



Food in Scotland Consumer Tracking Survey **Wave 3**

March 2017

SUMMARY REPORT

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1. Executive Summary

The results from Food Standards Scotland (FSS)'s Food in Scotland Consumer Tracking Survey act as a benchmark in measuring Scotland's attitudes, behaviours and knowledge in relation to food. 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.



Food Standards Scotland has six strategic outcomes it is working towards delivering:

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

The survey was developed and designed to explore the interests of consumers 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 third wave of tracking.

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

At each wave c1000 adults aged 16+ have been interviewed:

- between 8th and 15th December 2015 for wave one;
- between 28th June and 6th July 2016 for wave two; and
- between 8th and 21st December 2016 for wave three.

1.1 Key Findings

1.1.1 Strategic Outcomes 1 and 2 – FSS is a trusted organisation, FSS is effective and efficient

- FSS has continued to improve its level of brand recognition and trust in the organisation over the past twelve months.
- In line with the increase in brand recognition, the public's understanding of the role of FSS and ratings of FSS fulfilling its responsibilities have also continued to improve.
- The public remain concerned about a wide variety of food issues although most of the 'top' concerns have shown a general drop in concern over the course of the tracking.
- Conversely, concerns with 'prices' and 'people having an unhealthy diet' show signs of growing with the majority of consumers also thinking the price of food will rise following Brexit.

1.1.2 Strategic Outcome 3 – Food is safe

- There has been a slight fall in the proportion following the recommended cleaning behaviours, however, consistent hand washing remains the most widely followed behaviour.
- The majority of consumers know what temperature their fridge should be set at, although fewer are reliably checking whether or not their fridge is working at the correct temperature.
- Compliance with cross-contamination advice continues to vary: the recommended storage practices (storing meat at bottom of fridge and never store tins in the fridge) are generally more widely followed than those relating to food preparation (such as using different chopping boards and washing raw meat) highlighting that the latter requires further education.
- Recommended cooking practices remain the most widely followed of all the 4C behaviours although consumers have started to show some signs of complacency.
- Awareness of Campylobacter has fallen marginally from 37% to 33% of the population and as such knowledge of the specific health risk posed by not following recommended advice remains relatively low.

1.1.3 Strategic Outcome 4 – Food is authentic

- There has been a slight improvement in 'trust' and 'clarity' of food labelling at the latest wave.
- Interest in country of origin remains at a moderate level with over half agreeing they would like know more about where the food they eat comes from.

- Labels continue to be widely referred to when both shopping and at home, primarily for 'date information' rather than for 'price' or 'ingredients'.
- Dates on packaging are widely referenced, but there remains some confusion, particularly regarding the 'best before' date.

1.1.4 Strategic Outcome 5 – Responsible food businesses flourish

- While there is some evidence that concern with hygiene when eating out is falling, the opposite trend appears in relation to consumers expressing support for food establishments paying more attention to food safety and hygiene. In line with this, the latest survey results also show a slight increase in worry about getting food poisoning when eating out.
- 'Price' and 'general hygiene' remain the key factors when deciding where to eat out, however references to 'hygiene certificates' and places offering 'healthy choices' appear to be growing in importance.
- There has been an improvement in recognition and use of the FHIS certificate over the last 12 months.

1.1.5 Strategic Outcome 6 – Consumers have healthier diets

- There has been little movement in perceptions towards a person's own diet and that of their household, with consistently just over half claiming it is 'healthy'.
- Links between health and diet are well-established, with evidence to suggest a slight strengthening in concern with the amount of sugar found in food.
- There is growing acceptance among the population of the need to eat more healthily with the majority understanding that it is their own responsibility. Conversely a significant, and gradually increasing, minority place the responsibility elsewhere such as with the government or with the food industry.
- There continues to be strong evidence that unhealthy eating/ being overweight is regarded as a national problem with the vast majority agreeing that obesity is a serious problem for Scotland.
- The results also indicate that there is a growing concern among parents about their children's diet and health and wellbeing, although this is often more likely to be regarded as a problem for other people's children rather than their own.
- Despite the growing acceptance of the need to eat more healthily, there appears to be an increasing resistance to engage in preparing and cooking food. There has also been a slight rise in 'the expense' as a barrier to making healthy choices.

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 obtain current information on consumer attitudes, knowledge and reported behaviours in Scotland across a range of food safety and nutrition 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. **FSS is a trusted organisation**
2. **FSS is efficient and effective**
3. **Food is safe**
4. **Food is authentic**
5. **Responsible food businesses flourish**
6. **Consumers have healthier diets**



FSS intends to use the findings as a benchmark against which changes in food safety and healthy eating knowledge, attitudes, behaviours can be monitored over time.

This report highlights the findings from the **third** wave of research tracking, compared to those obtained at waves one and two, and focuses mainly on the three FSS strategic outcomes below:

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

The measures related to the outcomes that 'FSS is trusted', 'FSS is efficient and effective' and a small number of measures relating 'Consumers have healthier diets' are repeated at each wave and therefore the results from waves one and two are also shown in this report for comparative purposes.

3. 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 sample and methodological approach is adopted: the data is collected using an online self-completion questionnaire and the sample is drawn using a dual panel approach. These panels 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 3.1: Fieldwork dates

Tracking research wave	Sample size	Fieldwork dates
1	1003	8 th – 15 th December 2015
2	1000	28 th June – 6 th July 2016
3	1000	8 th – 21 st December 2016

Quotas are applied in order to provide a survey sample that is representative of the adult population in Scotland in terms of gender, age, socio-economic status and region. Additionally, to ensure that the achieved sample exactly matches the population on these key variables, and at each wave, a weighting¹ matrix is applied to the total sample results.²

The achieved and weighted sample profiles are shown in Table 3.2

1 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.
2 The weighting is based on population estimates from the BARB (Broadcasters' Audience Research Board) Establishment Report 2011, ONS (Office of National Statistics) Mid-year population estimates 2011 and the 2001 Census.

Table 3.2: Survey profile: achieved and weighted

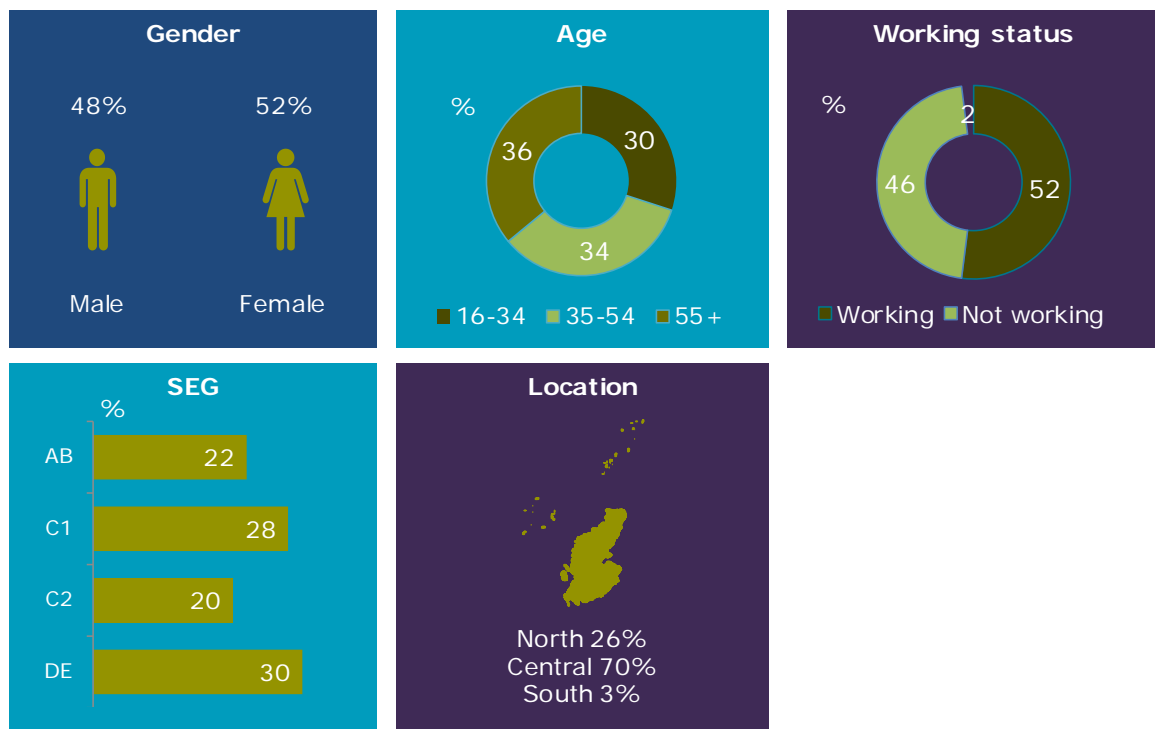
Base: All respondents (1000)

Base:1000		Target %	Achieved %	Weighted %
Gender	Male	48	41	48
	Female	52	59	52
Age	16-34	30	28	30
	35-44	16	17	16
	45-54	18	20	18
	55-64	15	19	15
	65+	21	19	21
SEG (socio-economic group)	AB	22	28	22
	C1	28	31	28
	C2	20	18	20
	DE	30	23	30

An overview of the survey sample is shown in Figure 3.1, illustrating the range of the adult population surveyed.

Figure 3.1 Sample profile

Base: All respondents (1000)



The scale and scope of the survey allows for a number of questions to be included which are also usable as analysis variables. Though this report focusses on the findings among the total Scotland sample, the data tables provide a wealth of information for further analysis by a number of variables in addition to standard demographics. Some examples of the analysis variables available are shown in Figure 3.2.

Figure 3.2 Analysis variable

Base: All respondents (1000)



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>

4. FSS is a trusted organisation



In summary, we found that:

- FSS has continued to improve its level of brand recognition and trust in the organisation over the past twelve months.
- In line with the increase in brand recognition, the public's understanding of the role of FSS and ratings of FSS fulfilling its responsibilities have also continued to improve.
- The public remain concerned about a wide variety of food issues although most of the 'top' concerns have shown a general drop in concern over the course of the tracking.
- Conversely, concerns with 'prices' and 'people having an unhealthy diet' show signs of growing with the majority of consumers also thinking the price of food will rise following Brexit.

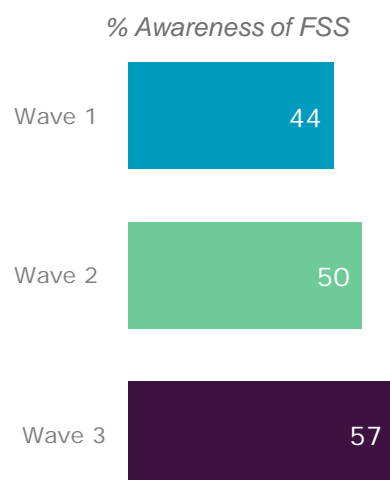


4.1 Brand recognition and perceptions

As illustrated in Figure 4.1 and Figure 4.2, there have been improvements in both awareness and trust in FSS since tracking began twelve months ago.

Figure 4.1 Proportion aware of Food Standards Scotland (Q7)

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

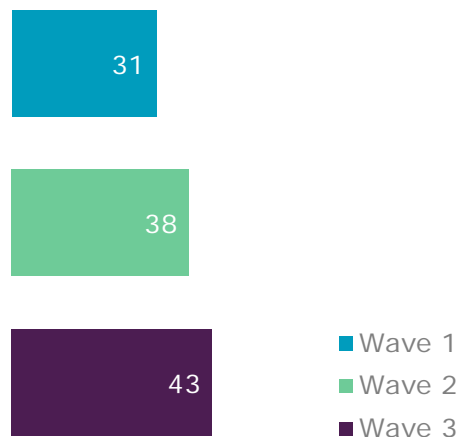


All respondents were shown the FSS logo and told that 'Food Standards Scotland' has taken over from the 'Food Standards Agency' as the organisation responsible for making sure people eat healthily and safely in Scotland, and asked if they had heard of Food Standards Scotland before. In total 57% of the population claimed they had heard of FSS before taking part in the survey at wave three, a significant increase from 50% in wave two and 44% in wave one, highlighting a very positive trend over the course of the year.

Figure 4.2 Proportion that trust Food Standards Scotland (Q9)

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

% Trust in / trust a lot FSS

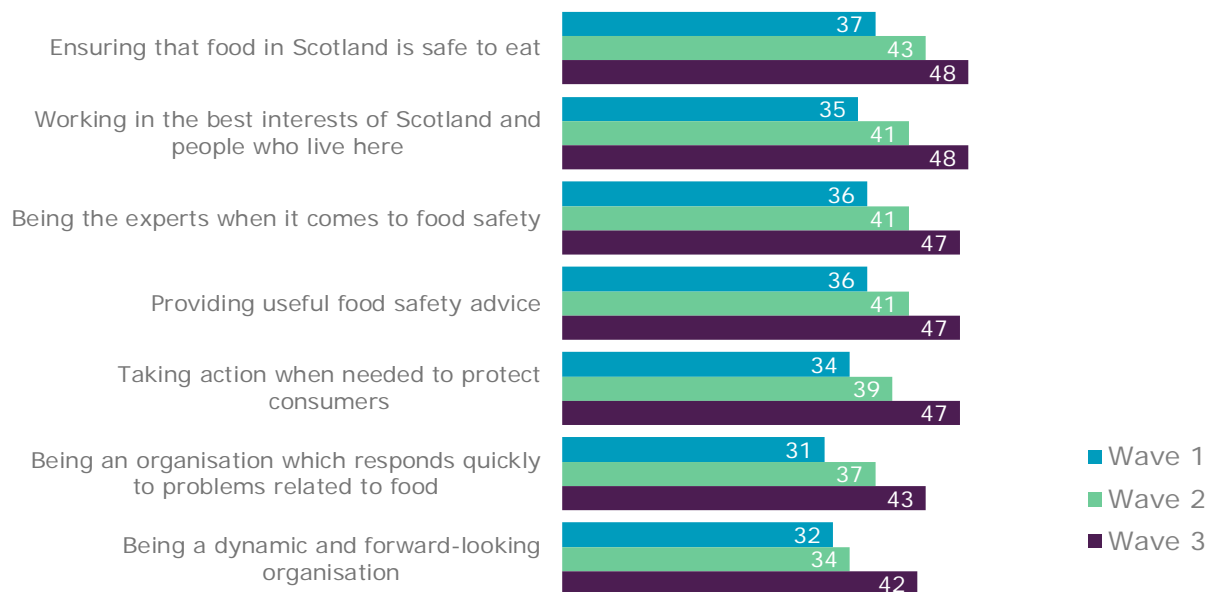


The degree of trust in FSS also increased significantly with 43% of the population saying they either 'trust it' or 'trust it a lot' to do its job, up from 38% in wave two and 31% in wave one and further suggests a very positive improvement. As found at previous waves of the survey, only a very small proportion said they did not trust FSS (2%).

Respondents were also asked to rate FSS 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 three box level ('excellent', 'very good' or 'good') is shown in Figure 4.3. This is based on the total sample, not just those aware of the organisation.

Figure 4.3 Proportion rating FSS ‘Excellent’, ‘Very good’ or ‘Good’ (Q10)

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



The results at wave three show that the performance of FSS has strengthened in all areas, with just under half of consumers rating the organisation as either ‘excellent’, ‘very good’ or ‘good’ for five out of the seven dimensions, up from around two in five at wave two, and around a third at wave one. Importantly, across all statements only a tiny minority (3% or less) indicated that any aspect was ‘poor’.

Aspects of FSS which have recorded the most improvement since wave two include *taking action when need to protect consumers* and *being dynamic and forward looking*. The latter continues to record the lowest rating but only by a small margin and there are now signs that progress is also being made here too.

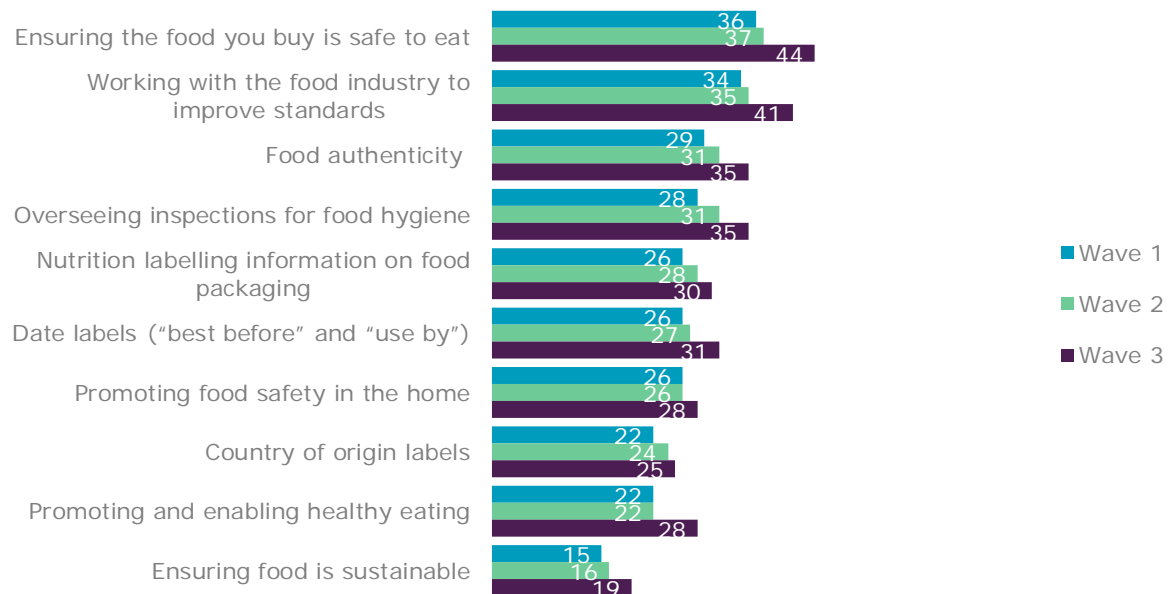
Overall, FSS has continued to further improve its brand recognition and trust in a relatively short period of time. In the last six months increased consumer confidence in the organisation’s ability to *protect consumers* is particularly significant.

4.2 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 4.4 are calculated from the total sample and not just those aware of the organisation.

Figure 4.4 What issues respondents think FSS is responsible for (prompted) (Q8)

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



In line with the increase in brand recognition and trust, understanding of the role of FSS has also improved. FSS remains most likely to be associated with food safety and food standards. Moreover, awareness of these responsibilities compared to others has increased further with *ensuring the food you buy is safe to eat* and *working with the food industry to improve standards* recording the largest shifts at the latest wave (36% to 44%, and 34% to 41% respectively). However, familiarity with *promoting and enabling healthy eating*, which previous tracking has shown to be a much less familiar responsibility of FSS, has also greatly increased at this latest wave (from 22% to 28%).

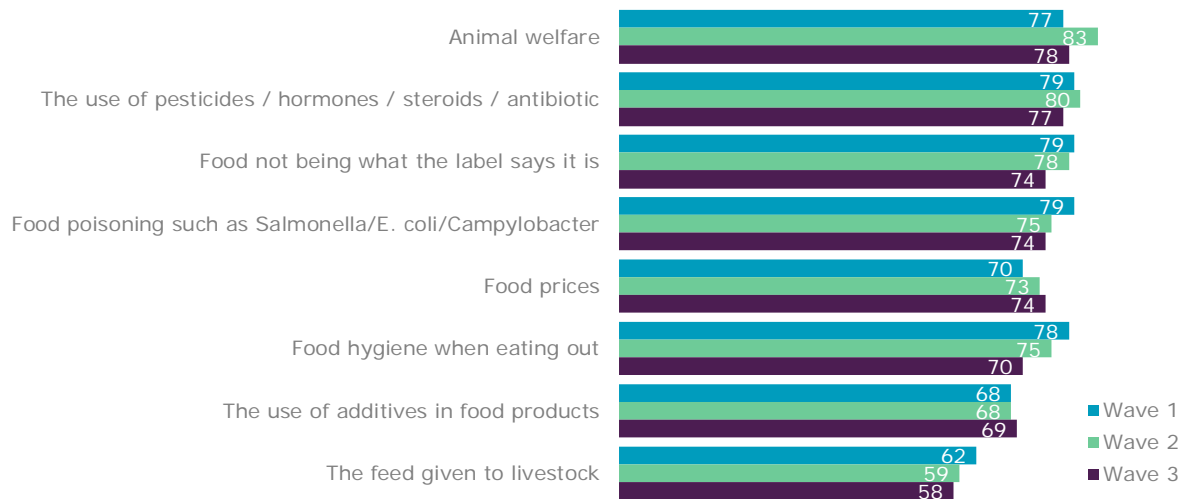
Awareness of the organisation's remit for *food authenticity*, *overseeing hygiene inspections* and other aspects of *labelling* and *safety in the home* remain moderately well-known, although progress is being made in line with greater awareness of the organisation generally.

4.3 Protecting other interests of consumers in relation to food

Given that Food Standards Scotland has a wide remit, 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 did not. The top eight concerns (from a list of 16) are shown in Figure 4.5.

Figure 4.5 Food issues causing concern - % concerned by each issue (prompted)

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

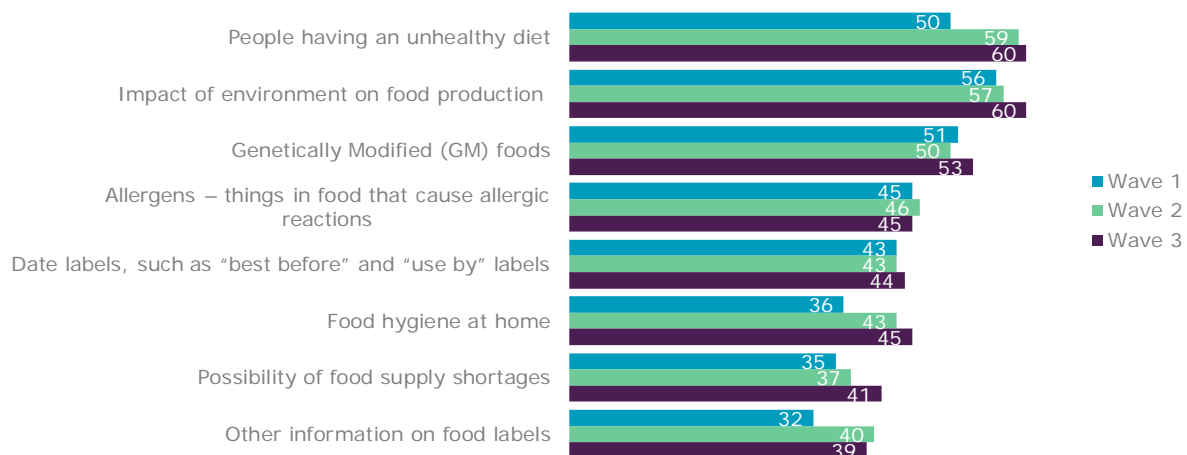


The public remain concerned about a wide variety of issues, ranging from food hygiene to food production and authenticity. However, since tracking began there has been a general drop in concern with most issues showing signs of decrease. The only exception, where the reverse trend occurs, is concern with *food prices*. The latest increase is not significant but in the context of falling levels for other issues, concern with *food prices* is now on a par with *food poisoning* and *food not being what the label says it is*.

The lesser concerns among the public are shown in Figure 4.6.

Figure 4.6 Food issues causing concern - % concerned by each issue (prompted)

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



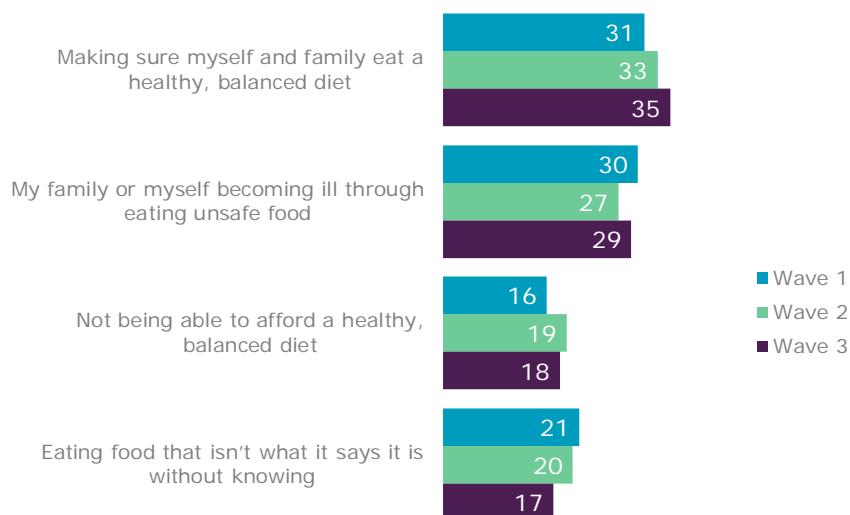
As shown in Figure 4.6, there have been more fluctuations recorded over time among the lesser concerns. For example, although there has been relatively little change recently in concern with *people having an unhealthy diet* it has increased from 50% at wave one to 60% at wave three. Concern with *food hygiene at home* has also increased over the course of the tracking from 36% at wave one to 45% at wave three. Despite this rise, *food hygiene in the home* remains one of the lowest concerns for consumers, in contrast to concern with *food poisoning such as salmonella, E.coli or campylobacter* which is an issue for the majority of consumers. This suggests that there is a greater perceived risk of food poisoning attached to food consumed out of the home compared to food cooked at home.

The *possibility of food supply shortages* is another aspect of food which is increasingly causing concern for consumers (rising from 35% at wave one to 41% at the latest wave), although it remains relatively unimportant overall.

To assist FSS in identifying a stronger sense of the priority topics, respondents were also presented with four specific issues and asked which **one** of these caused the most concern. The results of this question for all three waves are shown in Figure 4.8.

Figure 4.8 Most concerning food issue (prompted) (Q14)

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

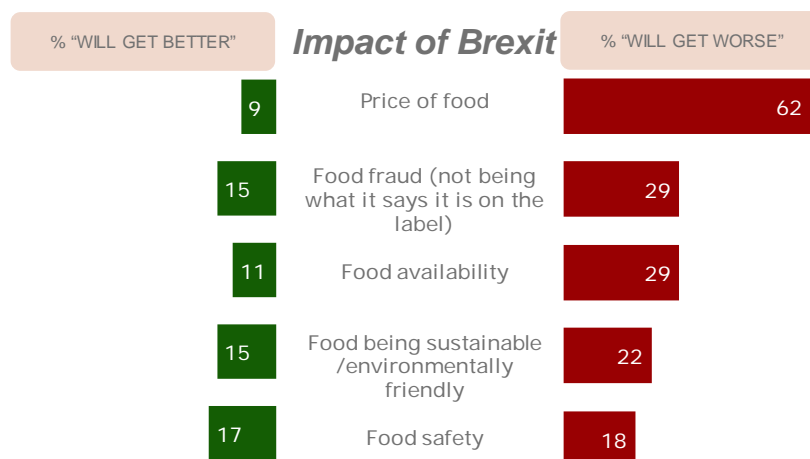


Although there have been no significant changes at the latest wave, *eating a balanced diet* continues to emerge as the priority issue. The importance of this has increased, albeit marginally, wave on wave, whereas the response to the other three has fluctuated marginally, with no evidence of any clear trends.

A new question was added into the wave three survey to gauge public perceptions towards the impact of Brexit on a variety of food issues. Specifically, respondents were shown a variety of food issues and asked if they thought any 'will get better', 'will get worse' or 'will stay the same' following the Brexit result. The results are summarised in Figure 4.7.

Figure 4.7 Impact of Brexit on food issues

Base: All respondents (1000)



The findings are mixed, although there is an overall slightly more pessimistic outlook, particularly with regards to *price of food* where the majority (62%) think it will get worse. Around 3 in 10 think *food fraud* and *food availability* will get worse, and around 1 in 5 think *food sustainability* and *food safety* will get worse. On the other hand there is a significant minority that think Brexit will have a more positive impact, with *food fraud*, *food sustainability* and *food safety* getting better.

The main concerns of consumers have generally declined over the course of the tracking monitor, yet public attitudes towards 'price', 'having an unhealthy diet' and 'food hygiene at home' have shown signs of increasing importance. The mixed views of consumers towards the impact of Brexit on food related issues are reflective of differing opinions on Brexit generally, although there was a consensus regarding its negative impact on food prices.

5. Food is safe



In summary, we found that:

- There has been a slight fall in the proportion following the recommended cleaning behaviours although consistent hand washing remains the most widely followed practice.
- The majority of consumers know what temperature their fridge should be set at, although fewer are reliably checking whether or not their fridge is working at the correct temperature.
- Compliance with cross-contamination advice continues to vary; the recommended storage practices (storing meat at bottom of fridge and never store tins in the fridge) are generally more widely followed than those relating to food preparation (such as using different chopping boards and washing raw meat) highlighting that the latter requires further education.
- Recommended cooking practices remain the most widely followed of all the 4C behaviours although consumers have started to show some signs of complacency.
- Awareness of Campylobacter has fallen marginally from 37% to 33% of the population and as such knowledge of the specific health risk posed by not following recommended advice remains relatively low.



This chapter of the report compares findings from wave one and wave three 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, cross-contamination and cleaning. These questions were not asked in the wave two tracking.

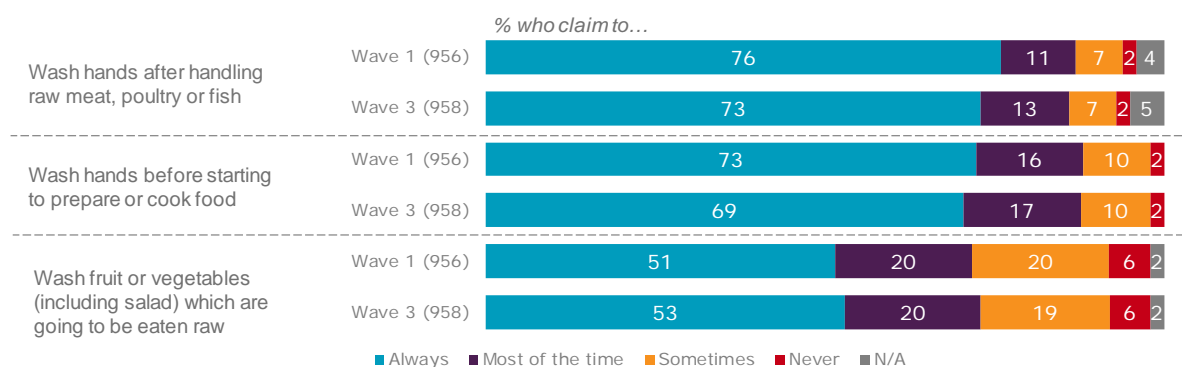
All of the results in this chapter are based on the c.95% of the sample who indicated that they had some responsibility for cooking and preparing food in their household.

5.1 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 5.1 shows the proportion claiming that they do each of these practices either ‘always’, ‘most of the time’, ‘sometimes’ or ‘never’. A very small proportion indicated that each statement was not applicable to them.

Figure. 5.1: Extent to which recommended cleaning behaviours are followed (Q19)

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



Between wave one and wave three there has been a slight fall in the proportion routinely carrying out the correct cleaning practices. For example a large, but slightly smaller, majority (76% at wave one, 73% at wave three) continue to say that they **always** wash their hands after handling raw meat, poultry or fish, and slightly less, (73% at wave one, 69% at wave three) claim to **always** do so before cooking. There has been a slight increase in the number that claim they consistently wash fruit and vegetables which will be eaten raw, however this remains relatively low at around half the sample (51% at wave one, 53% at wave three).

In summary, while most of the population are following the recommended practice on washing their hands, there is still room for significant improvement on washing fruit and vegetables that are to be eaten raw.

5.2 Chilling

There are four 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;

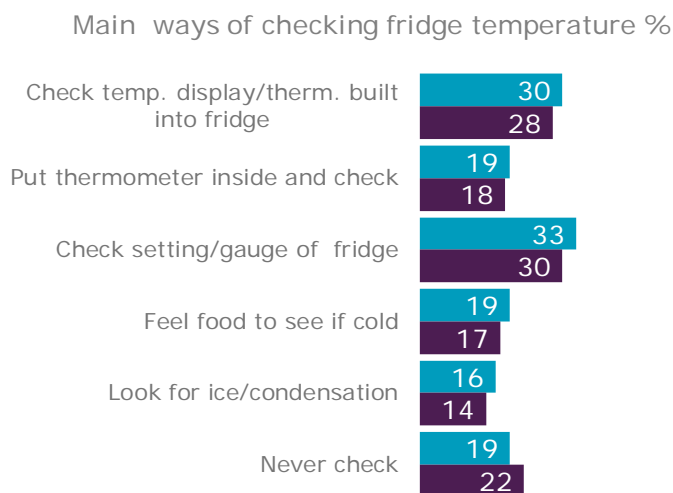
- Defrosting meat/ fish in fridge (or cool place); and
- Eating opened packet of cooked/ cured foods within 2 days.

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. At wave one, 86% of those responsible for food preparation/ cooking correctly selected between 0 and 5 degrees centigrade, however this fell to 81% at wave three.

As shown in Figure 5.2, among those consumers who check their fridge temperature, familiarity with accurate methods of checking that the fridge temperature is correct remains much lower than knowledge of the correct fridge temperature.

Figure 5.2. Normal method to check temperature in fridge – prompted (Q22)

Base: all respondents involved in preparing/ cooking food and who check their fridge temperature W1 (779), W3 (926)



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 of these methods has remained largely consistent since wave one, with around three in ten (30% in wave one, 28% in wave three) indicating that they check the settings by using the built in thermometers, and slightly fewer saying they put a thermometer inside to check (19% at wave one, 18% at wave three). A significant proportion however also use other ways, most commonly checking the fridge/ gauge settings (33% at wave one, 30% at wave three), feeling the food to see if it is cold (19% in wave one, 17% in wave three) or looking for ice (16% in wave one, 14% in wave three).

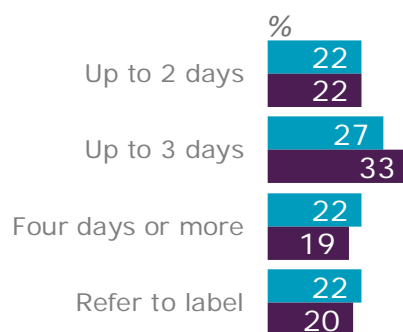
Overall therefore, while most know that a fridge temperature should be between 0 and 5 degrees centigrade, far fewer are reliably checking that this is the temperature of their own fridge.

With respect to defrosting, the findings have remained largely stable compared to wave one; around half of the sample correctly indicated that they would either defrost meat or fish in the fridge (38% in wave one, 36% in wave three) or in a cool place (12% in wave one, 10% in wave three). The remainder primarily indicated that they allow the food to defrost at room temperature (37% at wave one, 39% at wave three), and a much smaller proportion said that they defrost in the microwave or in water (7% and 4% respectively at wave three).

Compliance with the fourth 'chilling' behaviour was determined by asking for the length of time an open packet of cooked/ cured ham would be left open before deciding not to eat it. As shown in Figure 5.3, the responses to this question remain varied.

Figure 5.3 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)



There is no evidence of an increase in the proportion following the advice, with around a fifth of the sample (22% at both waves) continuing to state the recommended response of 'within two days'. Around half (49% at wave one, 52% at wave three) said that they would eat cooked ham beyond the two day limit, including around one in ten (13% at wave one, 10% at wave three) who would leave it at least 5 days. Furthermore, around a fifth (22% at wave one, 20% at wave three) claimed they would follow guidance on the packaging or refer to the use by date. The remaining small percentage (7% at both waves) comprised those stating that they do not eat this type of food product.

5.3 Cross-contamination

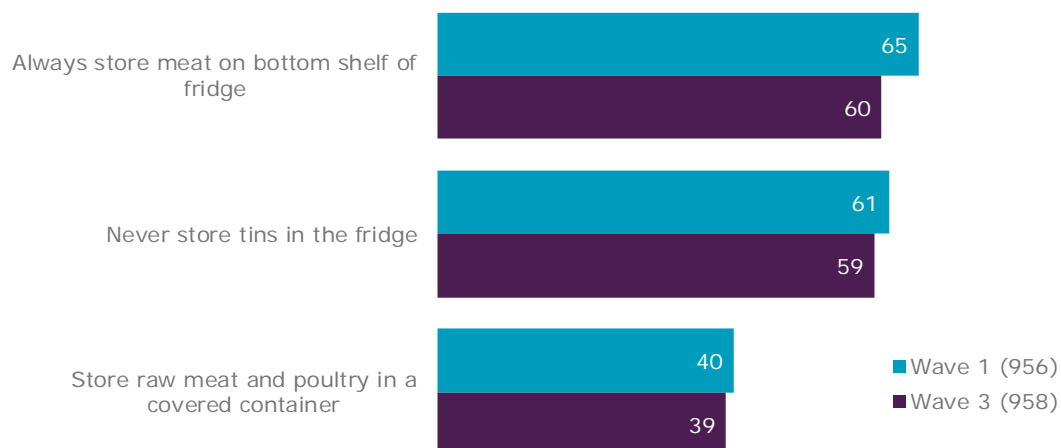
Compliance with behaviours associated with avoiding the spread of germs and with correctly storing food were also assessed. The seven behaviours associated with cross-contamination are shown below.

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

Compliance levels across each of the seven behaviours varied considerably but overall consumers were more likely to follow good practice on storage than on the other methods of preventing cross-contamination. As shown in Figure 5.4, the best storage practice is to do with **always storing meat on the bottom shelf of the fridge** and **never storing tins in the fridge**. That said, the proportions following this advice have fallen slightly from wave one. As found at wave one, the recommended storage behaviour that was the least followed was *storing raw meat and poultry in a covered container* (40% at wave one and 39% at wave three).

Figure 5.4 Proportion following recommended storage practices (Q19)

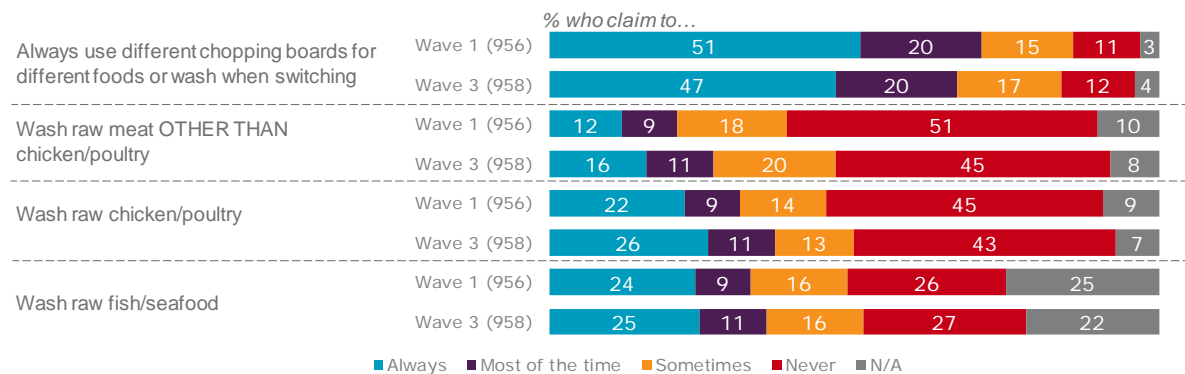
Base: all respondents involved in preparing/ cooking food W1 (956), W3 (926)



As shown in Figure 5.5, the proportion adhering to the other recommended methods of preventing the spread of germs behaviours are much lower.

Figure 5.5 Proportion following recommended cross-contamination behaviours (Q19)

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



With respect to cross-contamination from chopping boards, there has been little change since wave one. Around half the sample at both waves (51% and 47% at respectively) claim that they **always** use different chopping boards for different foods, or wash chopping boards when switching between foods. As found previously a significant minority (11% at wave one, 12% at wave three) stated that they **never** use different chopping boards, however most of the remaining sample (35% at wave one, 37% at wave three) claim to do this **most** or **some of the time**.

The proportion that claimed they **never** wash raw meat fell at the latest wave (45%, from 51% at wave one) as did the proportion that **never** wash raw chicken/ poultry (43%, from 45% at wave one). This leaves a significant proportion who continue to wash their raw meat and/ or chicken and indicates that many consumers are either complacent or are not aware of the recommended advice.

5.4 Cooking

To gauge compliance with recommended cooking practices, responses to six different measures were obtained. These are shown in Table 5.1.

Table 5.1 Cooking behaviour

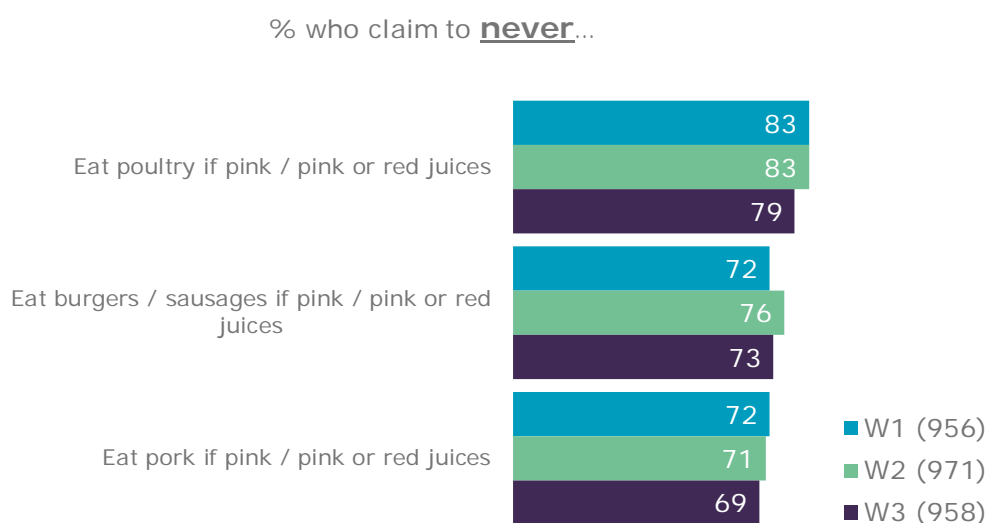
Recommended behaviour
Always cook food until it is steaming hot throughout
Never eat chicken or turkey if the meat is pink or has pink or red juices
Never eat burgers or sausages if the meat is pink or has pink or red juices
Never eat whole cuts of pork or pork chops if the meat is pink or has pink or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

Three of the 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 three are largely consistent with those obtained at previous waves.

As shown in Figure 5.6, similar proportions agreed that they **never eat burgers/ sausages if pink/ with pink or red juice** (73% at latest wave), and **never eat pork if pink/ with pink or red juice** (69% at latest wave). Encouragingly, an even higher proportion indicated that they **never eat poultry if pink/ with pink or red juice** (79% in wave three) although this has fallen back slightly since waves one and two (83% at both).

Figure. 5.6: Extent to which cooking behaviours are followed (Q19)

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



In terms of cooking or reheating food, a large majority continue to indicate that they *reheat cooked food only once*, although the proportion following the advice has fallen slightly at wave three (78% in wave one, 74% in wave three). Conversely a small minority (9% at wave one, 12% at wave three) of the sample would not follow the recommendation and would reheat twice or more.

Most agreed to **always** *cooking food until it is steaming hot throughout* (74% in wave one, 72% in wave three), 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 (50% at wave one, 53% at wave three) selected *check the middle is hot* as the correct response.

As well as *checking the middle of the food is hot*, other common methods to check food has been re-heated properly include checking *it looks hot/ sizzling/ bubbling* (36% at wave one, 35% at wave three) or *checking it's an even temperature throughout* (31% at wave one and 26% at wave three). Small proportions also indicated that they *use a thermometer/ probe* (15% at wave one, 15% at wave three) or *set a cooking time period* (12% at both waves).

5.4.1 Awareness of Campylobacter

Concluding the 4Cs and knowledge of good cooking practice, awareness of Campylobacter is also measured. Campylobacter is the most common form of foodborne illness (in Scotland, UK and most of the developed world). The illness normally lasts for around a week, but can also cause more serious illness post-infection and at worst it can kill³. It is an infection that is passed from animals to humans, and is particularly prevalent in raw chicken.

When respondents were asked if they agreed or disagreed that they knew what Campylobacter was, over a third responded positively; a slight drop since wave one (33% compared to 37%).





³ See more at: <http://www.foodstandards.gov.scot/food-safety-standards/foodborne-illness/campylobacter#sthash.WUP4tJtc.dpuf>

5.5 Overall compliance with the 4Cs

Across all 20 recommended food behaviours there is a huge variation in compliance levels. The extent to which each behaviour is complied with is highlighted in Figure 5.7.

Figure 5.7. Proportion undertaking '4Cs' behaviours

Base: all responsible for preparing and cooking food in the home W1 (956), W3 (958)

"C"	Recommended Practice	Wave 1 %	Wave 3 %
	Wash hands before starting to cook or prepare food	73% Always	69% Always
	Wash hands immediately after handling raw meat, poultry or fish	76% Always	73% Always
	Wash fruit or veg (inc. salad) which are going to be eaten raw	51% Always	53% Always
	Temperature inside fridge should be between 0 and 5C	86%	81%
	Meat usually defrosted in fridge (or in a cool place other than fridge)	50%	46%
	Check fridge temperature using thermometer or built in thermometer	46%	46%
	Would keep an open packet of cooked/cured ham for up to 2 days before deciding not to eat it	22%	22%
	Raw meat / poultry in fridge should be stored in a covered container	40%	39%
	Raw meat / poultry should be stored at bottom of fridge	60%	60%
	Use different chopping boards for different foods or wash chopping boards when switching between foods	51% Always	47% Always
	Wash raw chicken or poultry	45% Never	43% Never
	Wash raw meat other than chicken / poultry	51% Never	45% Never
	Store open tins in the fridge	61% Never	59% Never
	Wash raw fish or seafood	26% Never (25% n/a)	27% Never (22% n/a)
	Cook food until it is steaming hot throughout	74% Always	72% Always
	Reheat cooked food no more than once	78% Once (11% never)	74% Once (12% Never)
	When reheating check food is cooked all the way through	50% (check middle is hot)	53% (check middle is hot)
	Eat chicken or turkey if the meat is pink or has pink or red juices	83% Never	79% Never
	Eat burgers or sausages if the meat is pink or has pink or red juices	72% Never	73% Never
	Eat whole cuts of pork or pork chops if the meat is pink or has pink or red juices	72% Never	69% Never

As found at wave one the recommended practices appear to be moderately adhered to, but some are observed by only a minority suggesting further education is required. Furthermore, the average number of behaviours followed has dropped marginally, from 11.7 at wave one to 11.4 at wave three, reinforcing the finding that a significant proportion of those responsible for the majority of the cooking and food preparation do not follow the recommended guidelines.

6. Food is authentic

In summary, we found that:

- There has been a slight improvement in ‘trust’ and ‘clarity’ of food labelling at the latest wave.
- Interest in country of origin remains at a moderate level with over half agreeing they would like know more about where the food they eat comes from.
- Labels continue to be widely referred to when both shopping and at home, primarily for ‘date information’ rather than for ‘price’ or ‘ingredients’.
- Dates on packaging are widely referenced, but there remains some confusion, particularly regarding the ‘best before’ date.



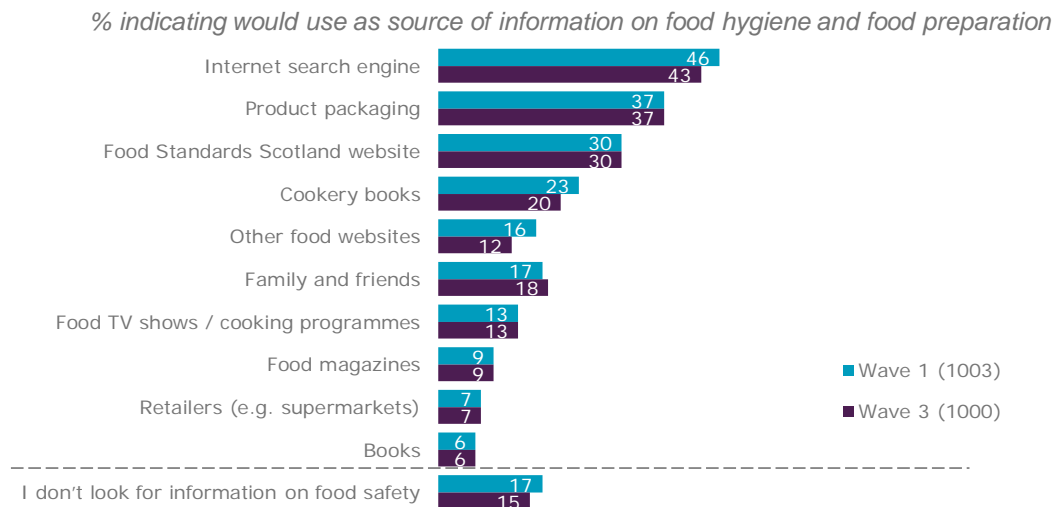
This chapter of the report focuses on a number of attitudinal statements relating to food sources and food labelling, as well as reporting on the extent to which consumers use and understand the purpose of ‘use by’ and ‘best before’ dates. The majority of these questions were only asked at waves one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

6.1 Sources of information about food safety

As shown in Figure 6.1, when prompted with a list of possible sources, the main source of information about food hygiene and how to prepare and cook food safely at home is an *internet search engine*, although this has fallen slightly from 46% at wave one to 43% at wave three and for *other food websites* from 16% to 12%. Despite this drop in use of the internet, it is encouraging that three in ten (30%) continue to indicate that they would use the FSS website as a source of information.

Figure 6.1 Sources of information about food hygiene, and how to prepare and cook food safely at home (Q42)

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



In addition to searching online, the second most common source of information about food hygiene and how to prepare and cook food safely at home, remains product packaging (37% at both waves), followed by cookery books (23% at wave one, 20% at wave three) and friends and family (17% at wave one, 18% at wave three).

6.2 Interest in food authenticity

The latest findings indicate that there has been no change in the significant proportions claiming:

- *It worries me that what's in food might not be what's on the label* (47% at wave one, 49% at wave three),
- *I'd like to know more about where the food I eat comes from* (55% at wave one, 57% at wave three).

The evidence therefore continues to suggest that a significant proportion of consumers remain interested in the authenticity and origin of their food.

6.3 Usage and understanding of food labels

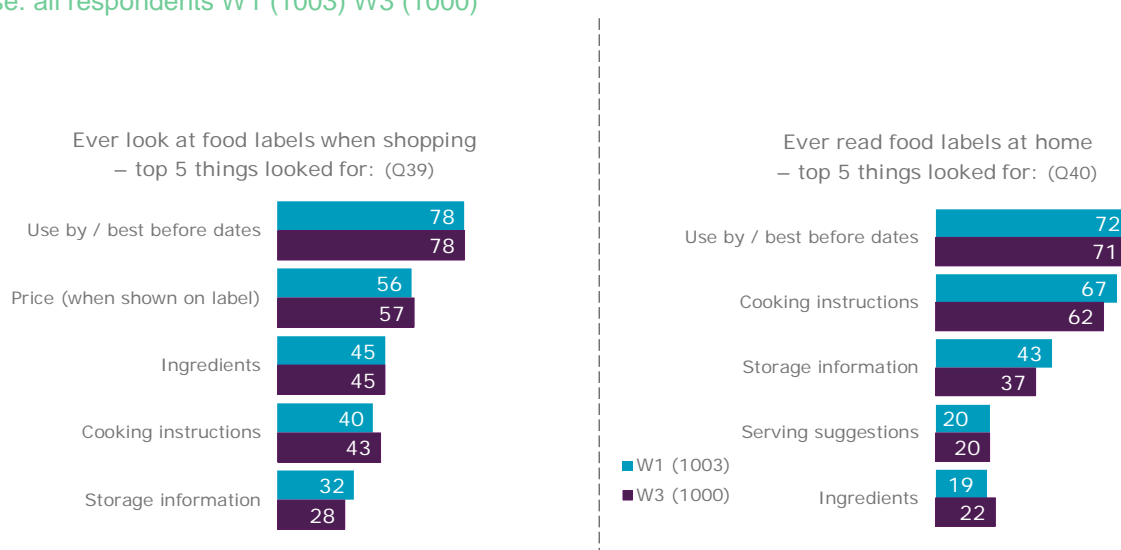
The latest survey results indicate that there is still room for greater clarity on food labelling, although some improvement has been made. On the one hand the majority of consumers continue to believe that they *have clear information on what the labels on the food they buy means* (70% at wave one, 73% at wave three) but only 59% at wave three agreed that *the information on food labels is clear and understandable*. However the latter represents an increase from 52% at wave one.

On the issue of trusting information on food labels the latest results are also more positive; 56% responded positively on this measure, compared to 50% at wave one.

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 one, 96% at wave three) and read food labels at home (93% at wave one, 96% at wave three). The main reasons for looking at labels when shopping and when at home are summarised in Figure 6.3.

Figure 6.3 Main things looked at on labels when shopping/ at home – prompted (Q39)

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



The large majority indicated 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. Information on dates is thus much more widely sought out than the price or ingredients when shopping.

While following recommended advice when storing raw food in the fridge is at a relatively good level, the slight drop in those looking for this information, both at home and in the shops, confirms that this is an area that continues to require further education.

6.4 Understanding use by/ best before dates on labels

As noted in the wave one report, 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 6.4, when asked which type of label date was the best indicator of whether food is safe to eat, the proportion correctly selecting 'use by date' remained relatively consistent (69% at wave one, 68% at wave three). On the other hand there has been an increase in the proportion selecting the 'best before date' (23%, up from 19% at wave one).

Figure 6.4 Best indicator of whether food is safe to eat (Q27)

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

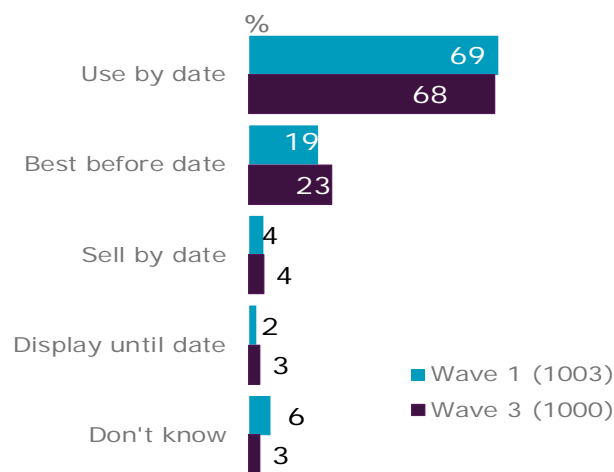
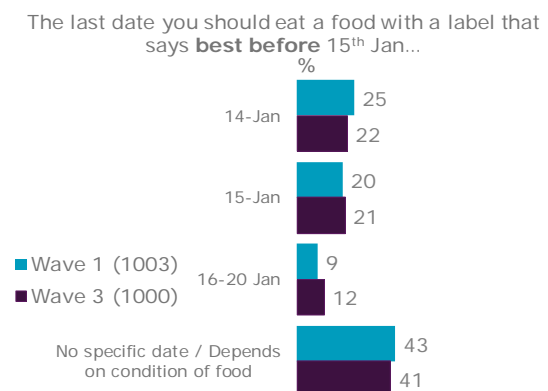
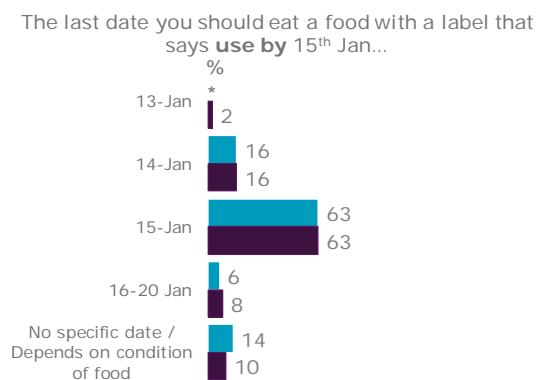


Figure 6.5 further highlights the continued confusion around 'use by' and 'best before' dates with a variety of answers given for when is the last date you should eat food, particularly the 'best before' date.

Figure 6.5 The last date you should eat food with a label that says... (Q30/ Q31)

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



Around two thirds (63% at both waves) indicated that the last day an item with a use by date of 15th January could safely be eaten was 15th January, however a further 16% said 14th January. Again a significant remainder suggested a different response with 10% (14% at wave one) claiming that 'it would depend on the condition of the food' and 8% (up from 6% at wave one) indicating that the item would be safe to eat after 16th January.

In summary, the majority of consumers (c70%) agreed that they had clear information on what food labels mean, with a similarly high level regularly checking the date label at the point of preparing food. However, recognition of the 'use by' date as the best indicator of food safety is not universal, and understanding of the best before date remains very mixed.

7. Responsible food businesses flourish



In summary, we found that:

- While there is some evidence that concern with hygiene when eating out is falling, the opposite trend appears in relation to consumers expressing support for food establishments paying more attention to food safety and hygiene. In line with this, the latest survey results also show a slight increase in worry about getting food poisoning when eating out.
- 'Price' and 'general hygiene' remain the key factors when deciding where to eat out, however references to 'hygiene certificates' and places offering 'healthy choices' appear to be growing in importance.
- There has been an improvement in recognition and use of the FHIS certificate over the last 12 months.



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. This section of the questionnaire was not asked in wave two.

7.1 Attitudes towards eating

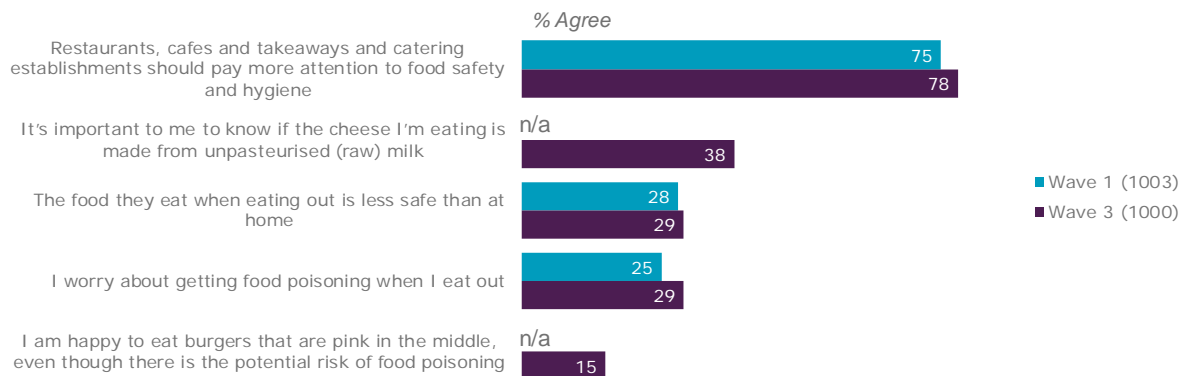
While a fall in concern about *food hygiene when eating out* was noted in Section 4 (in line with the general downward trend across a range of food related issues) other evidence indicates that this remains a widespread issue for consumers; around three-quarters agreed that *restaurants, cafes and takeaways and catering establishments should pay more attention to food safety and hygiene* (78%, up from 75% at wave one).

Figure 7.1, which summarises agreement with levels with a variety of statements around eating out, also shows that there has been a slight increase in the proportion agreeing that they *worry about getting food poisoning when they eat out* (29%, up from 25% at wave one). A significant minority also continue to be more wary of food

safety when outing; just over a quarter at the latest wave agreed that *the food they eat when eating out is less safe than at home* (28% at wave one, 29% at wave three).

Figure 7.1 Proportion agreeing with statements about eating out of the home... (Q46/ Q52)

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



In the context of Food Standards Scotland requiring a cheese manufacturer to remove one of their products from retailers in September 2016, a new statement was added to the questionnaire at the third wave to gauge attitudes towards the importance of consumers knowing if the cheese they consume contains unpasteurised (raw) milk. At a total level, 38% agreed that it was important, 25% disagreed and the remainder (31%) had no opinion, illustrating very mixed levels of awareness, and views, towards this type of raw product.

Additionally, the response to another new statement inserted at wave three found that a significant minority (15%) of the population are *happy to eat burgers that are pink in the middle* even though there is the potential risk of food poisoning. Acceptance of this food tended to be higher among younger consumers and among males.

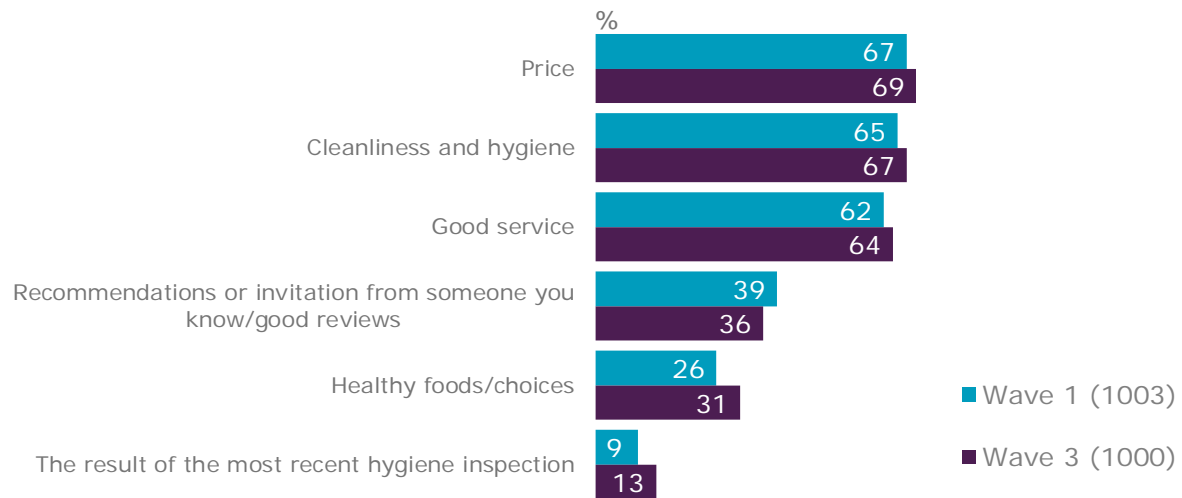
7.2 Factors when deciding where to eat out

When deciding **where** to eat out, *cleanliness and hygiene* was the second most important factor on prompting, slightly behind *price*. Although *the results of the most recent hygiene inspection* was more widely referenced this wave than previously (13%, up from 9% in wave one), it is a less important factor in the decision, thus highlighting that only a small (but growing) proportion are using formal measures to judge hygiene when eating out.

The top six factors used when deciding where to eat out are shown in Figure 7.2

Figure 7.2 Top 6 factors when deciding where to eat out – prompted (Q44)

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

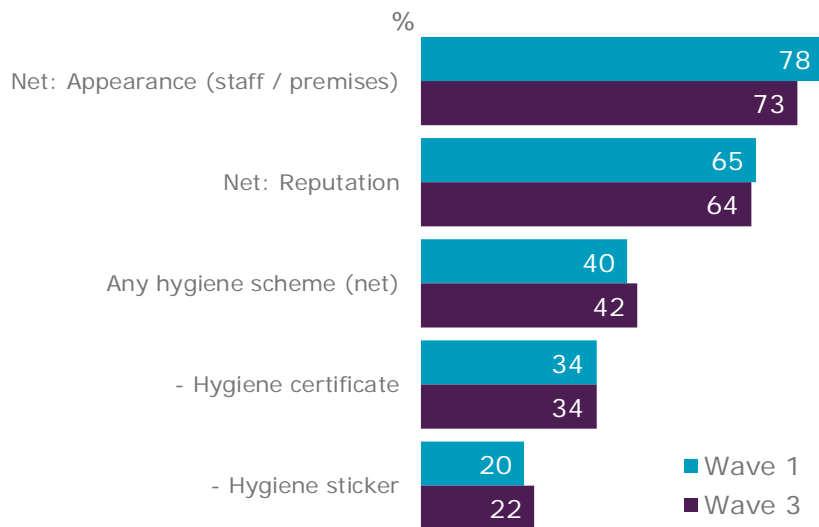


Furthermore, it is encouraging that reference to *healthy choices* has increased at the latest wave (31%, up from 26% at wave one) and further highlights the trend of consumers wanting a more balanced diet.

In terms of the main factors used to judge the hygiene standards, the latest results are very consistent with those obtained at wave one. The most popular answer was *appearance (staff and/ or premises)*, (78% at wave one, 73% at wave three) followed by *reputation* (65% at wave one, 64% at wave three) and then *hygiene certificates/ stickers* (40% at wave one, 42% at wave three). These results (summarised in Figure 7.3) confirm that although *hygiene schemes* appear to be marginally more important than recorded before, they remain secondary to *reputation* and *appearance* despite cleanliness and hygiene being an important factor in deciding where to eat/ buy food from.

Figure 7.3 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)



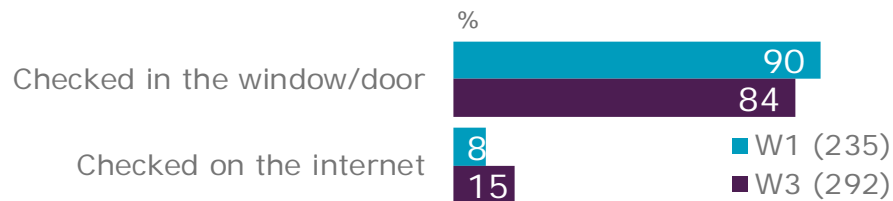
Further questions also gauged awareness and usage of food hygiene information scheme certificate (FHIS scheme). When all respondents were shown images of a certificate and asked if they had seen them before, the results show an improvement in awareness from 55% of the population recognising the certificates compared to 50% a year ago at wave one. More specifically, 48% had seen it in a window (44% at wave one) and 9% had seen it online (6% at wave one).

A subsequent question on usage of a food hygiene information scheme in the last 12 months recorded a slightly higher positive response at this latest wave (30% at wave three, up from 26% at wave one) and indicates that although it's not yet standard practice to reference them, hygiene certificates are beginning to play a more important role in decision-making. In line with this finding, there has also been an increase in the number agreeing that they have clear information on *how to check whether the food I am eating in a café/ bar/ restaurant is safe* (34%, up from 26% at wave one).

As shown in Figure 7.3, among all respondents who had used the FHIS in the previous 12 months, there has been a growing number researching on the internet (15%, up from 8% at wave) however the majority still look at the window/ door of an establishment (90% at wave one, 84% at wave three).

Figure 7.4 Where food hygiene information scheme was checked (Q49/ Q50)

Base: All respondents who have used a food hygiene information scheme W1 (235), W3 (292)



Importantly, while only a small proportion have used this scheme to check hygiene standards, the vast majority who have done so (83%) indicated that it influenced their decision to eat at an establishment (including nearly 42% who were influenced 'a lot', up from 31% at wave one). These results highlight the potential for the scheme if greater awareness can be generated.

In summary, food hygiene when eating out is not an increasing concern when viewed in the context of other food related issues. Nevertheless, consumers are increasingly looking for food establishments to pay more attention to food safety and aligned with this, there is a growing proportion that worry about getting food poisoning when eating out. There has been an 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.

8. Consumers have healthier diets



In summary we found that:

- There has been little movement in perceptions towards a person's own diet and that of their household, with consistently just over half claiming it is 'healthy'.
- Links between health and diet are well-established, with evidence to suggest a slight strengthening in concern with the amount of sugar in food.
- There is growing acceptance among the population of the need to eat more healthily with the majority understanding that it is their own responsibility. Conversely a significant, and gradually increasing, minority place the responsibility elsewhere such as with the government or with the food industry.
- There continues to be strong evidence that unhealthy eating/ being overweight is regarded as a national problem with the vast majority agreeing that obesity is a serious problem for Scotland.
- The results also indicate that there is a growing concern among parents about their children's diet and health and wellbeing, although this is often more likely to be regarded as a problem for other people's children rather than their own.
- Despite the growing acceptance of the need to eat more healthily, there appears to be an increasing resistance to engage in preparing and cooking food. There has also been a slight rise in 'the expense' as a barrier to making healthy choices.



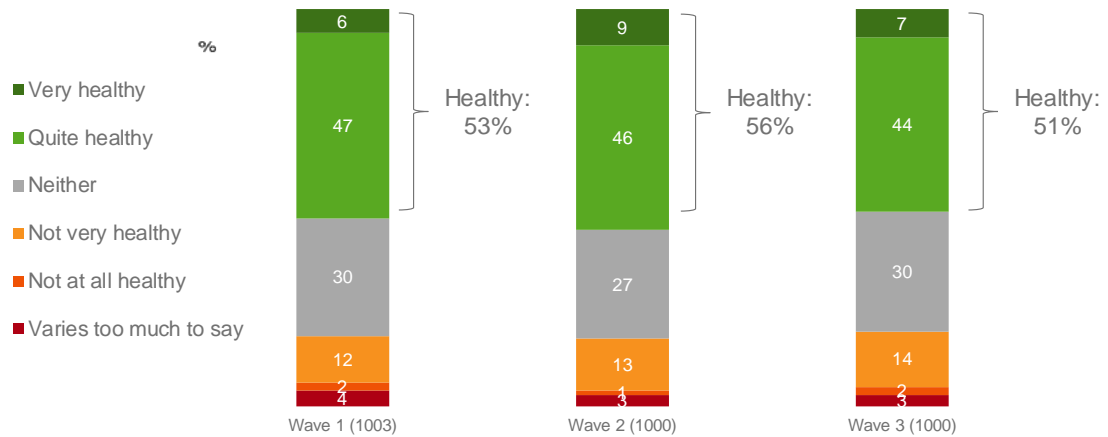
'Consumers having healthier diets' is not a main focus of the wave three tracking, however some attitudes statements towards healthy eating and food in general have been monitored at each wave and are summarised in this section.

8.1 Perceptions of own/ family's diet

To provide some context, 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 8.1 and Figure 8.2.

Figure 8.1 Perceived healthiness of own diet (Q53)

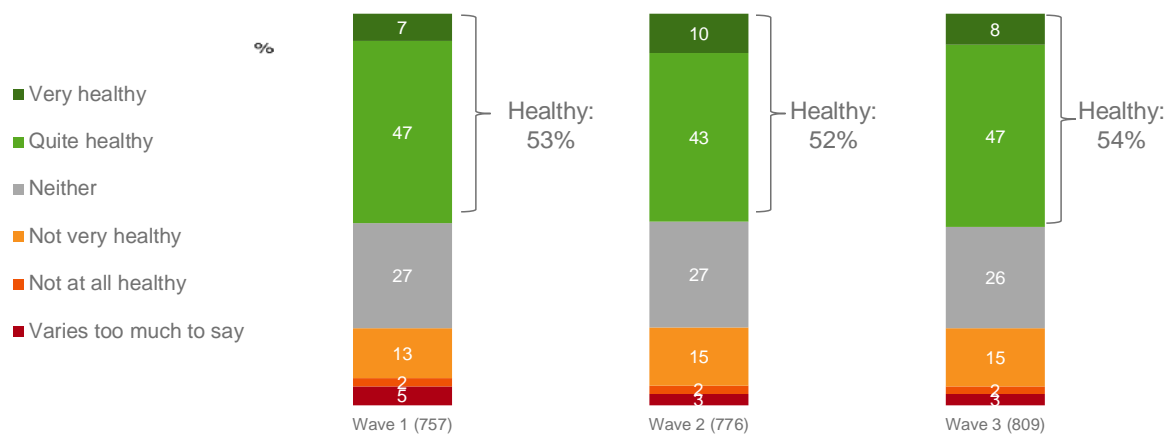
Base: All respondents W1 (1003), W2 (1000), W3 (1000)



The survey results show, firstly, that there is little movement in perceptions towards a person's own diet and that of their household generally over the course of the tracking. Secondly, there is a range of opinion in terms of the perceived healthiness or otherwise of food and drink consumed. While around half the sample described their diet/ their household's diet as healthy, the remainder comprised a significant minority that claimed it was unhealthy (c15%) and a further significant proportion who said it was neither healthy nor unhealthy (c27%). The relatively high proportion unwilling or unable to describe their diet as healthy or unhealthy suggests a lack of certainty over what is healthy, and reinforces the need for clear advice.

Figure 8.2 Perceived healthiness of household's diet (Q54)

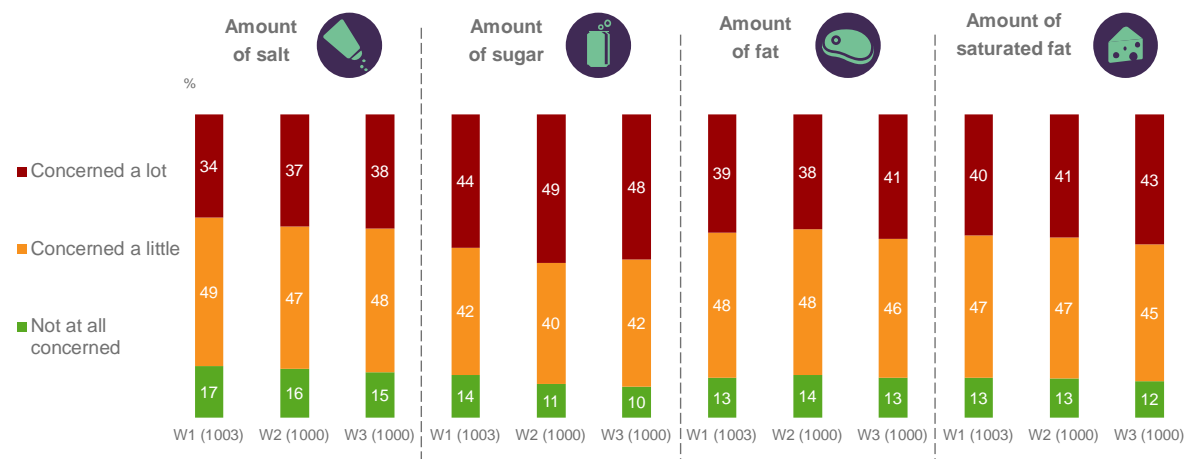
Base: All respondents W1 (757), W2 (776), W3 (809)



The level of concern with the amount of salt, sugar, fat and saturated fat in food has changed slightly since the start of the research. Figure 8.3 shows the total percentage claiming to be concerned 'a lot', 'a little' or 'not at all' with each ingredient.

Figure 8.3 Level of concern with ingredients in food (Q55)

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



Over eight in ten respondents indicated that they were either concerned 'a lot' or 'a little' about the levels of salt, sugar, fat and saturated fat found in food, thus demonstrating widespread understanding of the potential negative impact of these ingredients. There have been some small movements over the course of the tracking with the latest evidence suggesting that concerns are slightly greater than before. In line with the findings reported at wave one, the ingredient causing most

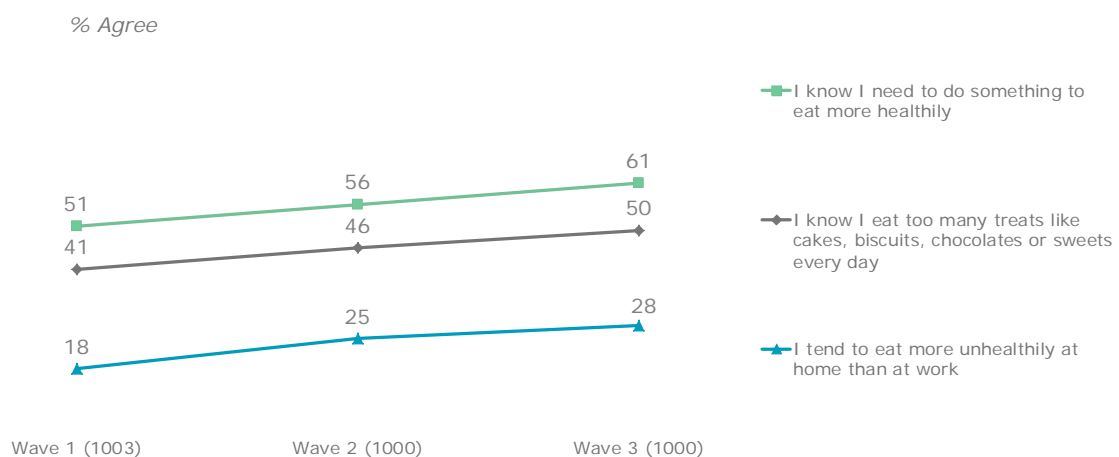
widespread concern was sugar with 48% stating they are concerned ‘a lot’, up from 44% at wave one, and a similar increase recorded for concern of the amount of salt (38% concerned ‘a lot’, up from 34% at wave one). The trends over the past year are less clear cut with regard to the amount of fat and saturated fat in food, although there is certainly no evidence of any reduction of concern with these ingredients.

8.2 Attitudes towards healthy eating

A variety of attitude statements towards food and diet have also been asked of all respondents at each stage of the tracking research. The first statements are to do with issues of self-awareness and poor habits. As shown in Figure 8.4 there is a growing acceptance of the personal need to change one’s own diet and eat more healthily.

Figure 8.4 Attitudes towards personal diet (Q56)

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

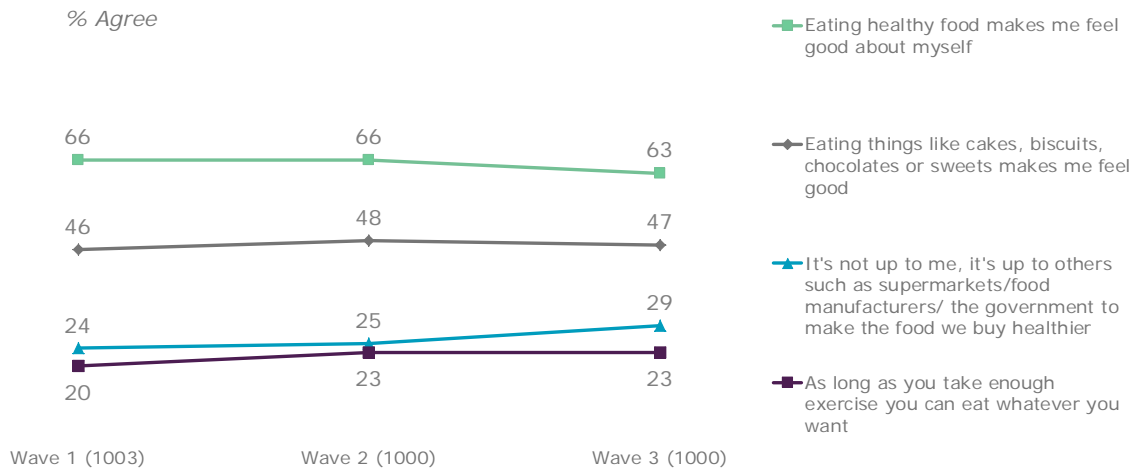


Although over half of consumers indicated they have a healthy diet, a similar proportion agreed at wave three that they know they *eat too many treats like cakes, biscuits, chocolates or sweets every day* – an increase from 41% at wave one. Similarly, there has been a large increase in the proportion that agreed they know they *need to do something to eat more healthily* (61%, up from 51% at wave one) demonstrating a growing acceptance of the need to achieve a healthier diet.

Despite the growing importance of having a healthy diet, there has been no corresponding rise in enjoyment from eating healthy. As shown in Figure 8.5, a similar proportion (66% at wave one, 63% at wave three) agreed that *eating healthy food makes me feel good about myself*. On the other hand it is encouraging that a higher proportion of consumers continue to agree that they feel better about *eating healthily than eating things like cakes, biscuits, chocolate or sweets* (47% at wave three).

Figure 8.5 Attitudes towards eating healthily (Q56)

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

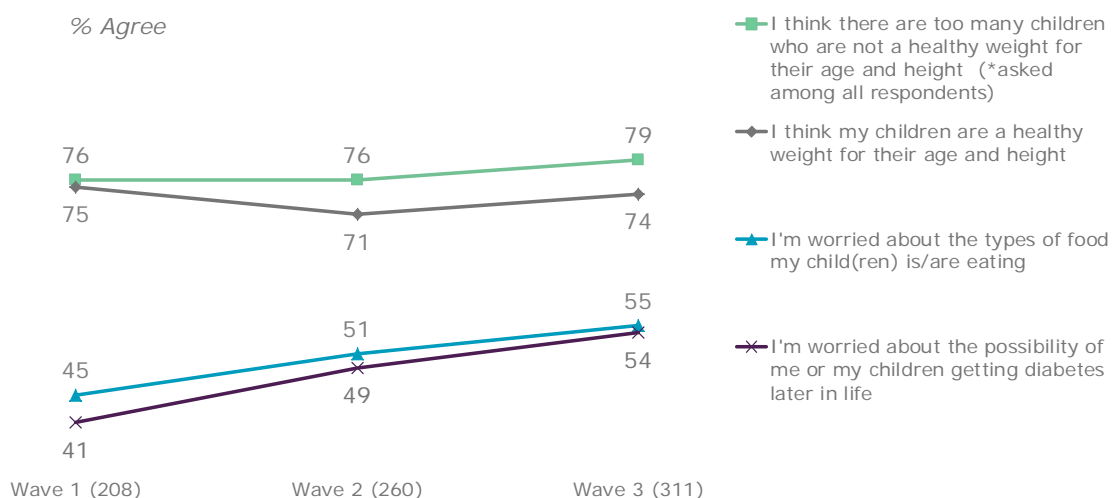


At a different, but related question, it was also established that a sizeable minority (29%, up from 24% at wave one) agreed that it is *up to the supermarkets/ manufacturers/ government to make the food available to buy healthier*. It therefore cannot be assumed that everyone is prepared to take responsibility for their healthy eating choices and when considering the best strategies for encouraging consumers to make healthier food choices, it is worth noting that although most understand it to be their own responsibility, there is a significant minority that believe there are other ways of encouraging healthy eating.

The findings from the three waves of tracking also suggest that there is a growing concern among parents about their children’s eating habits (Figure 8.6).

Figure 8.6 Attitudes towards children’s diet (Q56)

Base: All parents W1 (208), W2 (260), W3 (311)



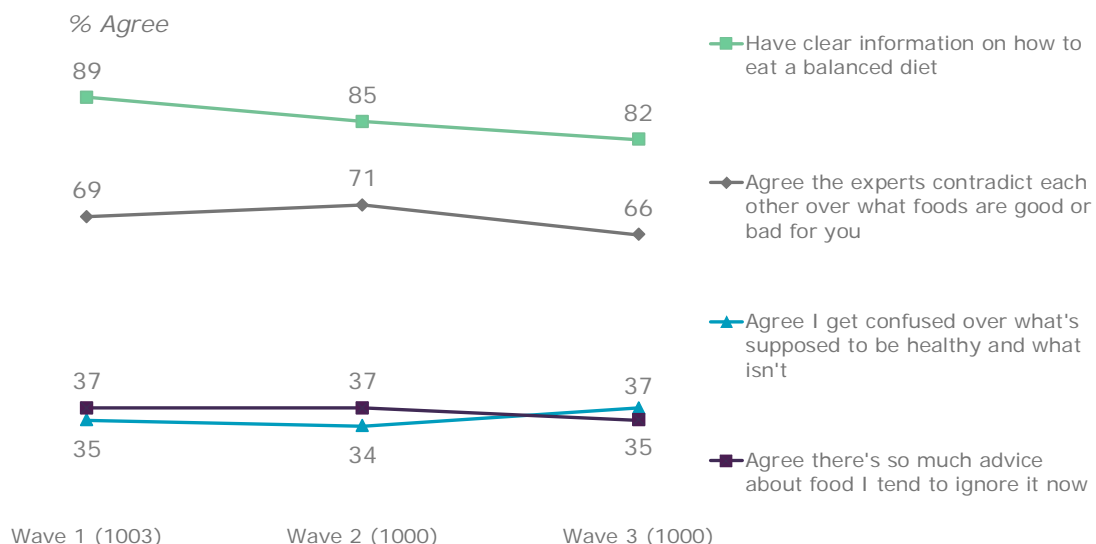
The level of consensus remains widespread that *there are too many children who are not a healthy weight for their age and height* (79% agreeing, up from 76%) reflecting a recognition of a wider problem. However parents do not tend to think there is a problem with their own children: around three quarters (74%) at wave three indicated that *my children are a healthy weight for their age and height*.

There has though been an increase *in worry about the types of food their children are eating* (from 45% at wave one to 55% at wave three), and about the possibility of getting *diabetes later in life* (from 41% at wave one to 54% at wave three) further highlighting that parents are increasingly concerned about the food/ drink their children consume. This increase in awareness of the need to change children's diets confirms the importance of the recent Food Standard Scotland's healthy eating campaign that is designed to encourage parents to reduce the number of unhealthy snacks/ treats that they give to their children.

Moving onto attitudes towards information and guidance on healthy eating, the results remain mixed and reflect the uncertainty among consumers as to whether their diet is unhealthy or not (Figure 8.7).

Figure 8.7 Attitudes towards available guidance on healthy eating (Q11/ Q15/ Q56)

Base: All respondents W1 (1003), W2 (1,000), W3 (1000)



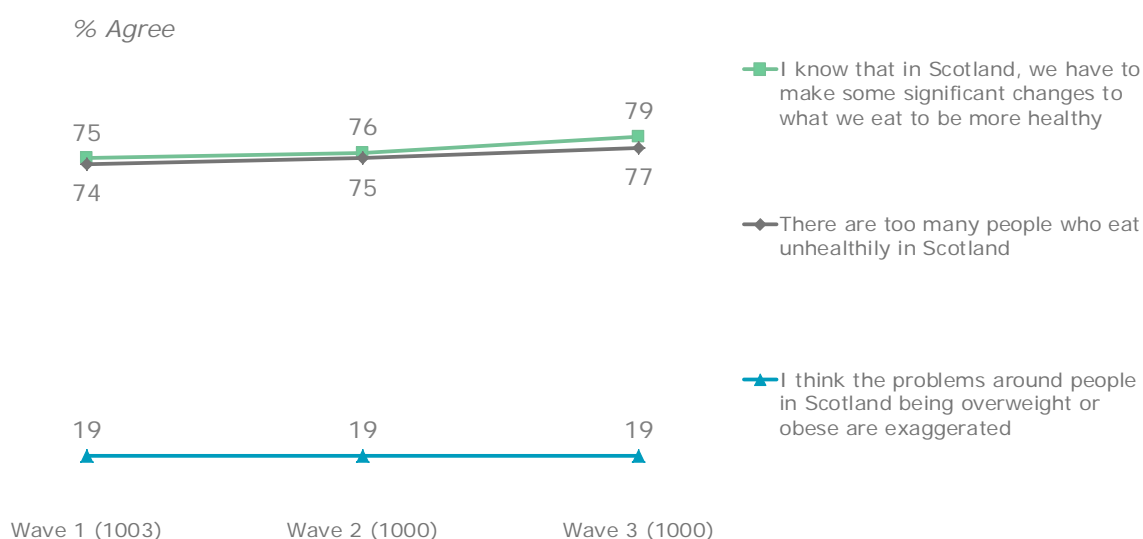
Whilst most still responded positively, there has been a drop in agreement that consumers have *clear information on eating a healthy balanced diet*. Additionally, two-thirds of respondents agreed that *the experts contradict each other over what foods are good or bad for you* – although this is at the lowest level since tracking began. Furthermore, around a third at each wave confirmed that they *get confused over what's supposed to be healthy and what isn't* suggesting that there is a need for

a strong, authoritative voice to clarify and lead on healthy eating guidance. Communicating healthy eating guidance remains challenging though, as around a third (35%) agreed that *there's so much advice about food I tend to ignore it*.

Moving away from the role of the individual to that of the population more generally, there is strong evidence that unhealthy eating/ being overweight is regarded as a national problem in Scotland (Figure 8.8).

Figure 8.8 Attitudes towards diet in Scotland (Q56)

Base: All respondents W1 (1003), W2 (1,000), W3 (1000)

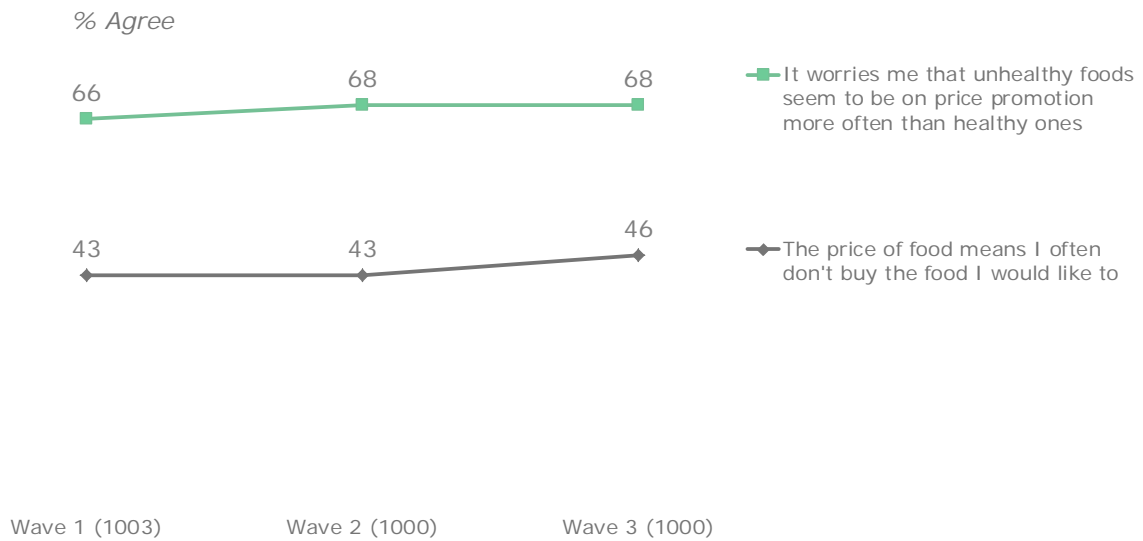


There has been a widespread and growing acceptance that *people in Scotland need to make significant changes to what they eat* and that *there are too many people who eat unhealthily in Scotland* (over three-quarters agreed with both statements at wave three). Furthermore, only around a fifth (19%) continued to agree, whereas over half disagreed, that *the problems around people in Scotland being overweight are often exaggerated*.

As reported in section 4, there is a growing concern with the price of food, however when looking at attitudes to food pricing over the course of the tracking they have remained fairly consistent (Figure 8.9).

Figure 8.9 Attitudes towards the price of food (Q11)

Base: All respondents W1 (1003), W2 (1,000), W3 (1000)

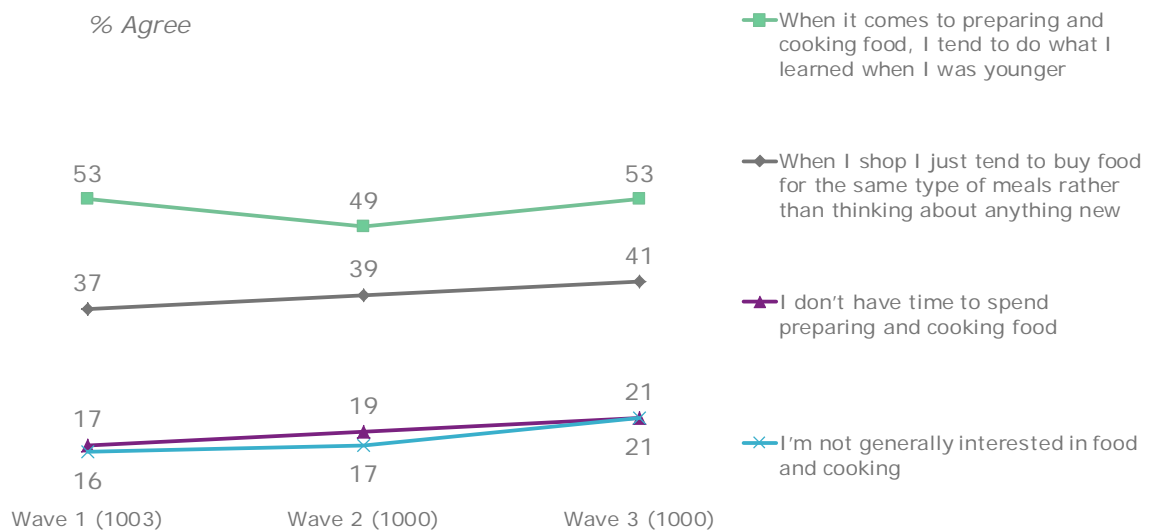


Agreement that *it worries me that unhealthy foods seem to be on price promotion more often than healthy ones* persists at a high level, with two-thirds agreeing. Also, a significant portion of the population (over four in ten) remain hindered in their attempts to *buy food they want because of the price*, highlighting that this continues to be a barrier to making healthier choices for some.

Finally, attitudes towards cooking habits (Figure 8.10) show that there is a growing lack of interest and engagement in cooking and preparing food. Wave three tracking results recorded the highest level agreeing they *tend to buy food for the same type of meals rather than thinking about anything new* (41%, up from 37% at wave one), that they *don't have time to spend preparing and cooking food* (21%, up from 17% at wave one) and that they are *not generally interested in food and cooking* (21%, up from 16% at wave one). Although these are not the attitudes of the majority this rising apathy will make it harder to encourage change and to help consumers make healthier choices.

Figure 8.10 Attitudes towards food generally (Q11)

Base: All respondents W1 (1003), W2 (1,000), W3 (1000)



In summary, there appears to be a general consensus that tackling the problems of unhealthy eating in Scotland requires individual as well as collective action, with a significant minority suggesting it is also up to the government and food industry to encourage healthy choices. There is openness to the messaging on what constitutes a healthy diet and therefore evidence to suggest there is a need for a clear and authoritative voice to help educate and persuade consumers to have a healthier diet. On the other hand the general acceptance of the need to change may be undermined by a growing reluctance to make changes to food consumed at home.



Food Standards Scotland
Pilgrim House
Aberdeen AB11 5RL

01224 285100

marketing@fss.scot

foodstandards.gov.scot

Catriona West
Associate Director
0131 243 3916

Fiona Howie
Senior Research
Executive
0131 243 3933

