33%) claimed they *get confused over what's supposed to be healthy and what isn't*, showing a need for further clarification so that this advice isn't ignored.

**Figure 7.10 Attitudes to preparing food (% Agreeing) (Q56)**

Base: All respondents W1 (1003), W2 (1000), W3 (1000), W4 (1000), W5 (1000)



Finally, attitudes towards preparing food, as shown in Figure 7.10, have also fluctuated over the course of tracking, but show little change from where they were

two years ago. A fifth of consumers still have little interest or time for cooking and preparing food, with 20% claiming *I don't have time to spend preparing and cooking food* and 18% *I'm not generally interested in food and cooking*.

**Overall, the majority continue to perceive their own diet, and their family's diet, as 'healthy', with evidence of seasonal differences in perception of one's own diet. At this latest wave there are some indications that feelings of personal responsibility for diet are weakening (Figure 7.7). There is also an indication that the food industry is increasingly being held responsible for healthy eating (Figure 7.8), and also evidence of a perception that action is already being taken at a wider level (Figure 7.6).**

## 8. Method and sample



To ensure that the views and behaviours of the public in Scotland towards food safety and authenticity are accurately captured, the tracking study comprises a large-scale quantitative survey among a representative sample of adults, aged 16+ in Scotland.

At each wave the same sampling and methodological approach is adopted: the data is collected using an online self-completion questionnaire and the sample is drawn primarily from the Kantar TNS panel, Lightspeed, with additional sample provided by panel partners.<sup>2</sup> Sample is provided by additional panel partners to ensure that a new, fresh sample of adults is surveyed at each wave of research. Lightspeed and all panel partners operate to the highest standards of panel member recruitment, maintenance and quality checks, to ensure that robust data is collected.

The dates and sample sizes achieved at each wave of tracking are shown in the table below.

**Table 8.1: Fieldwork dates**

Tracking research wave	Sample size	Fieldwork dates
1	1003	8 <sup>th</sup> – 15 <sup>th</sup> December 2015
2	1000	28 <sup>th</sup> June – 6 <sup>th</sup> July 2016
3	1000	8 <sup>th</sup> – 21 <sup>st</sup> December 2016
4	1000	19 <sup>th</sup> June - 4 <sup>th</sup> July 2017
5	1000	7 <sup>th</sup> – 20 <sup>th</sup> December 2017

Quotas are applied to provide a survey sample that is representative of the adult population in Scotland in terms of gender, age, socio-economic status and region.

---

<sup>2</sup> The panel partners included Research Now, GMI and Panelbase

Additionally, to ensure that the achieved sample exactly matches the population on these key variables, and at each wave, a weighting<sup>3</sup> matrix is applied to the total sample results.<sup>4</sup>

The achieved and weighted sample profiles are shown in Table 8.2

**Table 8.2: Survey profile: achieved and weighted**

Base: All respondents (1000)

		Target %	Achieved %	Weighted %
Gender	Male	49	51	49
	Female	51	49	51
Age	16-34	30	27	30
	35-44	15	14	15
	45-54	18	17	18
	55-64	15	19	15
	65+	22	23	22
SEG (socio-economic group)	AB	25	27	25
	C1	28	30	28
	C2	19	17	19
	DE	29	27	29

---

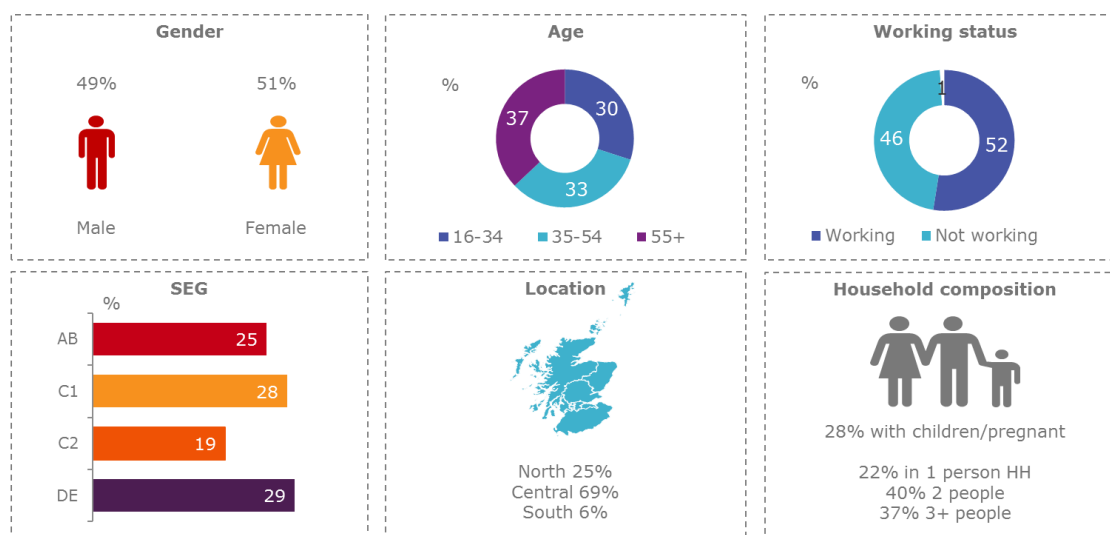
3 Weighting is the process by which data are adjusted to reflect the known population profile. Through weighting specified profiles are adjusted to match targets and through the use of a number of targets each respondent is assigned a weight within the sample that represents the extent to which their answers are adjusted.

4 The data was weighted to match the population profile based on mid-year population estimates 2014, 2011 Census and TGI July 2014-June 2015.

An overview of the survey sample is shown in Figure 8.1, illustrating the range of the adult population surveyed.

### Figure 8.1 Sample profile

Base: All respondents (1000)



Though this report focusses on the findings among the total Scotland sample, the data tables provide a wealth of information for further analysis by several variables in addition to standard demographics.

Please note that throughout the report at single response option questions the total percentage shown may be one to two percentage points more or less than 100% because of rounding the numbers up or down. At questions where multiple answers are allowed the total percentage will be over 100%.

A copy of the questionnaire can be found here:

<http://www.foodstandards.gov.scot/food-scotland-survey>

The full results for each question are available here:

<http://www.foodstandards.gov.scot/food-scotland-data-tabulations>

## 9. Appendix A

### Social grade definitions (based on chief income earner)

- A**
  - Scotland: 6% of the population;
  - These are professional people, or are very senior in business or commerce, or are top civil servants
  - Retired people, previously grade A. Widows/widowers of people previously grade A.
- B**
  - Scotland: 18% of the population;
  - Middle management executives in large organisations, with appropriate qualifications
  - Principle officers in local government and civil service
  - Top management or owners of small business concerns, educational and service establishments
  - Retired people, previously grade B. Widows/widowers of people previously grade B.
- C1**
  - Scotland: 28% of the population;
  - Junior management; owners of small establishments; and all others in non-manual positions
  - Jobs in this group have very varied responsibilities and educational needs
  - Retired people, previously grade C1. Widows/widowers of people previously grade C1.
- C2**
  - Scotland: 19% of the population;
  - All skilled manual workers and those manual workers with responsibility for other people
  - Retired people previously grade C2, with a pension from their job
  - Widows/widowers, if receiving pensions from their late husband's/wife's job.
- D**
  - Scotland: 16% of the population;
  - All semi-skilled and unskilled manual workers, and apprentices and trainees to skilled workers
  - Retired people, previously grade D, with a pension from their job
  - Widows/widowers, if receiving a pension from their late husband's/wife's job.
- E**
  - Scotland: 13% of the population;
  - All those entirely dependent on the state long term, through sickness, unemployment, old age or other reasons. Those unemployed for a period exceeding 6 months (otherwise classified on previous occupation)
  - Casual workers and those without a regular income
  - Only households without a chief income earner are coded in this group



**For safe food and  
healthy eating**

**Food Standards Scotland**  
Pilgrim House  
Aberdeen AB11 5RL

01224 285100

marketing@fss.scot

foodstandards.gov.scot



**KANTAR TNS**

**Catriona West**  
Associate Director  
0131 243 3916

**Alastair Graham**  
Associate Director  
0131 243 3920

