Eating Well Choosing Better

Northern Ireland Tracking Research

November 2019: Wave 5 Report

Contents

Summary

The Eating Well Choosing Better (EWCB) survey measures the success of the Food Standard Agency's (FSA's) EWCB programme through the collection of robust consumer insights and the monitoring of this data over time. The survey collects information on consumer perceptions of healthy eating, healthy options and reformulation; consumer use of traffic light labels; consumer knowledge and understanding of the recommended daily calorie intake and consumer awareness of the FSA's healthy eating campaigns.

The survey has been conducted biannually since November 2017. This report presents the findings from the fifth survey conducted in November 2019 and compares the findings to the four previous surveys to track trends in NI consumer's attitudes.

Key findings;

- The proportion of respondents reporting an understanding of what is 'healthier' has remained stable at 79% in Wave 5 (ranging from 74% - 83% throughout all five waves). Respondents recognise the role of calorie control and eating fruit and vegetables in maintaining a healthy diet, as well as the inclusion of food lower in saturated fat, sugar and salt.
- Respondents are consistently more likely to seek out healthier options when shopping than eating out. Similar proportions of respondents throughout the five surveys have also consistently reported finding it difficult to choose healthier options when eating outside the home in food settings such as take-aways, restaurants and from vending machines. These findings would suggest that catering businesses could be further encouraged and supported to provide healthier options and to make these options appealing to consumers.
- Restaurants/bars, takeaways, fast food restaurants and cafés/sandwich shops are the most common venues respondents would like to see calorie information on menus. Supporting catering businesses to display calorie information will be important in helping consumers make informed healthier choices.
- Almost 60% of respondents in the latest survey report that they are likely to purchase food reduced in fat, sugar and salt. This finding would suggest there is a need to continue improving consumer's understanding of the importance of following healthy eating recommendations.
- Respondents are consistently more likely to purchase reformulated food (reduced fat, sugar and salt) than smaller portion sizes. This finding highlights the need to continue supporting the food industry to engage with reformulation and be creative in making smaller portion sizes more appealing to consumers.
- Respondents consistently report using 'the ingredients list at the back of pack' as the most common method of finding information on the calorie, fat, sugar or salt

content of food when shopping (52% in wave 5), followed by traffic light labelling (41% in wave 5).

- In wave 5 of the survey, most respondents (95%) recognised the traffic light label, with two thirds of respondents reporting an understanding of the label and using it when shopping for food. This finding suggests there is an opportunity to further improve consumer understanding and engagement with this label. Sugar was the most commonly consulted nutrient on traffic light labels in all five waves of the survey. However, 40% or more of respondents consulted the calorie, fat and salt information on traffic light labels in wave 5 of the survey. Promoting this finding with food manufacturers may encourage further reformulation efforts of food high in calories and nutrients detrimental to health.
- Knowledge of the recommended daily calorie intake remains stable amongst men and women across all waves. 42% of women knew the correct calorie intake for their gender, compared to 26% of men in wave 5. These findings highlight the need to continue promoting the recommended daily calorie intake amongst both genders.
- Respondents in socioeconomic group ABC1 are significantly more likely to report understanding and using traffic light labels. They are also significantly more likely to report understanding what is 'healthier' compared to socioeconomic group C2DE. Those in socio-economic group ABC1 are more likely to report wanting to see food reduced in fat and sugar when buying food. This finding highlights the need to continue prioritising socioeconomic group C2DE when developing nutrition education initiatives.
- The proportion of respondents who report recognising the FSA's 'Know Your Calories' campaign images has remained stable between waves 2 and 5. 11% of respondents recognised the image in wave 5 suggesting additional campaign activity may be needed to increase the campaign's reach.

Background

One in six adults and one in four children aged 2 to 15 years are overweight or obese in NI (Department of Health 2020). The most recent National Diet and Nutrition Survey data (NatCen Social Research, MRC Elsie Widdowson Laboratory 2019) revealed the NI population consume too much saturated fat, added sugar and not enough fruit, vegetables, oily fish and fibre compared with current government recommendations.

The FSA in NI is responsible for leading on food product improvement with small and medium sized enterprises (SMEs) and educating and informing consumers to make healthier choices. To do this, the FSA in NI developed the EWCB programme. This programme supports SMEs to improve the nutritional quality of everyday foods available to NI consumers and aligns with the UK Government's sugar and calorie reduction and wider reformulation programmes overseen by Public Health England (PHE). These programmes encourage all sectors of the food industry to sugar, calories and fat from foods which contribute the most to these intakes (PHE 2017, PHE 2020[a], PHE2020[b]).

The objectives of the EWCB programme include working in partnership with SMEs and appropriate stakeholders to raise awareness of food product improvement and the targets set out in the UK Government's reduction and reformulation programmes. It also aims to establish baseline data and monitor changes in NI consumer attitudes and behaviours towards food product improvement. To monitor achievement of the EWCB programme objectives, the EWCB survey has been conducted biannually since November 2017. The purpose of this report is to present the findings of the EWCB survey conducted in November 2019. The results of this survey are also compared to the four previously completed surveys to track trends in NI consumer's attitudes towards food product improvement.

Objectives of the survey

The objectives of the EWCB survey are to measure the success of the EWCB programme through the collection of robust consumer insight data and to monitor how the data changes over time in response to food product improvement interventions and nutrition education campaigns. Topics addressed in the EWCB survey include:

1. Consumers perceptions of healthy eating
2. Do consumers look for / would they like to see /have they used calories on menus when eating out?
3. Are consumers in favour of manufacturers reducing sugar and / or saturated fat and / or salt content of foods?
4. Would consumers like to see High Fat Sugar Salt snacks contain a maximum number of calories?
5. Do consumers look at front of pack traffic light labels?
6. Do consumers look for sugar, fat, salt, saturated fat and / or calories on packaged food labels?
7. Awareness of daily recommended calorie intake

Approach

Methodology

2CV and Community Research were responsible for overseeing the completion of this survey on behalf of FSA in NI. The 10-minute online survey was carried out using a nationally representative sample of c.300 people in NI per wave. Nationally representative quotas were set for gender, age and social economic grouping. A breakdown of the sample by demographic information is provided in Appendix 1 and a copy of the survey questionnaire is provided in Appendix 2.

Considerations

When drawing conclusions from this research caution should be taken due to the sample size (*n*=313 in Wave 5). Although attempts have been made to ensure the sample is nationally representative, the size of the sample means it may not be generalizable to the population of NI. In particular, caution should be exercised when interpreting this data by demographic variables (age, gender, socio-economic group or region) as the sample size within each category is small.

Future iterations of this survey (Wave 6 onwards) will aim to include a larger sample size providing more robust and reliable findings.

Demographic differences have also been reported where statistically significant differences occur at the 5% level. Statistical significance seeks to establish whether the observed variation between groups could have happened by chance or whether it is likely to reflect some 'real' differences in the population. This means that if there was no difference between the two groups, it would be unlikely (less than 5% chance) that we would have observed such large differences in the results.

Whilst demographics commentary is included in this report, this information has not been presented visually in graphs or charts. Where applicable, data for all 5 waves has been presented in graphs, but in some cases only wave 1, 3 and 5 are provided to display the trend overtime.

Data referenced throughout this report (including all graphs/data tables) is sourced from 2CV Northern Ireland Tracking Project (Wave 1, November 2017 to Wave 5, November 2019).

Findings

Perceptions of healthy eating

When respondents were asked about their perceptions of healthy eating in wave 5 of the survey, a range of responses were received.

For some respondents healthy eating meant a balanced diet and eating in moderation.

> “A balanced diet featuring lean meat, lots of veg, controlled carb portions , some fruit and the occasional sugary or fatty treat such as chocolate.”
>
> “A well-balanced diet including plenty of fruits and vegetables and a variety of foods.”
>
> “Balanced intake of fresh food; meat, fish, vegetables, fruit, avoiding certain fats.”

For others, it meant inclusion of fruit and vegetables and having some restrictions in their diet.

> “Eating lots of fresh fruit and vegetables and avoiding processed food.”
>
> “Getting 5 a day of fruit and veg, drinking plenty of water and reducing sugar intake.”
>
> “Getting your 5 a day, cutting down on fat, sugar and salt.”

Some also referred to controlling calorie intake.

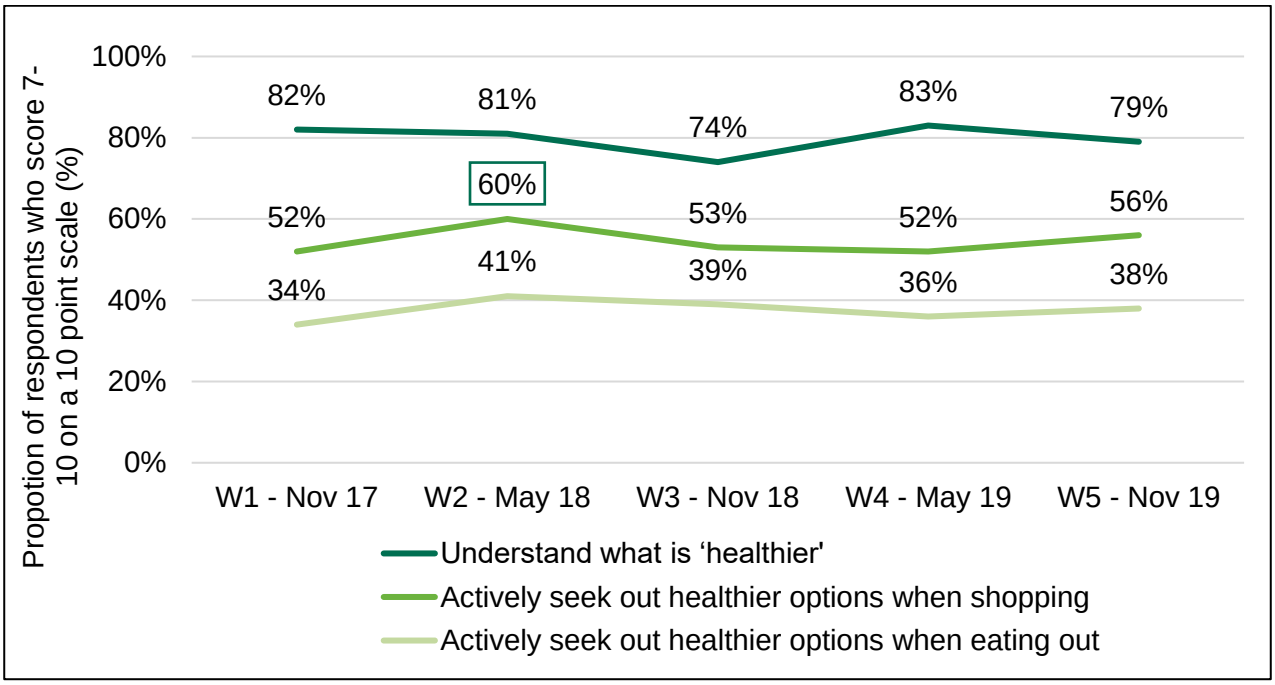
> “Eating fruit and veg, lean meats, low calories, low sugar, fat and salt.”
>
> “Making sure you get the appropriate number of calories in a day.”

Overall, these results demonstrate that respondents recognise the role calorie control plays in eating a healthy diet. However, they also consider a balanced diet made up of foods such as fruit and vegetables and foods lower in sugar, saturated fat and salt as an important part of healthy eating.

Seeking healthier options

In Wave 5 of the EWCB survey, the trends associated with seeking healthier options and respondent understanding of what is 'healthier' and 'less healthy' remained stable. Wave 5 consumers were more likely to seek out healthier options when shopping (56%) in comparison to when eating out (38%); a trend that has been consistent across all waves of this survey (Figure 1). This suggests there are opportunities to encourage consumers to seek out healthier options when eating out and to further encourage and support catering businesses to make healthier options more appealing to consumers.

Figure 1. Understanding of what is 'healthier' and 'less healthy' and seeking 'healthier' options when shopping and eating out – wave 1 to wave 5 timeseries



Base: W1 (n=311), W2 (n=307), W3 (n=310), W4 (n=312), W5 (n=313). Values displayed in boxes show a statistically significant increase from the previous wave

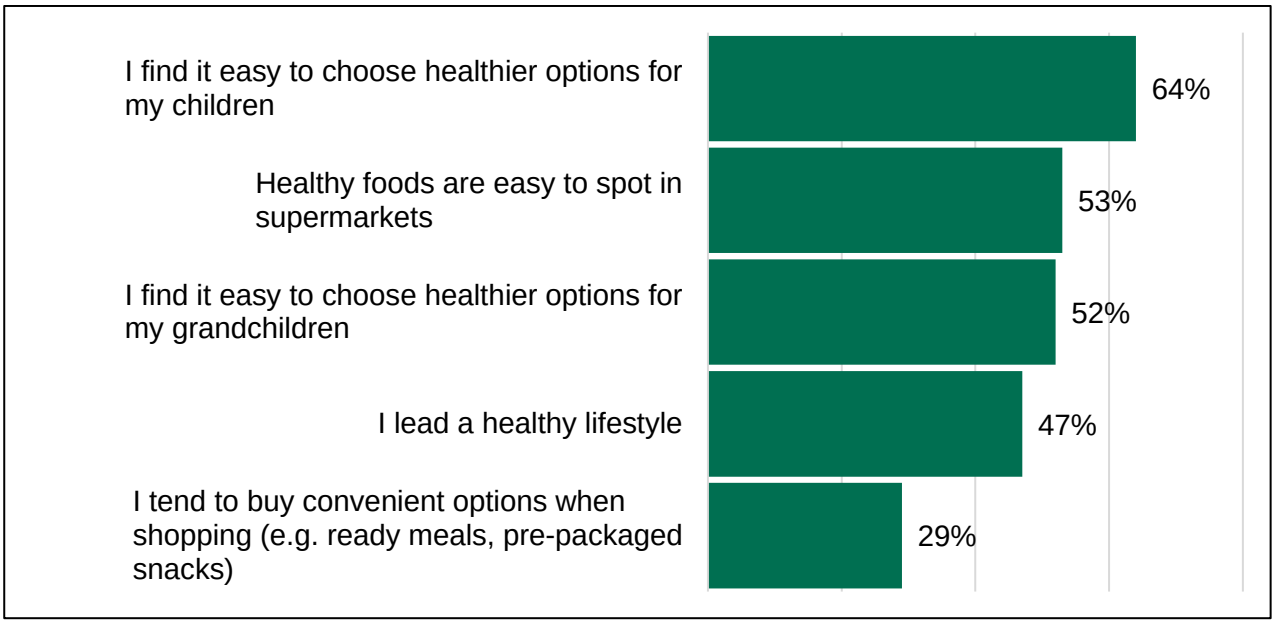
Respondents in socio-economic group ABC1 were significantly more likely to report understanding what is healthier (84%) and were also significantly more likely to report seeking out healthier options when shopping (62%), than those in group C2DE (73% and 50% respectively).

Ease of selecting healthier options

Respondents were asked to indicate if they agreed or disagreed with a number of statements related to the ease of selecting healthier options and the purchasing of convenience foods. 47% of respondents agreed they lead a healthy lifestyle. Most respondents with children (64%) and over half of respondents with grandchildren (52%) agreed they find it easy to choose healthier options for their children and grandchildren, respectively. Over half of respondent's reported finding it easy to spot healthy food in

supermarkets (53%). Less than a third (29%) agreed they purchase convenient food options such as ready meals and pre-packaged snacks when shopping (Figure 2).

Figure 2. Respondents who agreed[1] with statements related to ease of selecting healthier options



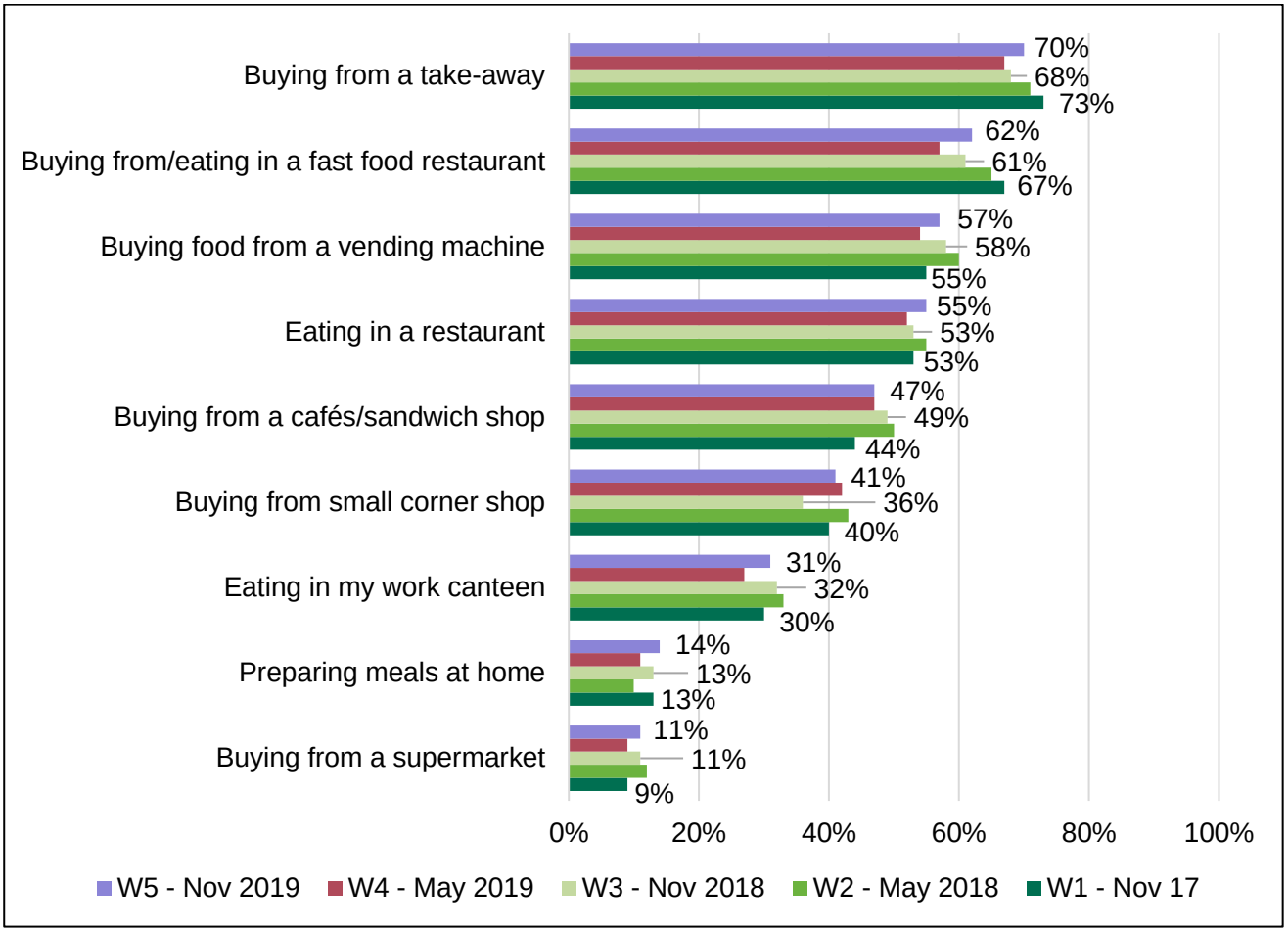
Base: (n=313) for all statements except for 'I find it easy to choose healthier options for my children', (n=107), 'I find it easy to choose healthier options for my grandchildren' (n=49)

Selecting healthier options in food settings

Respondents consistently reported finding it more difficult to choose healthier options when eating out compared to buying from a supermarket or preparing meals at home from wave 1 to wave 5 (Figure 3). Takeaways, fast food restaurants, vending machines, restaurants and cafés/sandwich shops were the most commonly reported places where it was difficult to choose healthier options.

[1] Participants who scored 7-10 on a 10 point scale, where 1= 'strongly disagreed' and 10= 'strongly agreed'

Figure 3. Difficulty of choosing healthier options in food settings, wave 1 to wave 5 comparison

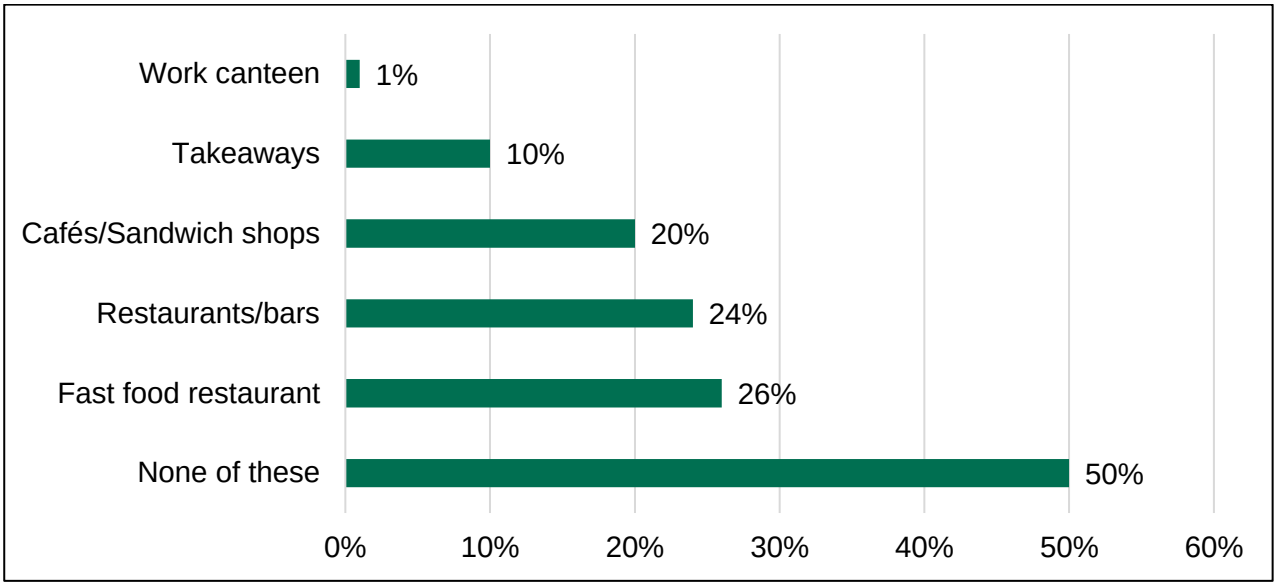


Base: W1 (n=311), W2 (n=307), W3 (n=310), W4 (n=312), W5 (n=313). Data labels are only provided for W1, W3 and W5.

Calorie information on menus

Respondents were also asked if they noticed calorie information displayed on food menus in various settings. The most common places respondents reported seeing calorie information on menus were fast food restaurants (26%), restaurants/bars (24%) and cafés/sandwich shops (20%). 50% of respondents reported that they had not noticed calorie information in any of these food establishments (Figure 4). These findings have remained relatively stable across all five waves. Cafés/sandwich shops have seen a slight increase since wave 1 (15% in wave 1 to 20% in wave 5), while work canteens have seen a slight decline (5% in wave 1, 1% in wave 5).

Figure 4. Food settings respondents noticed calorie information displayed on menus

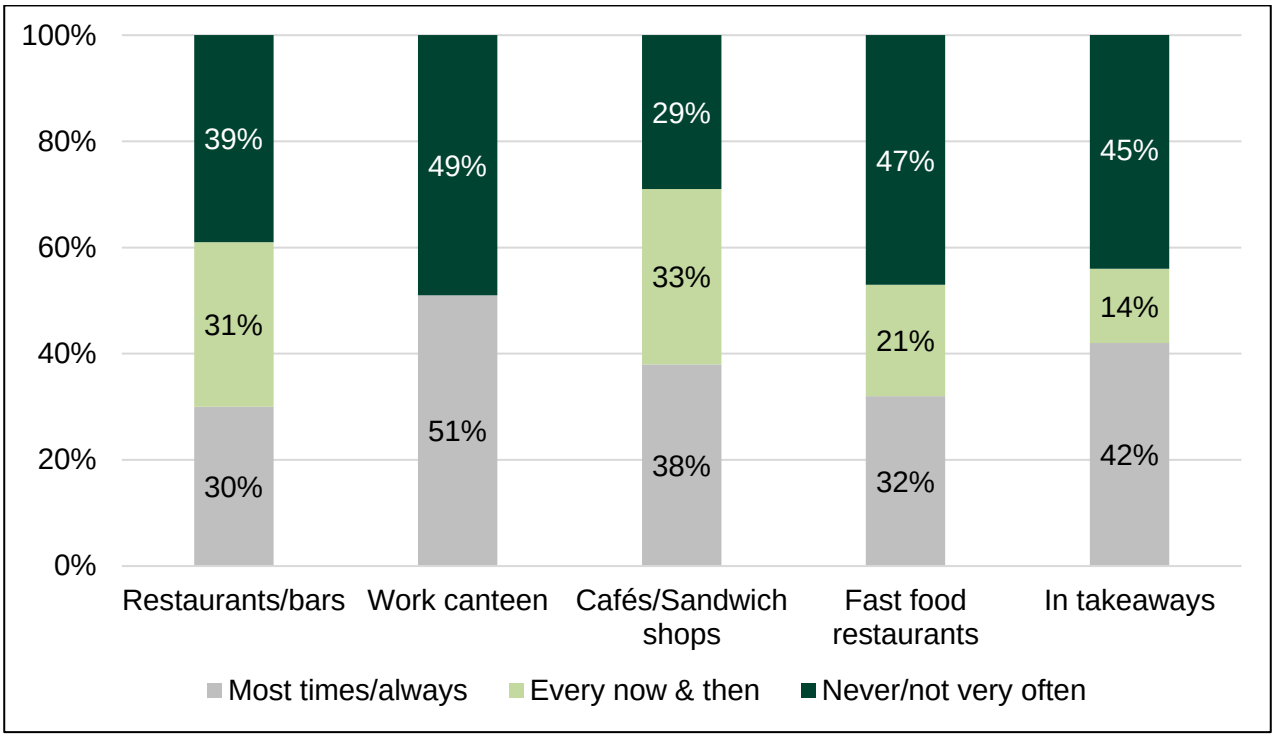


Base (n=313). 'Other' responses omitted as these represent less than 1% of total responses.

Influence of calorie information on food decisions when eating out

In all food settings outside the home, a greater proportion of respondents reported their food choices being influenced by the availability of calorie information 'most times/always' and 'every now and then' compared to those who reported 'never/not very often' using this information. In particular, respondents reported being more likely to be influenced by the availability of calorie information in workplace canteens, takeaways and cafes/sandwich shops (Figure 5).

Figure 5. Influence of calorie information on food decisions when eating out

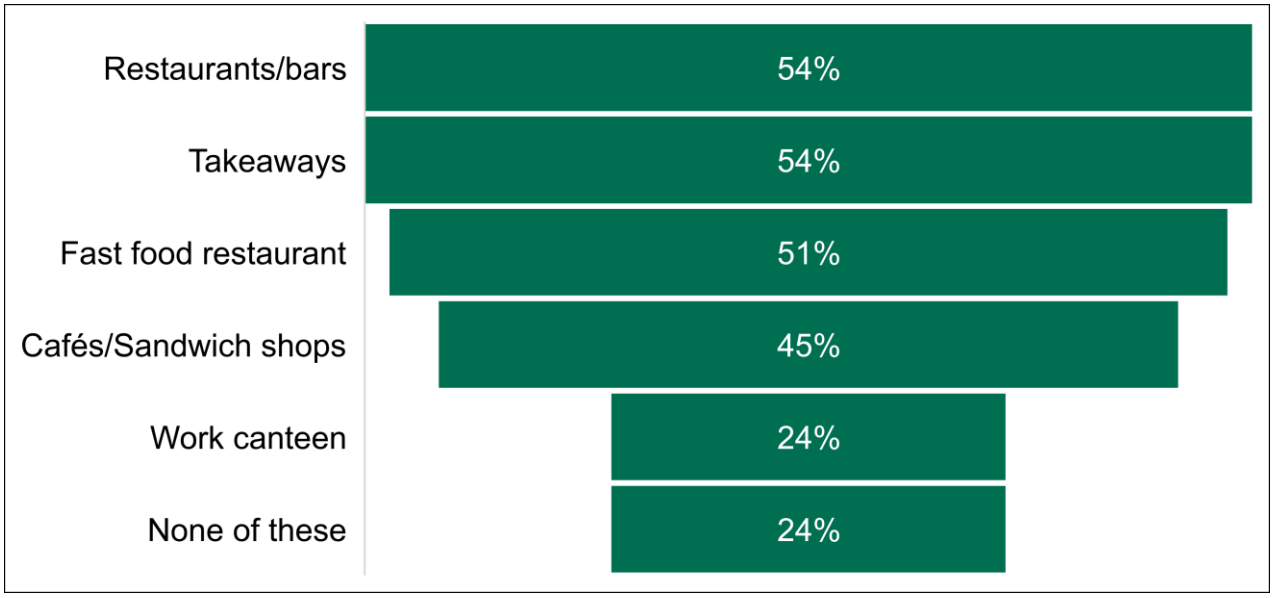


Base: W5. Restaurants/bar (n72), Work canteen (n3), Cafés (n61), Fast food restaurants (n79), takeaways (n28)

Preferred settings for the display of calories on menus

Over 50% of respondents would like to see calorie information on menus in restaurants/bars (54%), takeaways (54%) and fast food restaurants (51%). 45% of respondents would like this information made available in cafés/sandwich shops, whereas almost one quarter (24%) of consumers would like calorie information in work canteens (Figure 6).

Figure 6. Food settings respondents would like to see calorie information made available on menus

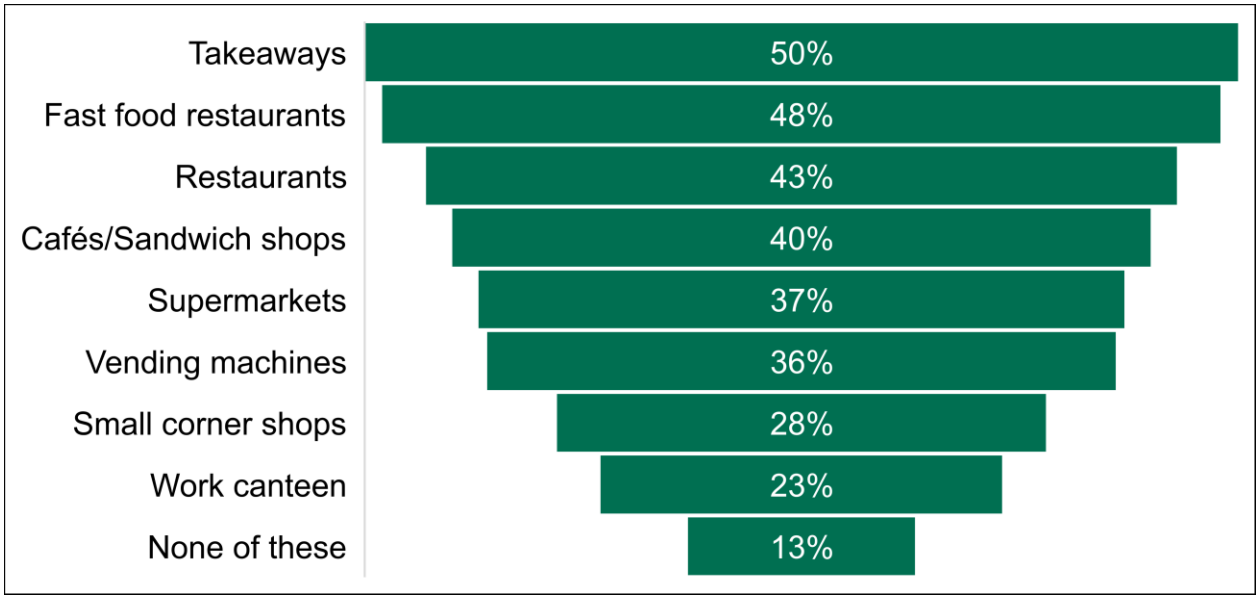


Base: n=313, 'Other' responses have been omitted as these represent less than 1% of total responses.

Preferred settings for increased availability of healthier options

40% or more of respondents would like healthier options made available in takeaways (50%), fast food restaurants (48%), restaurants (43%) and café/sandwich shops (40%) with fewer respondents wanting healthier options in supermarkets, vending machines, corner shops and work canteens. These trends have remained stable across all five waves (Figure 7).

Figure 7. Food settings respondents would like to see increased availability of healthier food



Base: n=313, 'Other' responses have been omitted as these reflect just 1% of responses

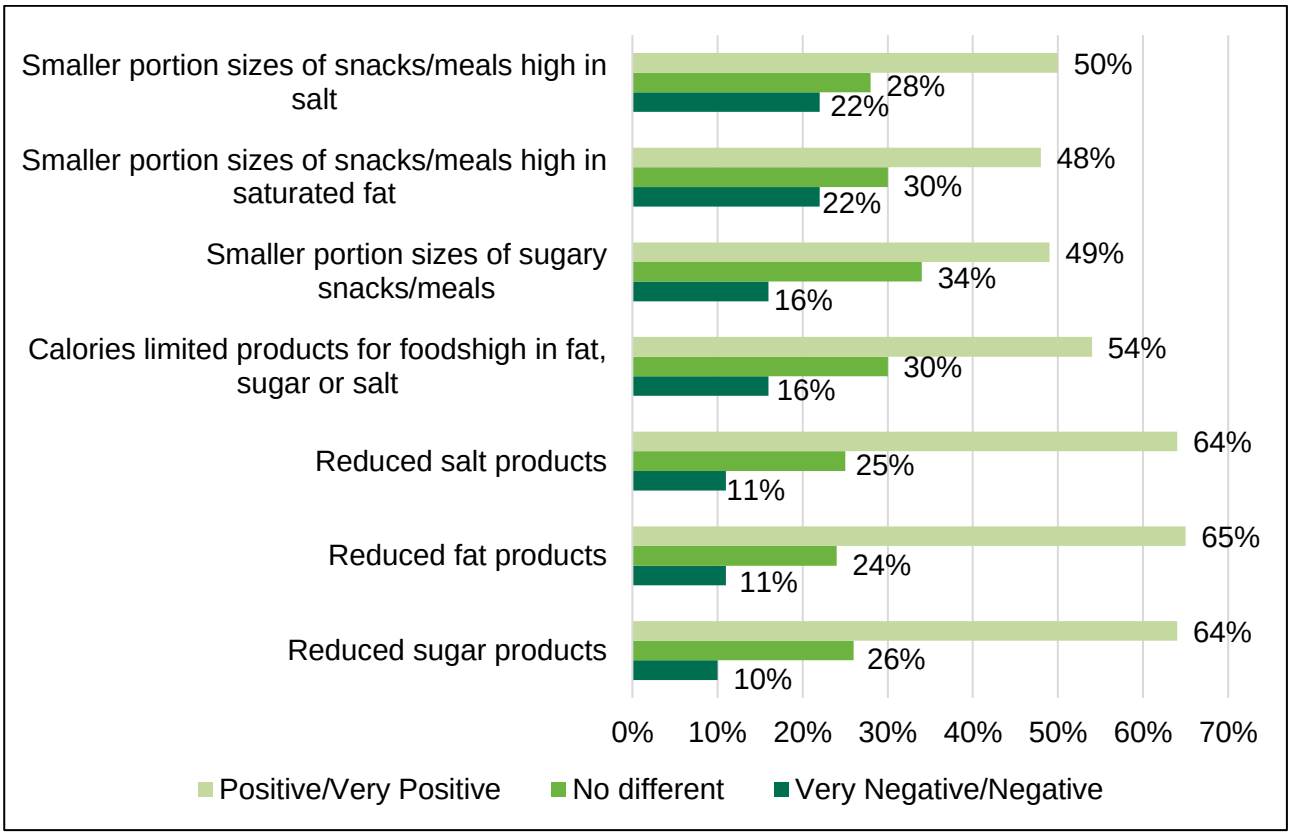
Those aged 55+ were significantly more likely than other age groups to want to see healthier food in restaurants (57% aged 55+, compared with 39% aged 35-54 and 30% aged 16-34). Younger groups were significantly more likely to want to see healthier food in vending machines (37% aged 16-34 and 49% aged 35-54, compared with just 24% aged 55+). Caution should be exercised when considering the differences in age groups as the survey results does not provide information on the prevalence of use of different food settings by age group.

Women were significantly less likely (9%) than men (18%) to report they did not want to see increased availability of healthier options in any food setting. Those in a higher socio-economic group were significantly more likely to report that they would like to see healthier options in restaurants (51%) and cafés/sandwich shops (51%) than those in socio-economic group C2DE (35% and 30% respectively). Those in socio-economic group C2DE were also significantly more likely to report that they would like to see healthier option in 'none of these' (18%), in comparison to those in socio-economic group ABC1 (9%).

The availability of healthier options when shopping for food

Over 45% of respondents replied positively when presented with a range of options to improve the availability of healthier food when shopping. Of the prompted options provided, respondents were more receptive (selected ‘positive’ or ‘very positive’) to the availability of foods reduced in fat (65%), sugar (64%) and salt (64%) and foods high in fat, sugar and salt adhering to maximum calorie limits (54%) in comparison to reduced portion size of foods high in fat, sugar and salt (Figure 8).

Figure 8. How respondents feel about the availability of healthier food options when shopping for food



Base: W5(n=313)

Respondents in socio-economic group ABC1 were significantly more likely to report a positive response to the availability of reduced fat food (72% reported a rating of 4 or 5, out of 5) and reduced salt food (70% reported a rating of 4 or 5, out of 5) in comparison to those in socio-economic group C2DE (57% and 58% respectively).

The proportion of respondents who would like to see increased availability of food reduced in salt, sugar, and fat and smaller portion sizes of food containing high level of these nutrients has varied since 2017. Across all waves, the proportion increased from wave 1 and then declined from wave 3 (see Table 1 for comparison of wave 1, 3 and 5). However, throughout all the waves, respondents report a stronger preference for

increased availability of food reduced in salt, sugar, and fat when shopping for food in comparison to smaller portion sizes of food containing high levels of these nutrients (Table 1).

Table 1. Respondents who would like to see increased availability of healthier alternatives when shopping for food

Healthier alternatives	Wave 1 (Nov 17)	Wave 3 (Nov 18)	Wave 5 (Nov 19)
Reduced Salt	49%	60%	52%
Reduced Sugar	52%	64%	56%
Reduced Fat	52%	55%	53%
A maximum limit on calories for foods which are high in fat, sugar or salt	25%	29%	30%
Smaller portion sizes of sugary snacks/meals	22%	28%	24%
Smaller portion sizes of snacks/meals high in saturated fat	16%	23%	22%
Smaller portion sizes of snacks/meals high in salt	17%	21%	23%
None of these	23%	16%	19%

Base: W1 (n=311), W3 (n=310), W5 (n=313)

Respondents in age group 35-54 (55%) and 55+ (64%) were significantly more likely to report that they would like to see reduced salt food than participants aged 16-34 (35%). Similarly, those aged 35-54 (25%) and 55+ (29%) were significantly more likely to want to see smaller portion sizes of food high in salt, in comparison to those aged 16-34 (12%).

Respondents in socio-economic group ABC1 were significantly more likely to report that they would like to see more reduced sugar products (63%) and reduced fat products (61%) than those in socio-economic group C2DE (49% and 46% respectively). Additionally, those in socio-economic group C2DE were twice as likely to report wanting to see ‘none of these’ when buying food in comparison to those in socio-economic group ABC1 (26%, compared with 13%).

Likelihood of purchasing healthier versions of food

The proportion of respondents likely to purchase healthier versions of food decreased slightly in wave 5 of the survey when compared to wave 1. As Table 2 indicates, the likelihood of buying these healthier options increased until reaching a peak in Wave 3. Since then, preference for these food options has declined. Despite this, almost 60% of consumers would still be more likely to purchase food reduced in fat, sugar and salt. Findings from this wave of the survey also demonstrates that respondents are less likely to purchase reduced portion sizes of food high in fat, sugar and salt in comparison to reformulated versions.

Table 2. Likelihood of purchasing healthier options compared to regular versions of food

Healthier Option	Wave 1 (Nov 17)	Wave 3 (Nov 2018)	Wave 5 (Nov 19)
Reduced Salt	63%	72%	58%
Reduced Sugar	61%	72%	57%
Reduced Fat	60%	68%	56%
A maximum limit on calories for foods which are high in fat, sugar or salt	46%	58%	44%
Smaller portion sizes of sugary snacks/meals	46%	60%	41%
Smaller portion sizes of snacks/meals high in saturated fat	42%	52%	41%
Smaller portion sizes of snacks/meals high in salt	43%	49%	38%

Base: W1 (n=311), W3 (n=310), W5 (n=313). Proportions shown indicate respondents who are 'likely' or 'much more likely' to buy this product, compared to a regular version of the product.

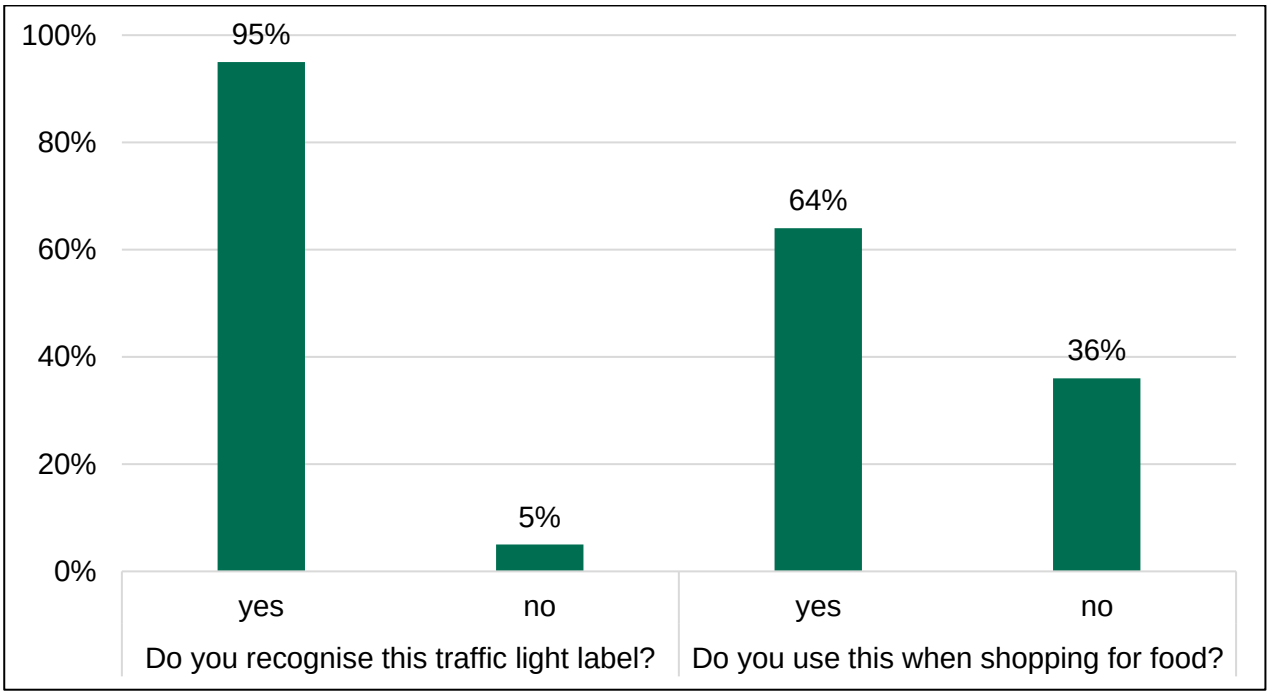
Women are significantly more likely than men to report that they would purchase reduced sugar food (63%, compared with 49%) but this difference was not seen with regards to reduced salt or reduced fat food. There is also a significant difference between men and women in likelihood of buying smaller portions sizes. Women are significantly more likely to buy smaller portions sizes of sugary snack/meals (47%), smaller portions of food high in saturated fat (47%) and smaller portions sizes of snacks/meals high in salt (45%) in comparison to men (35%, 35% and 30% respectively).

Respondents who report having children or grandchildren were also significantly more likely to report higher likelihood of buying reduced sugar food (63%) and reduced salt food (64%), compared to those without children or grandchildren (51% and 52% respectively). Respondents with children or grandchildren are also significantly more likely to buy smaller portion sizes of snacks/meals high in sugar (50%), high in saturated fats (49%) and high in salt (45%) than those without children or grandchildren (33%, 35% and 32% respectively). Respondents in socio-economic group ABC1 reported a significantly higher likelihood of buying reduced fat food (64%), than those in socio-economic group C2DE (48%).

Recognition and use of traffic light labels

When shown an image of the traffic light label most respondents (95%) recognised the image. This finding was consistent across all demographics. 64% reported using traffic light labels whilst shopping (Figure 9).

Figure 9. Recognition of and use of traffic light labels

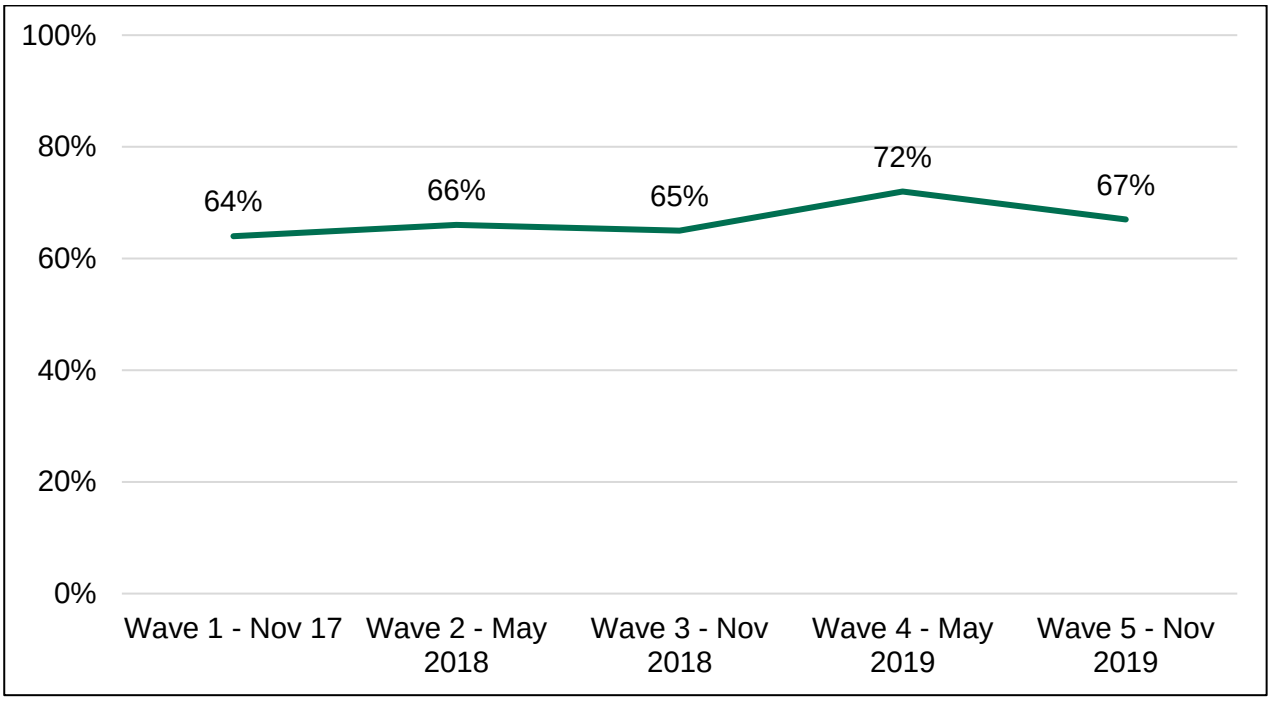


Base: (n=313)

Understanding of traffic light labels

Understanding of traffic light labels was assessed using a scale of 1-10. A score of 7-10 was used to indicate reasonable to full understanding. The findings demonstrate that respondent's understanding of traffic light labels has remained stable since wave 1 of the survey. The majority of respondents (67%) report understanding the purpose of this label in the current wave of the survey (Figure 10).

Figure 10. Understanding of traffic light labels



Base: W1 (n=311), W2 (n=307), W3 (n=310), W4 (n=312), W5 (n=313)

Respondents in socio-economic group ABC1 were significantly more likely to report understanding traffic light labels (76%) in comparison to those in socio-economic group C2DE (59%). Respondents in a rural setting where also significantly more likely to report understanding this label (78%) in comparison to those in an urban setting (62%).

When respondents were asked to describe the purpose of traffic light labels, a range of responses were received.

Respondents associated the traffic lights with an indication of healthiness.

"It indicates how healthy a product is. If there's more green on the package the healthier it is and the more red, the less healthy ."

''To show what is good/bad for you.''

"To show the amount of fat, calories etc. per an amount and if it's a high, medium or low percentage of your recommended daily amount."

Others indicated the traffic light labelling refers to salt, sugar and fat levels in the product.

''They indicate how high the sugar, fat and salt contents are.''

''It lets you know how much sugar and fat and anything else that are bad for you.''

"Advice on the amounts of less healthy ingredients (salt, fat etc.) are in the food as a percentage of daily recommended allowance."

However, some participants felt unsure about the purpose of traffic light labelling.

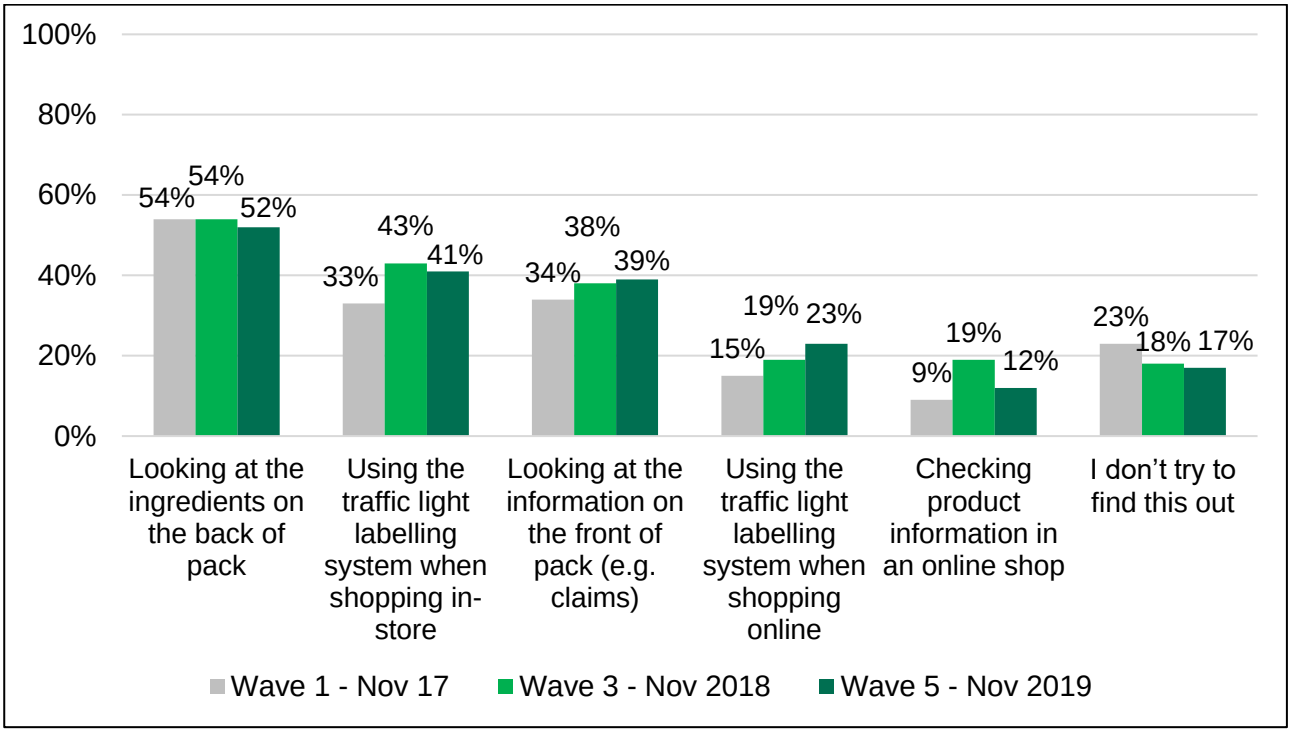
> ‘’Not exactly sure what they mean.’’
>
> “To give us a guide to the ingredients.”
>
> “To show how much fat is in a product red is the worst green is the best.”

These findings indicate that whilst some respondents understand the role of traffic light labels, there is further opportunity to improve consumer understanding.

Determining the sugar, fat, saturated fat or calorie of food

In all five waves of the survey, ‘Looking at the ingredients on back of pack’, ‘Using the traffic light labelling system when shopping in store’ and ‘Looking at the information on the front of pack’ are the three most common methods used to find information on the sugar, fat, saturated fat or calorie content of food (data shown for waves 1, 3 and 5 only in Figure 11). ‘Looking at ingredients on the back of the pack’ remained the most common method of finding information on the sugar, fat, salt, and calorie content of food when shopping. ‘Using the traffic light label when shopping in store’ and ‘looking at other information on the front of pack’, has remained stable between waves 2 and 5 (data shown for waves 1, 3 and 5 only). Approximately one fifth of respondents in waves, 2, 3, 4 and 5 reported using traffic light labelling when shopping online (data shown for waves 1, 3 and 5 only).

Figure 11. How respondents determine the sugar, fat, saturated fat or calorie of food



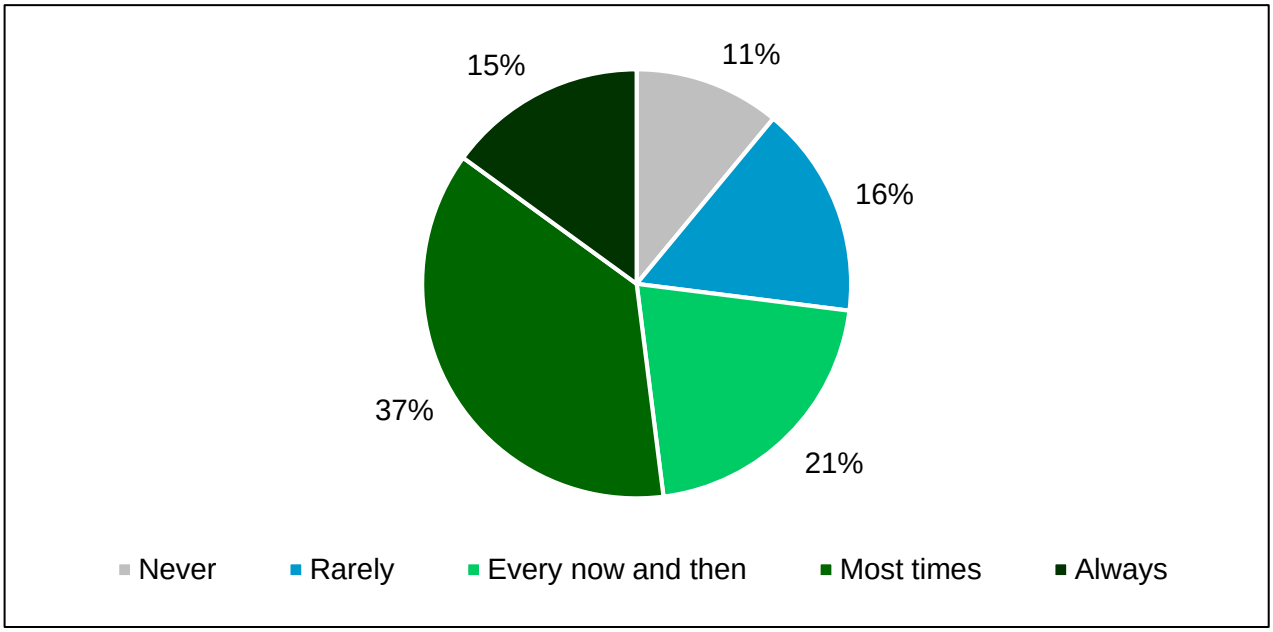
Base: W1 (n=311), W3 (n=310), W5 (n=313)

Respondents aged 35-54 (42%) and 55+ (50%) were significantly more likely than those aged 16-34 (29%) to use traffic light labels when shopping in store, and respondents in socio-economic group ABC1 were significantly more likely to use traffic light labels when shopping for food in-store (52%) than those in socio-economic group C2DE (30%). Men were significantly more likely than women to report that they do not try to find out this information (22% compared with 13%). When total values are compared, the results indicate that the use of traffic light labels is more prevalent in-store than online (41% compared with 23%). However, using the data from this survey alone it is not possible to determine the prevalence of different shopping methods (online or in-store), so the noted significant difference may be a result of more general shopping preferences.

Frequency of using traffic light labels when choosing pre-packed food

52% of respondents report using traffic light labels 'always' or 'most times' when choosing pre-packed food in the supermarket with a further 21% of respondents report using traffic light labels 'every now and then' (Figure 12).

Figure 12. Frequency of using traffic light labels when choosing pre-packed food



Base: n=313

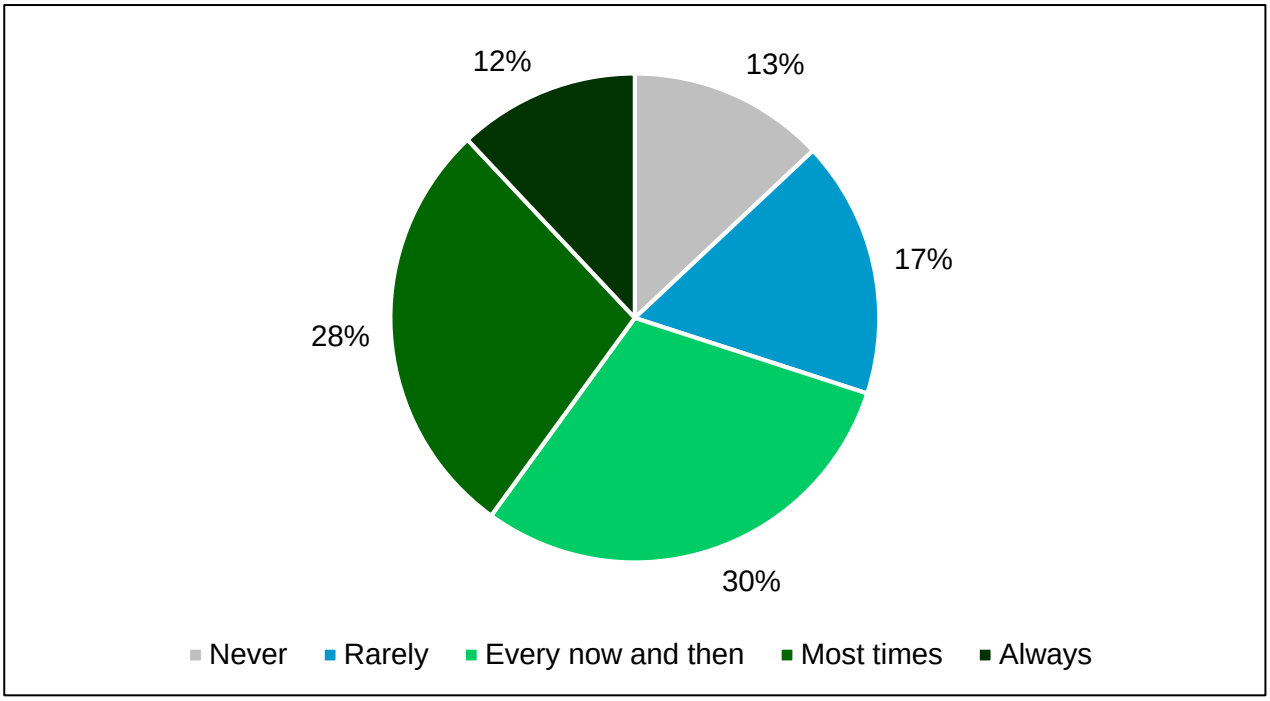
Men are significantly more likely (15%) than women (7%) to report never looking at the traffic light labels when choosing pre-packed food at a supermarket, although there is no significant difference between these groups for those who report doing this ‘always’ or ‘most times’.

Those in an urban setting (15%) are also significantly more likely to report ‘never’ using traffic light labels, than those in a rural setting (3%), although there is no significant difference between these groups for those who report doing this ‘always’ or ‘most times’.

Frequency of using recommended daily allowance information on traffic light labels

When respondents were asked about the use of recommended daily allowance information on traffic light labels, 40% of respondents reported using this information ‘always’ or ‘most times’ when shopping (Figure 13).

Figure 13. Frequency of using recommended daily allowance information on traffic light labels



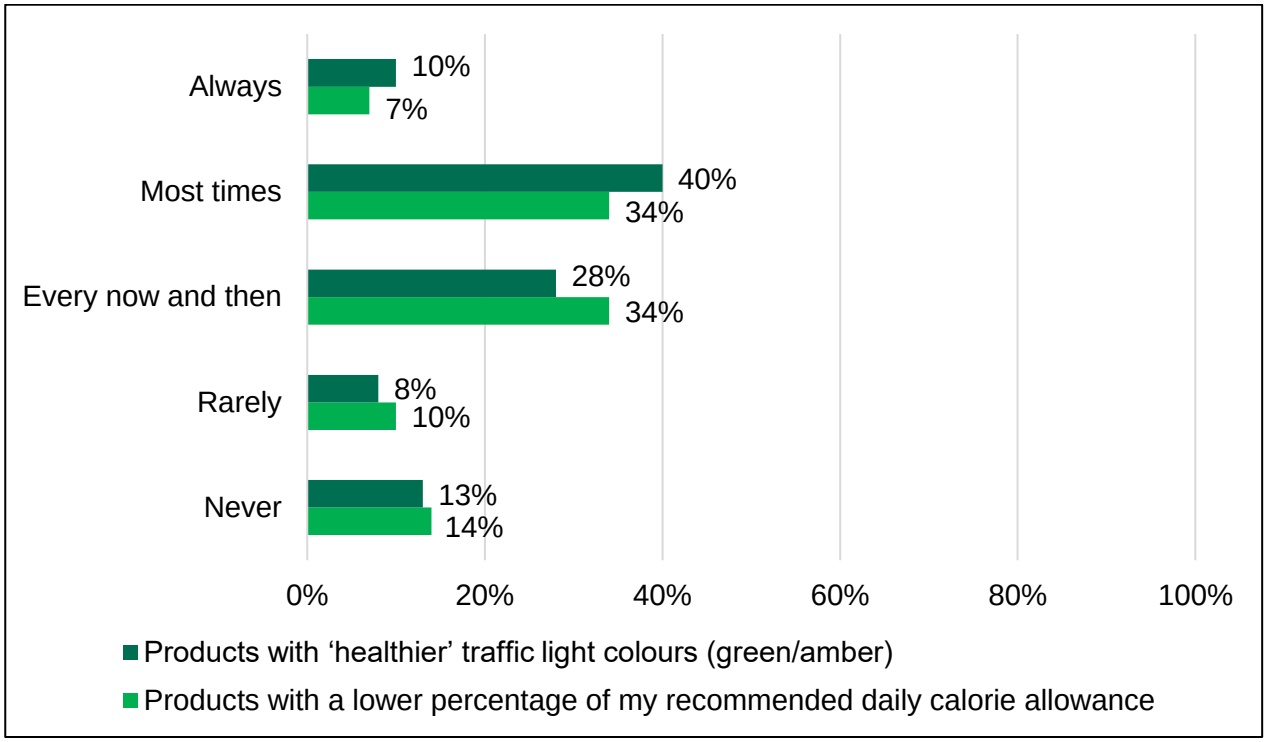
Base: n=313

A greater proportion of men (18%) were significantly more likely to report ‘never’ using recommended daily allowance information when choosing pre-packed food than women (8%). Respondents in socio-economic group C2DE (17%) were significantly more likely than those in socio-economic group ABC1 (9%) to report never using recommended daily allowance information when choosing pre-packed foods.

Frequency of purchasing food with 'healthier' traffic light colours and a lower recommended daily allowance for calories

Respondents were more likely to report ‘always’ or ‘most times’ (50%) purchasing food with ‘healthier’ traffic light colours, than food with lower calories (41%) (Figure 14).

Figure 14. Frequency of purchasing food with 'healthier' traffic light colours and food with a lower with a lower percentage reference intake for calories



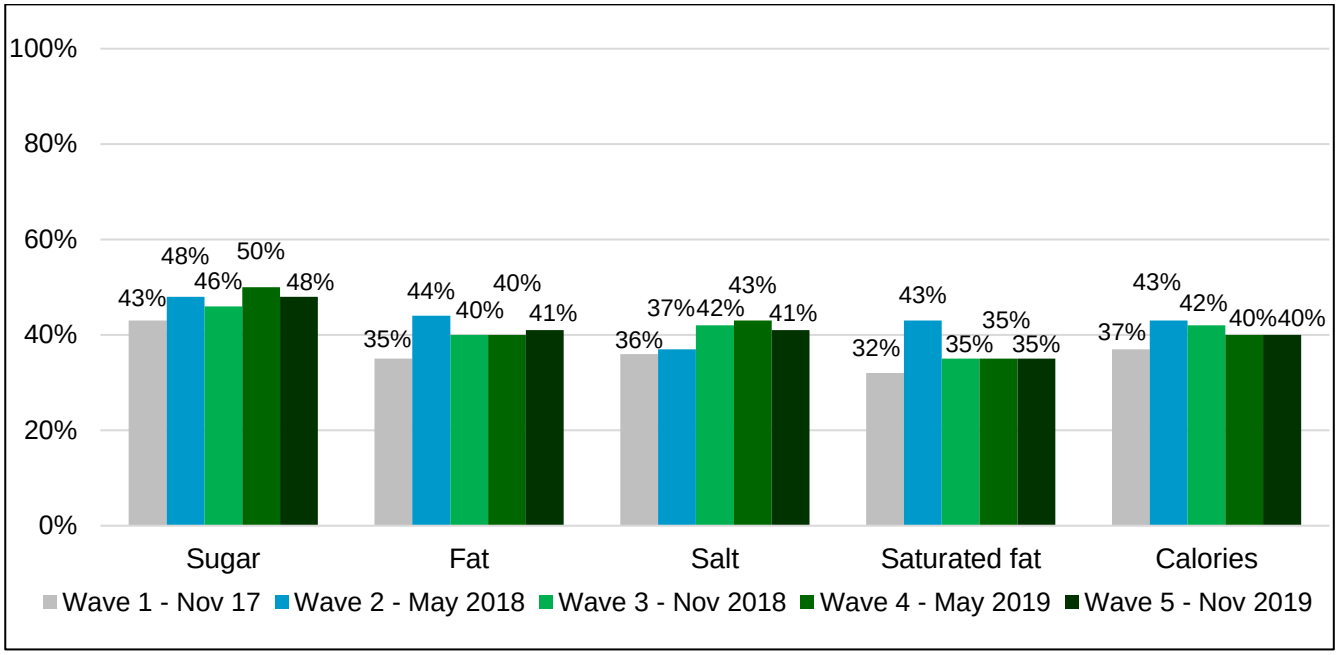
Base: n=313

Respondents in socio-economic group ABC1 were significantly more likely to report buying food with 'healthier' traffic light colours (green/amber) (58%) and food with a lower percentage of recommended daily calorie allowance (49%) than socio-economic group C2DE (43%, 34% respectively). These figures are based on respondents who report 'always' or 'most times' buying these types of food.

Frequency of consulting calorie and nutrient information available on traffic light labels

Sugar was the most commonly consulted nutrient on traffic light labels. Saturated fat was the nutrient least likely to be consulted amongst those who use traffic light labels in all waves of the survey, with the exception of wave 2, where salt was the least consulted. A similar proportion of respondents consult traffic light labels for fat (41%), salt (41%) and calories (40%) in wave 5 of the survey (Figure 15).

Figure 15. Frequency of consulting calorie and nutrient information available on traffic light labels



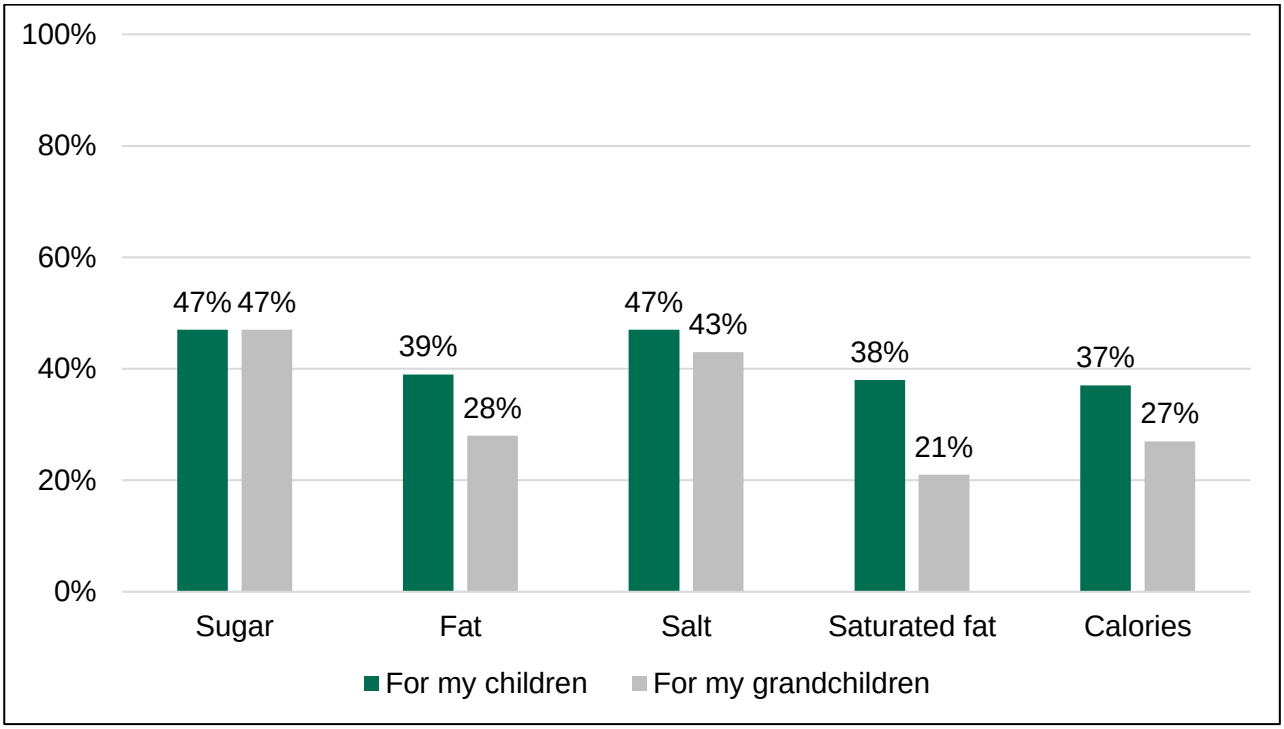
Base: W1 (n=311), W2 (n=307), W3 (n=310), W4 (n=312), W5 (n=313)

Those aged 35-54 (43%) and 55+ (49%) were significantly more likely to use traffic light labels to determine the amount of salt in food than those aged 16-34 (29%). Those aged 35-54 and 55+ were also significantly more likely to use traffic light labels to determine saturated fat content (39% for both 35-54 and 55+) than those aged 16-34 (25%). Men were significantly more likely to use traffic light labels to view the salt content (48%) than women (34%).

Respondents in socio-economic group ABC1 were significantly more likely to use traffic light labels to determine the levels of sugar (55%), fat (49%) and saturated fat (42%) in food and to look at calorie content (46%), in comparison to those in socio-economic group C2DE (42%, 33%, 28% and 34% respectively). Those in socio-economic group C2DE were also significantly more likely to report using ‘none of these’ (30%, compared with 17% of those in group ABC1).

Over 40% of respondents consulted sugar and salt on traffic light labels when purchasing food for their children or grandchildren. Fat, saturated fat and calories were consulted less often by respondents purchasing food for children or grandchildren (Figure 16).

Figure 16. Frequency of consulting calorie and nutrient information available on traffic light labelling when buying food for children or grandchildren

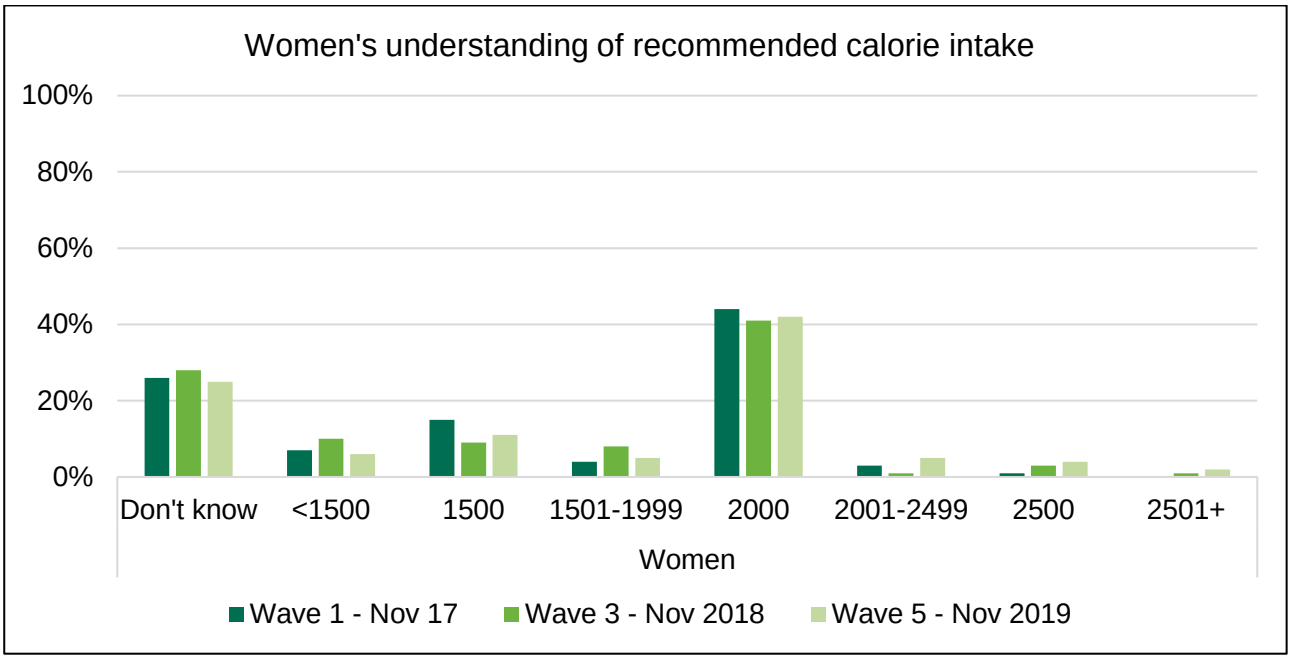


Base: those who have children (n=107), those who have grandchildren (n=49)

Understanding of recommended daily calorie intake

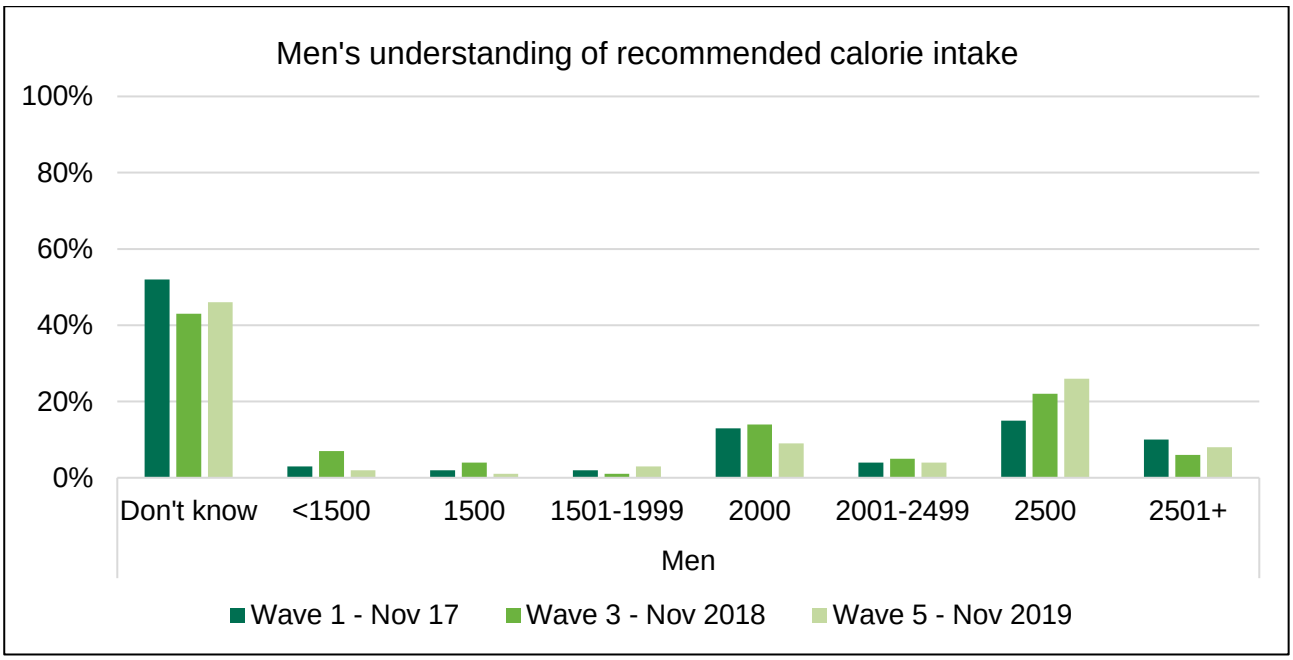
Women are significantly more likely to know the recommended daily calorie intake for their gender than men (Figure 17 and 18). 42% of women accurately identified that the recommended daily intake for women is 2000kcal, whereas only 26% of men knew that 2,500kcal was the recommended intake for their gender. 25% of women report they ‘don’t know’ the appropriate calorie intake for their gender, but men are significantly less likely to know this information (46%). Results across all waves have remained consistent over time. These findings indicate that there is an opportunity to build understanding of recommended calorie intake amoungst men in particular.

Figure 17. Understanding of recommended daily calorie intake by gender (women)



Base: Understanding of recommended daily calorie intake shown among women W1(159), W2 (157), W3 (151), W4 (163), W5 (164)

Figure 18. Understanding of recommended daily calorie intake by gender (men)

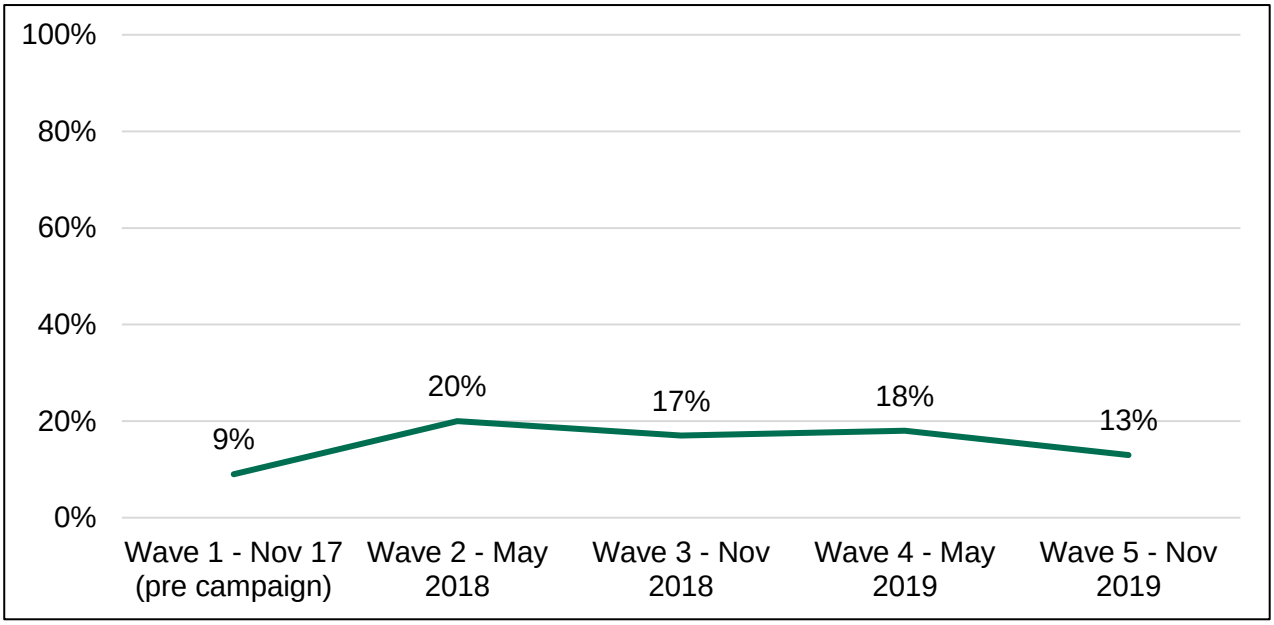


Base: Understanding of recommended daily calorie intake shown among men W1 (152), W2 (150), W3 (159) W4 (147) W5 (144)

Awareness of calorie related communications

Without prompting, respondents were asked about their awareness of any public communications about calories. Awareness about calorie related communications has declined in the last three waves indicating the FSA's 'Know Your Calories' (KYC) campaign may no longer be achieving widespread coverage across NI (Figure 18).

Figure 19. Spontaneous awareness of calorie communications



Base: W1 (n=311), W2 (n=307), W3 (n=310), W4 (n=312), W5 (n=313)

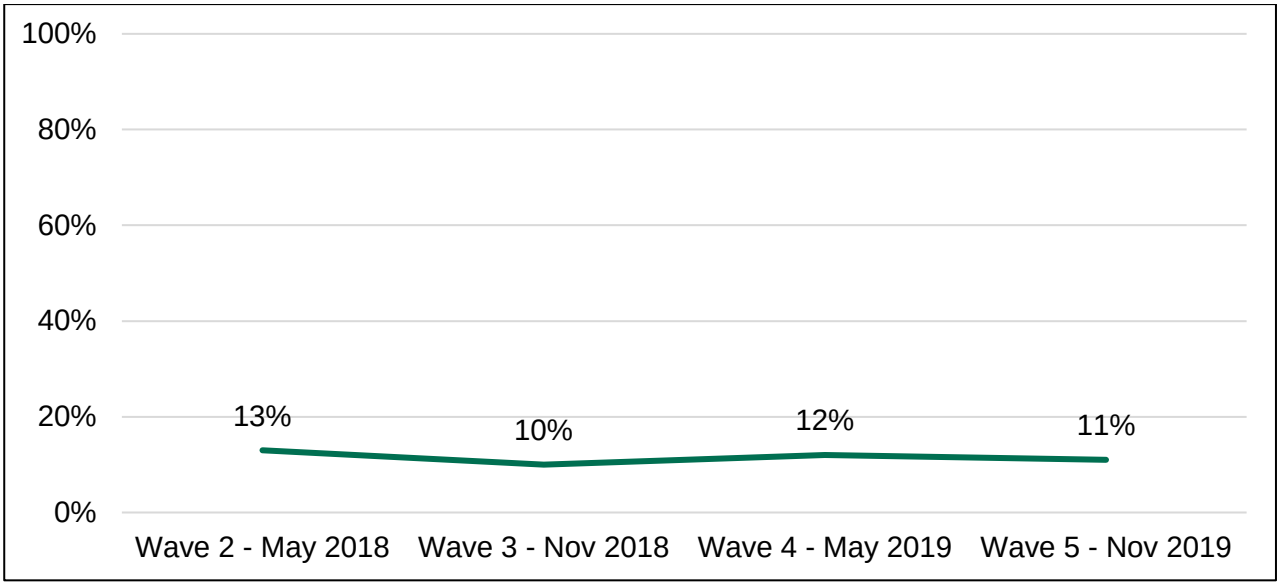
Men were significantly more likely to report not seeing the communications than women (91%, compared with 84%). Women were significantly more likely than men to report seeing communications about calories (16%, compared to 9%). There were no other significant differences by any other demographic group.

When respondents were asked to explain what they had remembered seeing or hearing, most respondents recalled television adverts not related to the KYC campaign as a source of communication on calorie information:

> "It was an advert about making better choices for your children and to not give in to their whining about not getting unhealthy snacks."
>
> "Advert about foods which are high in calories for children."
>
> "It has been on the news a few times and there have been programmes on TV like "Food Unwrapped" giving guidance about calories and salt sugar and fats."

When provided with the ‘KYC’ images (see Appendix 3), 11% of respondents recognised the images. Although this has decreased from the previous wave, the trend is relatively stable between waves 2 and 5 (Figure 19).

Figure 20. Prompted recognition of 'KYC' campaign assets



Base: W2 (n=307), W3 (n=310), W4 (n=312), W5 (n=313). Data not collected prior to Wave 2.

Those in the youngest age group (aged 16-34) were significantly more likely to recognise the ‘KYC’ images (20%) than those aged 35-54 (8%) and 55+ (5%).

Conclusions

Wave 5 of the EWCB survey presents a number of positive findings in relation to NI consumers' awareness of healthier food and their nutritional preferences when shopping and eating out. Since the survey began in November 2017, respondent understanding of 'what is healthier' has remained high with good recognition of the role of calorie control and foods low in fat, sugar and salt in maintaining a healthy diet. Respondents are consistently more likely to seek out healthier options when shopping than eating out. However, over 50% of respondents would like to see calories on menus when eating out in restaurants/bars, takeaways and fast food restaurants, with a similar proportion reporting that this information would influence their food choices 'always/most times' and 'every now and then'. Encouragingly, over 50% of respondents report wanting to see increased availability of reduced fat, sugar and salt products for sale as well as reporting a high likelihood to buy these products compared to regular versions. Respondents recognition of the traffic light label has remained high (95% in wave 5) demonstrating an upward trend from wave 1, with over 60% of respondents consistently reporting an understanding of this label from wave 1 to wave 5. 73% of respondents in wave 5 reported using traffic light labelling either 'always/most times' and 'now and then' when purchasing pre-packed food.

However, the research also indicates that further support is needed to encourage and enable consumers to make healthier choices when eating out and shopping for food.

Supporting consumers to make healthier choices when eating out of home

The proportion of respondents actively seeking healthier options when shopping for food has remained consistently higher than those seeking healthier options when eating outside the home. Similar proportions of respondents throughout the five surveys have also reported finding it difficult to choose healthier options when eating outside the home. These findings would suggest there is a need to further encourage and support catering businesses to provide healthier options and to make such options appealing to consumers. Increased provision of healthier choices would meet the expectations of the 40% or more of respondents who would like to see increased availability of healthier food in settings such as café/sandwich shops, restaurants, fast food restaurants and takeaways.

Equally, the provision of calorie labelling on menus would enable consumers to make informed healthier choices when eating out. Encouragingly, a greater proportion of respondents reported that the availability of calorie information would influence their food choices in comparison to those who reported 'never/not very often' using this information. Continued delivery and promotion of the FSA and District Council led Calorie Wise

Scheme would help support food businesses to display calories on their menus and provide healthier choices for consumers. To support businesses in calculating the calories in their food and drink and managing allergens, the FSA also provides a free online tool known as 'MenuCal'. NI food businesses can also avail of funding and support from the local regional colleges and Invest NI for food product development which includes the production of healthier food.

Supporting consumers to make healthier choices in the shopping environment

Overall, the results of this survey demonstrate respondents are receptive to foods reduced in fat, sugar and salt when shopping for food. This finding is reflected in the proportion of respondents who would like to see increased availability of food reduced in these nutrients and their willingness to purchase such food. Consumers' willingness to purchase reformulated food should provide the food industry with the confidence to begin or continue reformulating their food products and to communicate the health benefits of such changes to consumers. Reducing the portion size of food has been ranked as one of the most effective interventions to reduce calorie intake (McKinsey Global Institute 2014). However, the results of this survey demonstrate respondents would prefer to purchase food reduced in fat, salt and sugar in comparison to purchasing reduced portion sizes of food high in these nutrients. This result is consistent with the findings of independent research commissioned by the FSA in 2018 to explore NI consumer's perceptions of reformulation. In this research, 76% of respondents indicated they would be more likely to purchase foods reduced in fat and sugar in comparison to 67% of respondents who indicated willingness to purchase food reduced in portion size (Community Research and 2CV 2018). Wave 5 of the EWCB survey also demonstrated female respondents and respondents with children or grandchildren are significantly more likely to buy smaller portions sizes of snack/meals high in sugar, saturated fat and salt in comparison to men and adults without children. This finding highlights the need to continue supporting the food industry to make smaller portions of food more appealing to all consumers and to continue supporting the industry to engage with reformulation.

Providing consumers with simple at a glance information on the key nutritional aspects of food is recognised as an important tool in supporting consumers to better understand the nutritional content of their food and drink (Dana et al. 2019) and encouraging healthier food purchases (Kelly and Jewell 2019). Wave 1- 5 of the EWCB survey demonstrates that recognition of the traffic light label is very high amongst the NI population. Two thirds of respondents in wave 5 also report understanding the traffic light label and using it when shopping for food. This finding would suggest there is scope to further improve respondents understanding of and engagement with this label with this food label. Of the respondents who reported using the label when making food purchasing decisions, a greater proportion are more likely to purchase 'healthier' food as characterized by the traffic light colors 'green' and 'amber' than food with lower calories.

This finding emphasises the important role ‘traffic light’ colours play in helping consumers to make informed healthier choices (World Health Organisation 2014).

The proportion of consumers who use traffic light labelling to source information on fat, sugar and/or salt content has remained consistent throughout all five waves of the survey. Sugar was the most commonly consulted nutrient on traffic light labels in all five waves of the survey. However, at least 40% or more of respondents consulted the calorie, salt and fat information on traffic light labels in wave 5 of the survey. Promoting this finding with food manufacturers may be beneficial in supporting and encouraging participation in reformulation of food high in calories, sugar and salt. The proportion of respondents who consult traffic light labels when shopping online has increased steadily since the first wave of the survey. Approximately one fifth of respondents in waves, 2, 3, 4 and 5 reported using traffic light labelling when shopping online. This finding would suggest there is consumer demand for nutrition information when purchasing food in this forum creating an opportunity to encourage and support retailers to provide this information to consumers.

Wave 5 of the EWCB survey demonstrated 42% of women and 26% of men knew the correct calorie intake for their gender. These findings support continued promotion of the recommended daily calorie intake amongst both genders. The findings of this survey also verified the need to continue prioritising respondents from socially disadvantaged groups when developing nutrition education initiatives, as survey results demonstrated respondents in the ABC1 group are significantly more likely to understand traffic light labels and what is ‘healthier’ compared to respondents in the socioeconomic group C2DE The former group are also less likely to use traffic light labels, significantly less likely to want increased availability of food reduced in fat and sugar when shopping for food and significantly more likely to report they would not like increased availability of healthier options when eating outside the home.

Results from the EWCB survey series indicates awareness of calorie related education messages have declined in the previous three waves of the EWCB survey series. Only 11% of respondents recognised the ‘Know Your Calorie’ image in wave 5 of the survey suggesting additional campaign activity may also be needed to increase the campaign’s reach.

Appendices

Appendix 1: Breakdown of sample by demographics

Table 3. Sample by Age

Age	Achieved surveys	Unweighted sample %	Weighted Number	Weighted sample %
Total	313	100%	313	100%
16-34	93	30%	97	31%
35-54	106	34%	103	33%
55+	114	36%	113	36%

Table 4. Sample by Gender

Gender	Achieved surveys	Unweighted sample %	Weighted Number	Weighted sample %
Total	313	100%	313	100%
Male	144	46%	153	49%
Female	164	52%	159	51%

Table 5. Sample by urban/rural setting

Urban/Rural Setting	Achieved surveys	Unweighted sample %	Weighted Number	Weighted sample %
Total	313	100%	313	100%
Urban	216	69%	203	65%
Rural	97	31%	110	35%

Table 6. Sample by socio-economic group

Socio-economic group	Achieved surveys	Unweighted sample %	Weighted Number	Weighted sample %
Total	313	100%	313	100%
ABC1	175	56%	157	50%
C2DE	138	44%	156	50%

Table 7. Sample by 'Has children or grandchildren'

Has children or grandchildren	Achieved surveys	Unweighted sample %	Weighted Number	Weighted sample %
Total	313	100%	313	100%
Have children/grandchildren	145	46%	144	46%
Do not have	168	54%	169	54%

Table 8. Sample by region in Northern Ireland

Region in NI	Achieved surveys	Unweighted sample %	Weighted Number	Weighted sample %
Total	313	100%	313	100%
Antrim	171	55%	169	54%
Armagh	32	10%	34	11%
Down	58	19%	57	18%
Fermanagh	6	2%	5	2%
Londonderry	32	10%	33	11%
Tyrone	14	4%	14	4%

Appendix 2: Survey questions

Note: This appendix contains the list of questions that were asked during interview. The question number is maintained to match the original survey script and data tables, therefore question numbers may not appear in a logical sequence. Questions are only included in this annex if they are specifically referenced in this report. Therefore additional questions that were in the original survey script have been omitted.

K1: What does healthy eating mean to you?
K3: How much do you agree or disagree with the following statements? (Scale of 1-10. 1=strongly disagree, 10=strongly agree)

- I lead a healthy lifestyle
- Healthy foods are easy to spot in supermarkets
- I find it easy to choose healthier options for my children
- I find it easy to choose healthier options for my grandchildren
- I tend to buy convenient options when shopping (e.g. premade ready meals, pre-packaged snacks)
- I understand what is healthier and what is less healthy
- I actively seek out healthier options when shopping
- I actively seek out healthier options when eating out

K5: What do you think is the government recommended daily average allowance of calories (for men/ for women)?
B1i: How do you tend to find out how much sugar, fat, saturated fat or calories are in a product when shopping?
B2: Overall how well do you understand what the traffic lights on the front of packaging are for? (Scale of 1-10. 1=I don't understand at all, 10=I fully understand)
B1: What do you think these traffic lights are for?
B0: Do you recognise this traffic light image? (Yes/No)
B0a: Do you use this [traffic light image] when shopping for food? (Yes/No)
B3: Thinking about when you are choosing packaged/pre-packed food in a supermarket/shop, how frequently do you do the following? (Never, Rarely, Every now and then, most time, always)

- Look at the colours of traffic light labelling
- Look for the percentage of my recommended daily allowance shown in traffic lights (calories/ sugar/ fat/ saturates/ salt)

B4: And which of these best describes how often you buy these foods? (Never, Rarely, Every now and then, most time, always)

- Food with 'healthier' traffic light colours (green/amber)
- Food with a lower percentage of my recommended daily calorie allowance

B5a: Which of these do you do when buying food for yourself?

- I look at the calories next to the traffic light label
- I use the traffic light label to understand the amount of Fat in food
- I use the traffic light label to understand the amount of Saturated fats in food
- I use the traffic light label to understand the amount of Sugar in food

- I use the traffic light system to understand the amount of Salt in food
- I don’t do any of these

B5b: Which of these do you do when buying food for your children?

- I look at the calories next to the traffic light label
- I use the traffic light label to understand the amount of Fat in food
- I use the traffic light label to understand the amount of Saturated fats in food
- I use the traffic light label to understand the amount of Sugar in food
- I use the traffic light system to understand the amount of Salt in food
- I don’t do any of these

B5c: Which of these do you do when buying food for your grandchildren?

- I look at the calories next to the traffic light label
- I use the traffic light label to understand the amount of Fat in food
- I use the traffic light label to understand the amount of Saturated fats in food
- I use the traffic light label to understand the amount of Sugar in food
- I use the traffic light system to understand the amount of Salt in food
- I don’t do any of these

H1a: Overall, for each of the following, how easy is it for you to choose healthier food and meals? (Very difficult, Quite difficult, Quite easy, Very easy)

- When buying from a supermarket
- When buying from small corner shop
- When eating in a restaurant
- When eating in my work canteen
- When preparing meals at home
- When buying food from a vending machine
- When buying from a cafés/sandwich shop
- When buying from a take-away
- When buying from/eating in a fast food restaurant

H1b: Where would you like to see healthier food?

- Supermarkets
- Small corner shops
- Restaurants
- Work canteen
- Vending machines
- Cafés / Sandwich shops
- Fast food restaurants
- Takeaways
- Other (please specify)
- None of these

H4a: Have you ever noticed calories being shown on a food menu in any of these places?

- Restaurants/bars
- Work canteen
- Cafés / Sandwich shops

- Fast food restaurant
- Takeaways
- Other (please specify)
- None of these

H4b: How often do calories shown on a food menu influence your decision of what to eat? (It never influences my decision, not very often, every now & then, most times, it always influences my decision)

- In restaurants/bars
- In a work canteen
- In cafés / Sandwich shops
- In fast food restaurant
- In takeaways

H4c: Where would you like to see calories being shown on a food menu?

- Restaurants/bars
- Work canteen
- Cafés / Sandwich shops
- Fast food restaurant
- Takeaways
- Other (please specify)
- None of these

H1: How do you feel about each of these being available to you when shopping? (e.g. for sauces, cereals, meals, snacks & puddings) (Scale of 1-5. 1=very negative, 5=very positive)

- Reduced sugar food
- Reduced fat food
- Reduced salt food
- A maximum limit on calories for foods which are high in fat, sugar or salt (e.g. chocolate bars, sweets, slices of cake, croissants, biscuits, crisps)
- Smaller portion sizes of sugary snacks / meals
- Smaller portion sizes of snacks / meals high in saturated fat
- Smaller portion sizes of snacks / meals high in salt

H2: How likely would you be to buy these options compared to a regular version of food? (e.g. for sauces, cereals, meals, snacks & puddings) (Scale of 1-5. 1=much less likely to buy it, 5= much more likely to buy it)

- Reduced sugar food
- Reduced fat food
- Reduced salt food
- Food with a maximum limit on calories (e.g. chocolate bars, sweets, slices of cake, croissants, biscuits)
- Smaller portion sizes of sugary snacks / meals
- Smaller portion sizes of snacks / meals high in saturated fat
- Smaller portion sizes of snacks / meals high in salt

H3: Which, if any, would you like to see more of when you buy food?

- Reduced sugar food

- Reduced fat food
- Reduced salt food
- Food with a maximum limit on calories (e.g. chocolate bars, sweets, slices of cake, croissants, biscuits)
- Smaller portion sizes of sugary snacks / meals
- Smaller portion sizes of snacks / meals high in saturated fat
- Smaller portion sizes of snacks / meals high in salt
- None of these

CQ1: Have you seen or heard any communications about Calories recently (e.g. messages from companies on TV, posters, billboards, on social media or on the radio)? (Yes/No)

CQ2: What do you remember seeing or hearing? What was it talking about? Please explain in as much detail as possible.

CQ3: Who do you think the communications were from?

- A food brand
- The government
- A charity
- A retailer
- A restaurant/café
- A weight watcher / slimming brand
- Other (please specify)

CQ4: Have you seen any of the following communications before today? (Yes/No/Don't know)

CQ5: Where did you see these communications?

- On social media (e.g. Twitter, FB, Instagram)
- On TV
- On outdoor screens or posters
- In a newspaper
- In a shop
- Videos online
- On a website
- I don't know
- Somewhere else (please specify)

Appendix 3: Examples of public communications related to calories

Appendix 4: List of figures

Appendix 5: List of tables

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