

Food Hygiene Rating Scheme (FHRS)

Food and You 2: Wave 2



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Executive Summary

Overview of Food and You 2

Food and You 2 is a biannual representative sample survey, recognised as an official statistic, commissioned by the Food Standards Agency (FSA). The survey measures self-reported consumer knowledge, attitudes and behaviours related to food safety and other food issues amongst adults in England, Wales, and Northern Ireland. Food and You 2 uses a methodology, known as 'push-to-web', which is primarily carried out online. Fieldwork for Food and You 2: Wave 2 was conducted between 25th November 2020 and 21st January 2021. A total of 5,900 adults from 3,955 households across England, Wales and Northern Ireland completed the survey.

This survey was conducted during the Covid-19 pandemic and so it records the reported attitudes and behaviours under unusual circumstances which have had a significant impact on how and where people buy and eat food.

Overview of FHRS

The Food Hygiene Rating Scheme (FHRS) helps people make informed choices about where to eat out or shop for food by giving clear information about businesses' hygiene standards. Ratings are typically given to places where food is supplied or sold, including restaurants, pubs, cafés, takeaways, food vans and stalls.

The Food Standards Agency runs the scheme in partnership with local authorities in England, Wales and Northern Ireland. Businesses are given a food hygiene rating from 0 to 5. A rating of 5 indicates that hygiene standards are very good and a rating of 0 indicates that urgent improvement is required. Food businesses are provided with a sticker which shows their FHRS rating. In England businesses are encouraged to display their FHRS rating, however in Wales and Northern Ireland food businesses are legally required to display their FHRS rating. FHRS ratings are also available on the FSA ratings website.

Key Findings

Awareness and recognition of the FHRS

- Most respondents (87%) reported that they had heard of the Food Hygiene Rating Scheme (FHRS). The proportion of respondents who had heard of the FHRS was comparable across England (86%), Wales (92%), and Northern Ireland (90%)**¹. However, respondents in Wales (65%) and Northern Ireland (57%) were more likely to report knowledge of the FHRS than those in England (46%).
- Of those who had heard of the FHRS, the most common place respondents had come across the FHRS was a food hygiene rating sticker displayed at a food business (83%).
- Of those who had heard of the FHRS, over a third (36%) of respondents had come across the FHRS on a food business' website.
- When shown an image of the food hygiene rating sticker, 90% of respondents reported that they had seen the sticker before. Recognition of the food hygiene rating sticker was slightly lower in England (89%) than in Wales (96%) and Northern Ireland (96%)**.

Understanding and use of FHRS

- Of those who had heard of the FHRS, approximately half (51%) of respondents had checked the food hygiene rating of a food business in the previous 12 months (either at the business premises or online). Respondents in Wales (64%) and Northern Ireland (60%) were more likely to have checked the food hygiene rating of a business than those in England (50%).
- Of those who have checked the food hygiene rating of a food business, most had checked the food hygiene rating of takeaways (70%) and restaurants (64%).

¹ See 'Interpreting the findings' for an explanation of '**'.

- Of those who have checked the food hygiene rating of a food business, most had checked the rating by looking at the food hygiene rating sticker displayed at the food business (78%).
- Respondents who had checked the food hygiene rating of a business were asked how they had checked the rating. Most (78%) respondents had looked at the food hygiene rating sticker displayed at the food business.

Use of the FHRS in decision making

- Of those who had heard of the FHRS, most respondents said they would still eat at a restaurant or takeaway if they saw a food hygiene rating sticker with a rating of 4 (good) (95%) or 3 (generally satisfactory) (63%).
- Respondents were asked what they would usually consider the lowest acceptable food hygiene rating when considering buying food from somewhere. Over 4 in 10 respondents would consider a rating of 4 (good) (41%) as the lowest acceptable rating and 43% of respondents would consider 3 (generally satisfactory),
- Of those who had heard of the FHRS, two-thirds (66%) of respondents could not think of a situation in which they might decide to buy food from a food business with a rating which is lower than their lowest acceptable rating.
- Of those who had heard of the FHRS, most respondents (60%) could think of a situation in which they would only buy food from a food business with a rating which is higher than their lowest acceptable rating.
- Of those who had heard of the FHRS, most respondents (61%) would be less likely (i.e. 'much less likely' or 'a little less likely') to eat at a food business that did not have the food hygiene rating sticker present at the entrance.

Views on mandatory display

 Of the respondents who had heard of the FHRS, 95% thought that food businesses should be required by law to display their food hygiene rating at their premises. • Of the respondents who had heard of the FHRS, 95% thought that businesses providing an online food ordering service should display their food hygiene rating where it can clearly be seen by customers before they order food.

Introduction

The Food Standards Agency: role, remit, and responsibilities

The Food Standards Agency (FSA) is an independent Government department working to protect public health and consumers' wider interests in relation to food in England, Wales, and Northern Ireland². The FSA's overarching mission is 'food we can trust'. The FSA's goal and vision is to ensure that food is safe, and food is what it says it is, such that consumers can make informed choices about what to eat. In Northern Ireland, the FSA is responsible for nutrition policy and has the additional goal to ensure that consumers have access to an affordable diet, now and in the future.

Food and You 2 is designed to monitor the FSA's progress against these goals and inform policy decisions by measuring self-reported consumers' knowledge, attitudes and behaviours related to food safety and other food issues in England, Wales, and Northern Ireland on a regular basis.

Introduction to FHRS

<u>The Food Hygiene Rating Scheme³</u> (FHRS), which operates in England, Wales and Northern Ireland was launched in 2010 and helps people make informed choices about where to eat out or shop for food by giving clear information about the businesses' hygiene standards. Ratings are given to places where food is supplied or sold directly to people, such as restaurants, pubs, cafés, takeaways, hotels, schools, hospitals, care homes, supermarkets and other retailers. In Wales, the scheme also includes businesses that trade only with other businesses, for example, manufacturers.

² In Scotland, the non-ministerial office Food Standards Scotland, is responsible for ensuring food is safe to eat, consumers know what they are eating and improving nutrition.

³ A similar scheme, the Food Hygiene Information Scheme operates in Scotland

The Food Standards Agency runs the scheme in partnership with local authorities in England, Wales and Northern Ireland. A food safety officer from the local authority inspects a business to check that it follows food hygiene law so that the food is safe to eat. Businesses are given a rating from 0 to 5. A rating of 5 indicates that hygiene standards are very good and a rating of 0 indicates that urgent improvement is required.

Food businesses are provided with a sticker which shows their rating. In England businesses are encouraged to display their rating, however in Wales and Northern Ireland food businesses are legally required to display their rating⁴. Ratings are also available on the <u>FSA ratings website</u> and via other third-party apps.

This report presents key findings from the Food and You 2: Wave 2 survey relating to the FHRS, including respondents' awareness, recognition and use of the FHRS, understanding and impact of the FHRS on behaviour and attitudes toward the FHRS. Not all questions asked in the Food and You 2: Wave 2 survey are included in the report. The full results are available in the accompanying <u>data tables and underlying dataset</u>.

Food and You 2

Ipsos MORI were commissioned by the FSA to develop and run a biannual survey, 'Food and You 2', carried out primarily online. Food and You 2 replaces the FSA's face-to-face Food and You survey (2010-2018)⁵, Public Attitudes Tracker (2010-2019) and <u>Food</u> <u>Hygiene Rating Scheme (FHRS) - Consumer Attitudes Tracker</u> (2014-2019). Food and You 2: Wave 2 is the first wave of data collection to include questions relating to the FHRS. Due to differences in the question content, presentation and mode of response, direct comparisons should not be made between these earlier surveys and Food and You 2. More information about the history and methodology can be found in Annex A.

⁴ Legislation for the mandatory display of FHRS ratings was introduced in November 2013 in Wales and October 2016 in Northern Ireland.

⁵ The Food and You survey has been an Official Statistic since 2014.

Fieldwork for Food and You 2: Wave 2 was conducted between 20th November 2020 and 21st January 2021. A total of 5,900 adults from 3,955 households across England, Wales, and Northern Ireland completed the survey (an overall response rate of 28%).

Interpreting the findings

To highlight the key differences between socio-demographic and other sub-groups, variation in response profiles are typically reported only where the absolute difference is 10 percentage points or larger and is statistically significant at the 5% level (p<0.05). However, some differences between socio-demographic and other sub-groups are included where the difference is fewer than 10 percentage points, when the finding is notable or judged to be of interest. These differences are indicated with a double asterisk (**).

The report presents trends between some socio-demographic and sub-groups in the population. In some cases, it was not possible to include the data of all sub-groups, however these data are available in the <u>full data set and tables</u>.

Key information is provided for each reported question in the footnotes, including:

- Question wording (question) and response options (responses).
- Number of respondents presented with each question and description of the respondents who answered the question (base =).
- Please note: indicates important points to consider when interpreting the results.

Chapter 1: Awareness and recognition of the FHRS

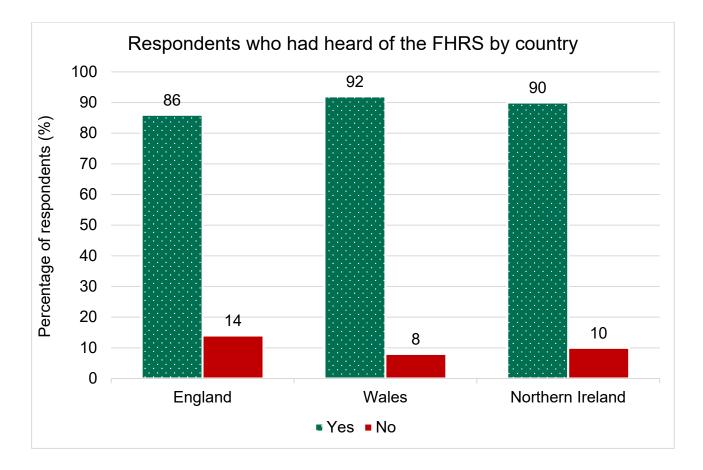
This chapter will provide an overview of respondents' awareness and recognition of the Food Hygiene Rating Scheme (FHRS).

Awareness of the FHRS

Most respondents (87%) reported that they had heard of the FHRS. Almost half of respondents (47%) reported that they had heard of the FHRS and knew a lot or a bit about it. Four in ten (40%) respondents reported that they had heard of the FHRS but didn't know much or anything about it. Over 1 in 10 respondents (13%) reported that they had not heard of the FHRS⁶.

⁶ Question: Have you heard of the Food Hygiene Rating Scheme? Responses: Yes, I've heard of it and know quite a lot about it, Yes, I've heard of it and know a bit about it, Yes, I've heard of it but don't know much about it, Yes, I've heard of it but don't know anything about it, No, I've never heard of it. Base = 4850, all online respondents and those answering the Eating Out postal questionnaire. Please note: 'Yes, I've heard of it and know quite a lot about it', 'Yes, I've heard of it and know a bit about it', 'Yes, I've heard of it and know a bit about it' and 'Yes, I've heard of it but don't know much about' it referred to as having knowledge of FHRS.

Figure 1. A comparable proportion of respondents in England, Wales, and Northern Ireland had heard of the FHRS.



Source: Food and You 2: Wave 2

The proportion of respondents who had heard of the FHRS was comparable across England (86%), Wales (92%), and Northern Ireland (90%) (Figure 1)**. However, respondents in Wales (65%) and Northern Ireland (57%) were more likely to report knowledge of the FHRS than those in England (46%).

Awareness and knowledge of the FHRS varied between different groups of people:

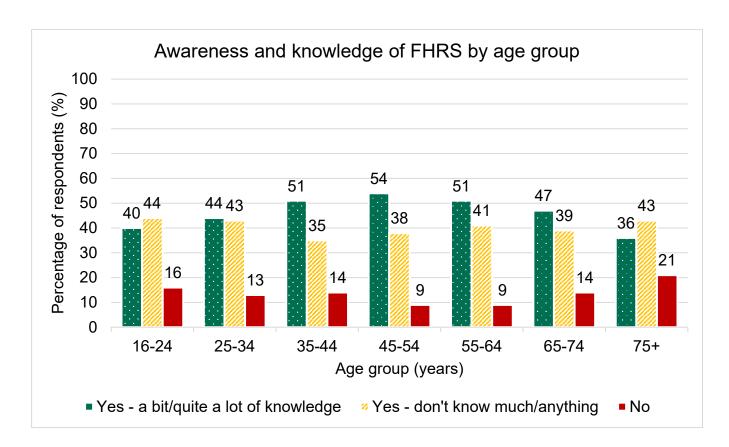


Figure 2. Adults aged between 35 and 64 years were more likely to have at least some knowledge of the FHRS

Respondents aged between 35 and 64 years were more likely to have at least some knowledge of the FHRS than the youngest or oldest respondents. For example, 54% of those aged 45-54 years reported knowledge of the FHRS, compared to 40% of those aged 16-24 years and 36% of those aged 75 years or over (Figure 2).

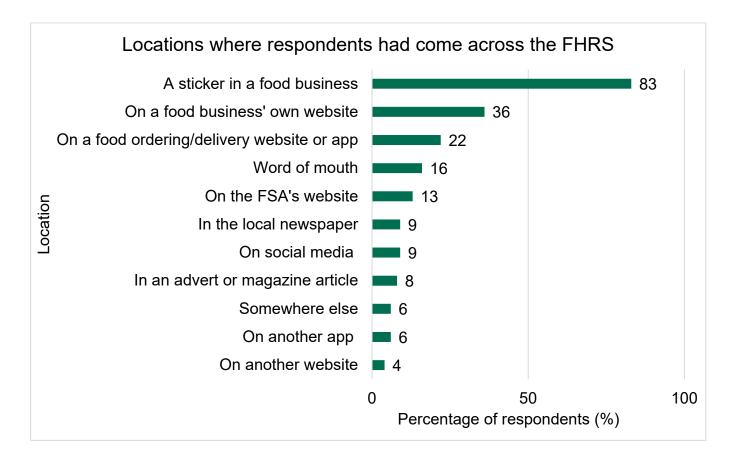
Awareness and knowledge of the FHRS also varied between different groups of people:

Annual household income: respondents with an income between £32,000 and £95,999 (for example, 54% of those with an income of £64,000-£95,999) were more likely to report knowledge of the FHRS compared to those with the lowest (42% of those with an income of less than £19,000) or highest income band (42% of those with an income of more than £96,000).

Source: Food and You 2: Wave 2

- <u>National Statistics Socio-Economic Classification</u> (NS-SEC): respondents in many occupational groups (for example, 51% of those in semi-routine and routine occupations) were more likely to report knowledge of the FHRS than those who were long term unemployed and/or never worked (34%) or full-time students (37%).
- Ethnic group: white respondents (49%) were more likely to report knowledge of the FHRS than Asian or Asian British respondents (36%).
- Responsibility for cooking: respondents who were responsible for cooking (48%) were more likely to report knowledge of the FHRS than those who do not cook (27%).

Figure 3. Most respondents had come across the FHRS via a sticker in a food business.

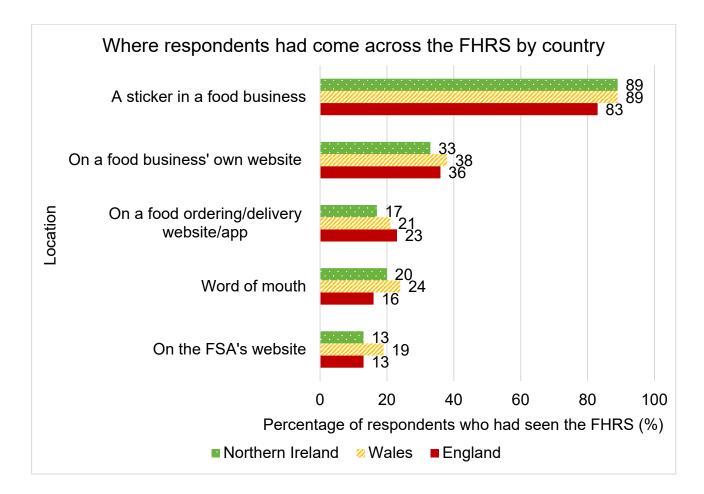


Source: Food and You 2: Wave 2

Respondents were asked where they had come across the Food Hygiene Rating Scheme. The most common place respondents had come across the FHRS was a food hygiene rating sticker displayed at a food business (83%). Over a third (36%) of respondents had come across the FHRS on a food business' website and 22% had come across the FHRS on a food ordering and/or delivery website and/or app (for example, Just Eat, Deliveroo, UberEats) (Figure 3)⁷.

⁷ Question: Where have you come across the Food Hygiene Rating Scheme? Responses: A sticker in a food business, On a food business' own website (such as a restaurant website), On a food ordering/delivery website or app (such as Just Eat, Deliveroo, UberEats etc.), Word of mouth, On the Food Standards Agency's website, In the local newspaper, On social media (e.g. Twitter, Facebook Marketplace), In an advert or magazine article, On another app (e.g. Scores on the Doors Food Hygiene Rating) (please specify), On another website, Somewhere else. Base = 4376, all online respondents and all those who completed the Eating Out paper questionnaire who have heard of the Food Hygiene Rating Scheme. Please note: Percentages do not add up to 100% as multiple responses could be selected.

Figure 4. Most respondents had seen a food hygiene rating sticker displayed at a food business.



Source: Food and You 2: Wave 2

Most respondents in England (83%), Wales (89%) and Northern Ireland (89%) had come across the Food Hygiene Rating Scheme via a sticker in a food business (Figure 4)**.

Recognition of the FHRS

When shown an image of the food hygiene rating sticker, 9 in 10 (90%) respondents reported that they had seen the food hygiene rating sticker before. Recognition of the

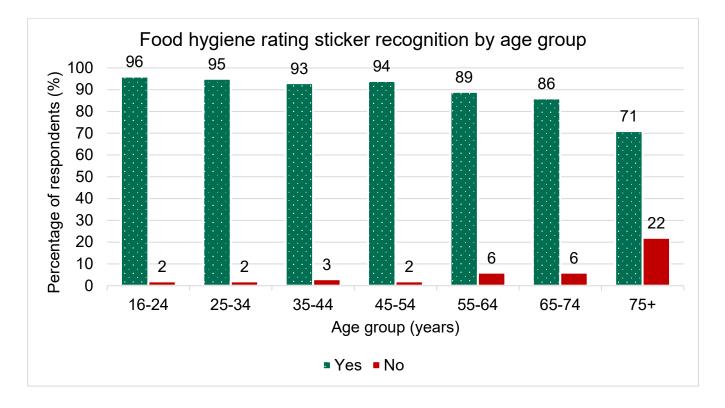
food hygiene rating sticker was slightly lower in England (89%) than in Wales (96%) and Northern Ireland $(96\%)^{8**}$.



Recognition of the food hygiene rating sticker varied between different types of people.

⁸ Question: Have you ever seen this sticker before? Responses: Yes, No, Don't know / Not sure. Base = 4850, all online respondents and those answering the Eating Out postal questionnaire.

Figure 5. Younger adults were more likely to have seen the food hygiene rating sticker than older adults.



Source: Food and You 2: Wave 2

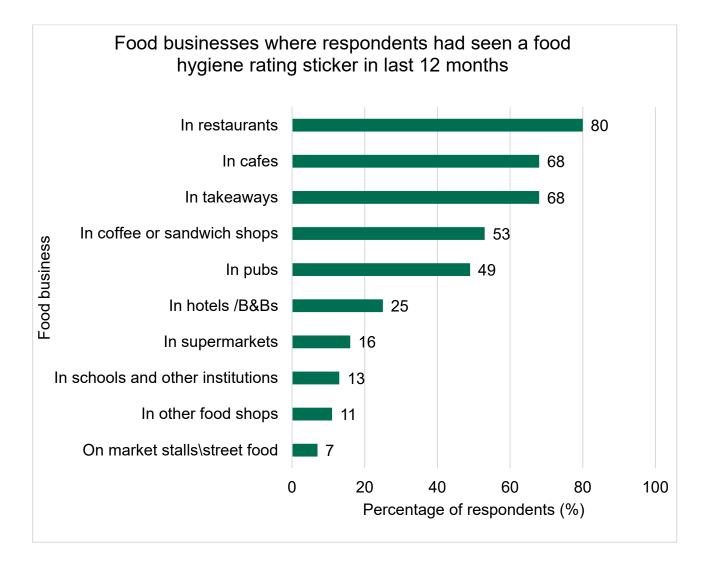
Younger adults were more likely to have seen the food hygiene rating sticker than older adults. For example, 96% of respondents aged 16-24 years reported that they had seen the food hygiene rating sticker, compared to 71% of those aged 75 years and over (Figure 5).

Recognition of the food hygiene rating sticker also varied between different types of people:

- NS-SEC: respondents in occupational groups (for example, 92% of those in semiroutine and routine occupations) and full-time students (94%) were more likely have seen the food hygiene rating sticker than those who were long term unemployed and/or never worked (77%).
- Responsibility for cooking: respondents who were responsible for cooking (93%) were more likely to have seen the food hygiene rating sticker than those who do not cook (82%).

- Ethnic group: white respondents (91%) were more likely to have seen the food hygiene rating sticker than Asian or British Asian respondents (81%).
- Eaten out or ordered takeaway: respondents who had eaten out or ordered takeaway in the last 4 weeks (93%) were more likely to have seen the food hygiene rating sticker than those who had not (81%).

Figure 6. Most respondents had seen the food hygiene rating sticker in a restaurant in the last 12 months.



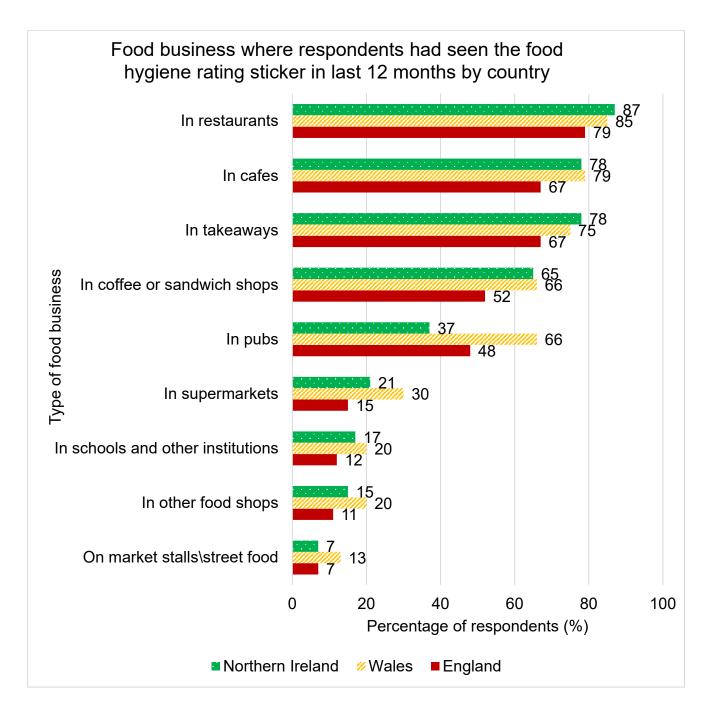
Source: Food & You 2: Wave 2

Respondents were asked where they had seen the food hygiene rating sticker in the last 12 months. Most respondents had seen the sticker in restaurants (80%), in takeaways

(68%) or in cafés (68%). In addition, 4% of respondents had not seen the food hygiene rating sticker at a food business in the last 12 months (Figure 6)⁹.

⁹ Question: In which, if any, of the following have you seen this sticker in over the last 12 months? Responses: In restaurants, In cafes, In takeaway, In coffee or sandwich shops, In pubs, In hotels/B&Bs, In supermarkets, In schools or other institutions, On market stalls/street food, Manufacturers (Business-to-Business traders) (Wales only), In other food shops, Somewhere else, I have not seen this sticker in a food business in the last 12 months. Base= 4488, all online respondents and all those who completed the 'Eating Out' paper questionnaire, who have seen the FHRS sticker.

Figure 7. Respondents in Wales and Northern Ireland were more likely to have seen the food hygiene rating sticker in cafés than those in England.



Source: Food & You 2: Wave 2

Most respondents had seen the food hygiene rating sticker in restaurants in England (79%), Wales (85%) and Northern Ireland (87%)**. Respondents in Wales (79%) and Northern Ireland (78%) were more likely to have seen the food hygiene rating sticker in cafés than those in England (67%). Respondents in Wales (66%) were more likely to

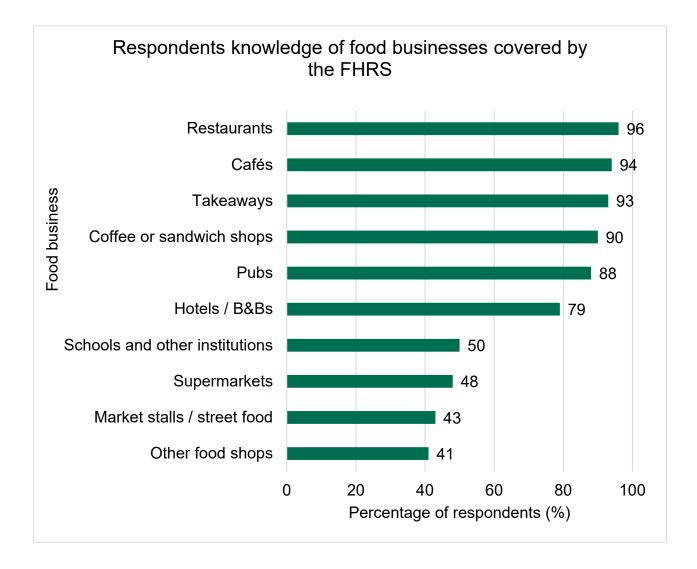
have seen the food hygiene rating sticker in pubs than those in England (48%), and Northern Ireland (37%) (Figure 7).

Chapter 2: Understanding and use of FHRS

This chapter will provide an overview of respondents' understanding and use of the Food Hygiene Rating Scheme (FHRS).

Understanding of FHRS

Figure 8. Most respondents were aware that restaurants, cafés, takeaways, coffee or sandwich shops and hotels or pubs are covered by the FHRS.



Source: Food & You 2: Wave 2

Respondents were asked which types of food businesses, from a given list, they thought were covered by the FHRS. Most respondents thought that restaurants (96%), cafés (94%), takeaways (93%), coffee or sandwich shops (90%), pubs (88%) and hotels or B&Bs (79%) were covered by the FHRS. Half of respondents (50%) thought that schools and other institutions were covered by the FHRS. Less than half of respondents thought that supermarkets (48%), and market or street food stalls (43%) were covered by the FHRS (Figure 8)¹⁰.

Use of FHRS

Respondents who had heard of the FHRS were asked if they had checked the food hygiene rating of a food business in the previous 12 months (either at the business premises or online) regardless of whether they decided to buy food there or not. Approximately half (51%) of respondents had checked the food hygiene rating of a food business in the previous 12 months¹¹.

Respondents in Wales (64%) and Northern Ireland (60%) were more likely to have checked the food hygiene rating of a business than those in England (50%).

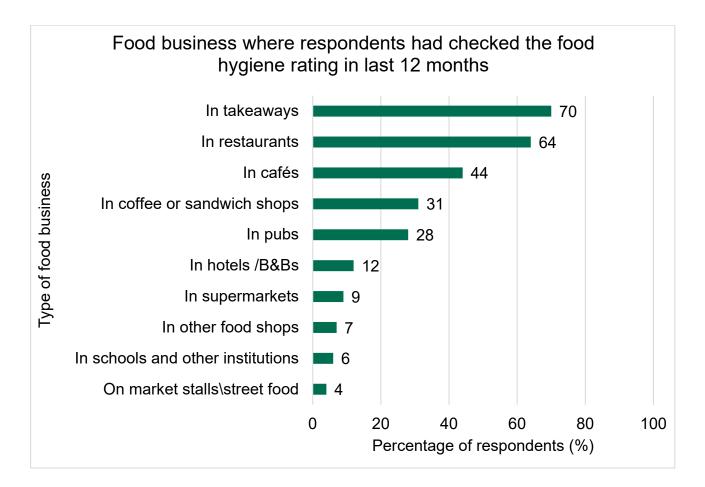
Checking of food hygiene ratings varied between different groups of people:

¹⁰ Question: Which of the following do you think are covered by the Food Hygiene Rating Scheme? Responses: restaurants, cafes, takeaways, coffee or sandwich shops, pubs, hotels/B&Bs, supermarkets, schools or other institutions, market stalls/street food, Manufacturers (Business-to-Business traders) (Wales only), other food shops, other. Base = 4376, all online respondents and all those who completed the 'Eating Out' paper questionnaire who have heard of the Food Hygiene Rating Scheme.

¹¹ Question: In the last 12 months, have you checked the hygiene rating of a food business? You may have checked a rating at the business premises, online, in leaflets or menus whether or not you decided to purchase food from there. Responses: Yes, I have checked the Food Hygiene Rating of a food business, No, I have not checked the Food Hygiene Rating of a food business, Don't know. Base = 4376, all online respondents and those answering the Eating Out postal questionnaire who had heard of the FHRS.

- Age group: younger respondents were more likely to have checked a food hygiene rating of a business than older adults. For example, 60% of those aged 16-24 years had checked the food hygiene rating of a business compared to 42% of those aged 75 years and over.
- Annual household income: respondents in most income brackets below £96,000 (for example, 58% of those with an income of £32,000 £63,999) were more likely to have checked the food hygiene rating of a business compared to those with an income above £96,000 (40%).
- NS-SEC: full-time students (63%) were more likely to have checked the food hygiene rating of a business than respondents in all other occupational groups (for example, 45% of those in small employers and own account workers) and those who were long term unemployed and/or had never worked (47%).
- Ethnic group: Asian or British Asian respondents (64%) were more likely to have checked the food hygiene rating of a business than white respondents (50%).
- Responsibility for cooking: respondents who were responsible for cooking (50%) were more likely to have checked the food hygiene rating of a business than those who do not cook (35%).
- Eaten out or ordered takeaway: respondents who had eaten out or ordered a takeaway in the last 4 weeks (55%) were more likely to have checked the food hygiene rating of a business than those who had not (36%).

Figure 9. Most respondents had checked the food hygiene rating of takeaways in the last 12 months.

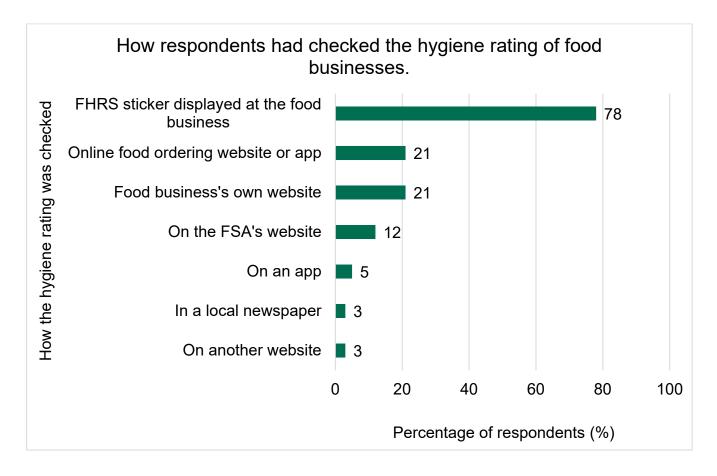


Source: Food & You 2: Wave 2

Respondents who had checked the food hygiene rating of a business were asked which types of food businesses they had checked the hygiene ratings for in the last 12 months. Most respondents had checked the food hygiene rating of takeaways (70%) and restaurants (64%). Less than half of respondents (44%) had checked the food hygiene rating of cafés, 31% had checked coffee or sandwich shops and 28% had checked the

rating of pubs. Respondents were least likely to check the food hygiene rating of market or street food stalls (4%) (Figure 9)¹².

Figure 10. Most respondents had seen the rating on a food hygiene rating sticker displayed at the food business.



Source: Food & You 2: Wave 2

Respondents who had checked the food hygiene rating of a business were asked how they had checked the rating. Most (78%) respondents had looked at the food hygiene

¹² Question: In which of the following kinds of food businesses have you checked the hygiene ratings in the last 12 months? Responses: In restaurants, In cafes, In takeaway, In coffee or sandwich shops, In pubs, In hotels/B&Bs, In supermarkets, In schools or other institutions, On market stalls/street food, Manufacturers (Business-to-Business traders) (Wales only), In other food shops, Somewhere else, Don't know. Base = 2346, all online respondents and those answering the Eating Out postal questionnaire who have checked the Food Hygiene Rating of a food business.

rating sticker displayed at the food business. Approximately 1 in 5 (21%) of respondents had checked via an online food ordering website or app (for example, JustEat, Deliveroo, UberEats), 21% had checked the food hygiene rating of a business on a food business's own website, and 12% of respondents had checked on the Food Standards Agency's website (Figure 10)¹³.

Respondents in Wales (88%) and Northern Ireland (86%) were more likely to have checked the hygiene rating of a food business via a food hygiene rating sticker displayed at the business compared to those in England (77%). In contrast, respondents in England (22%) were more likely to have checked the hygiene rating of a food business via an online food ordering website or app than those in Northern Ireland (12%) or Wales (16%)**.

How the hygiene rating of a food business was checked varied between different groups of people:

Age group: adults over 45 years (for example, 83% of those aged 45-54 years) were more likely to have checked the hygiene rating via an food hygiene rating sticker displayed at the business than adults aged 16-24 years (72%) or 35-44 years (72%). In contrast, adults under 45 years (for example, 34% of those aged 25-34 years) were more likely to have checked the hygiene rating of a food business via an online food ordering website or app (for example, JustEat, Deliveroo, UberEats) than adults aged 45 or over (for example, 5% of those aged 75 years or over).

¹³ Question: How did you check these ratings? Responses: I looked at an FHRS sticker displayed at the food business (such as in a business' window or on the door), I checked an online food ordering website or app (for example, JustEat, Deliveroo, UberEats), I checked the food business' own website, I checked on the Food Standards Agency's website, I checked on an app (for example, Scores on the Doors Food Hygiene Rating), I checked in a local newspaper, I checked on another website, Other, Don't know. Base = 2346, all online respondents and those answering the Eating Out postal questionnaire who have checked the food hygiene rating of a food business.

- Food security¹⁴: respondents with marginal (27%), low (29%) or very low food security (32%) were more likely to have checked the hygiene rating of a food business via an online food ordering website or app than those with high food security (18%).
- Eaten out or ordered takeaway: respondents who had eaten out or ordered a takeaway in the last 4 weeks (23%) were more likely to have checked the hygiene rating of a food business via an online food ordering website or app than those who had not (8%).

FHRS usage when eating out or buying takeaway

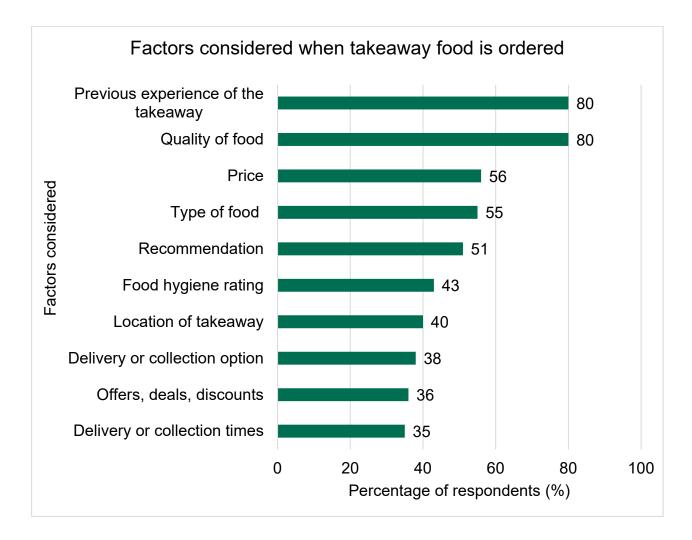
Respondents were asked which factors, from a given list of responses, they generally considered when deciding where to eat out or order a takeaway from.¹⁵

¹⁴ The definition of food security and measures used are described in the Technical Terms and Definition section of the report.

¹⁵ Including takeaway ordered directly from a takeaway shop or restaurant or via an online food delivery company.

Factors considered when ordering a takeaway

Figure 11. Previous experience of the takeaway and quality of the food were most often considered when deciding where to order a takeaway from.



Source: Food & You 2: Wave 2

Of those who had ordered food from a takeaway, the factors most commonly considered when deciding where to order from were, the respondents' previous experience of the takeaway (80%) and the quality of food (80%). Forty-three percent of respondents

considered the food hygiene rating when deciding where to order a takeaway from (Figure 11)¹⁶.

Respondents in Wales (52%) were more likely to consider the food hygiene rating when ordering takeaways compared to those in Northern Ireland (45%) or England (42%).

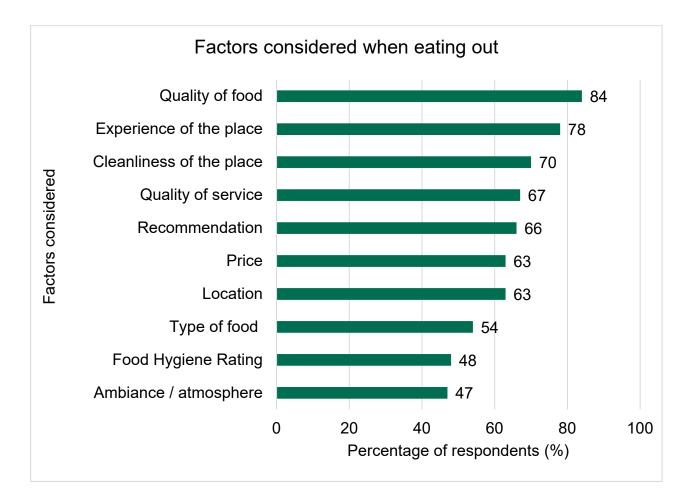
Consideration of the food hygiene rating when deciding where to order a takeaway varied between different groups of people:

- Age group: most age groups below 75 years (for example, 47% of those aged 65-74 years) were more likely to consider the food hygiene rating when ordering takeaways compared to adults aged 75 years or over (34%).
- Annual household income: respondents with an income below £96,000 (for example, 50% of those with an income below £19,000) were more likely to consider the food hygiene rating when ordering takeaways compared to those with an income above £96,000 (28%).

¹⁶ Question: Generally, when ordering food from takeaways (either directly from a takeaway shop or restaurant or from an online food delivery company like Just Eat, Uber Eats or Deliveroo) what do you consider when deciding where to order from. Responses: My previous experience of the takeaway, Quality of food, Price (including cost of delivery), Type of food (for example, cuisine or vegetarian/vegan options), Recommendations from family or friends, Food Hygiene Rating, Location of takeaway, Whether there is a delivery or collection option, Offers, deals or discount available, Delivery/ collection times, Whether food can be ordered online for example, through a website or app, Reviews for example, on TripAdvisor, Google, social media, or in newspapers and magazines , Whether it is an independent business or part of a chain , Whether healthier options are provided, Whether allergen information is provided, Whether information about calories is provided, None of these, Don't know. Base= 4101, all online respondents and those answering the Eating Out postal questionnaire, who order takeaways.

Factors considered when eating out

Figure 12. Quality of food and previous experience of the place were the factors most often considered when deciding where to eat.



Source: Food & You 2: Wave 2

Of those who eat out, the factors most commonly considered when deciding where to eat were the quality of food (84%) and the respondents' previous experience of the place

(78%). Almost half (48%) of respondents considered the food hygiene rating when deciding where to eat (Figure 12)¹⁷.

Respondents were asked how often they checked the food hygiene rating of a business upon arrival. Over 1 in 10 (12%) reported that they always checked the food hygiene rating of a business on arrival, 24% of respondents reported that they did this most of the time and 34% of respondents did this less often (i.e. 'about half the time' or 'occasionally'). Over a quarter (27%) of respondents reported that they never checked the food hygiene rating of a business upon arrival¹⁸.

How often respondents checked the food hygiene rating of a business upon arrival varied between different groups of people:

• Annual household income: respondents with an income below £19,000 (17%) were more likely to always check the food hygiene rating of a business upon

¹⁷ Question: Generally, when you eat out, what do you consider when deciding where to go? Please think about eating out in restaurants, pubs/ bars, and cafés/coffee shops/ sandwich shops. Responses: Quality of food, My previous experience of the place, Cleanliness of the place, Quality of service, Recommendations from family or friends, Price, Location, Type of food (for example, cuisine or vegetarian/vegan options), Food Hygiene Rating, Ambiance / atmosphere, Offers, deals or discount available, Reviews e.g. on TripAdvisor, Google, social media, or in newspapers and magazines, Whether it is an independent business or part of a chain, Whether healthier options are available, Whether the place is child-friendly, Whether allergen information is provided, Whether information about calories is provided, None of these, Don't know. Base = 4672, all online respondents and those answering the 'Eating Out' paper questionnaire, who eat out. ¹⁸ Question: When arriving at a restaurant or takeaway, how often, if at all, do you check a food business' hygiene rating upon arrival? Responses: I always check on arrival, I do this most of the time, I do this about half the time, I do this occasionally, I never check on arrival, Don't know. Base = 4272, all online respondents and those who completed the 'Eating Out' paper questionnaire, who said how they checked the food hygiene rating of a food business, excluding 'I don't eat at restaurants or order food from takeaways'.

arrival than those with an income above $\pounds 64,000$ (for example, 1% of those with an income of $\pounds 64,000 - \pounds 95,999$).

- Respondents in Wales (25%) were more likely to always check the food hygiene rating of a business upon arrival than those in England (11%), almost 1 in 5 (17%) of respondents in Northern Ireland reported that they always did this**.
- Food security: respondents with low (20%) or very low food security (22%) were more likely to always check the food hygiene rating of a business upon arrival than those with marginal (12%) or high food security (10%).

Chapter 3: Use of the FHRS in decision making

This chapter will provide an overview of how people use the FHRS in deciding where to eat out or buy food.

Acceptable food hygiene ratings

Figure 13. Most respondents would eat at a restaurant or takeaway with a food hygiene rating of 3 or 4.



Source: Food & You 2: Wave 2

Respondents were asked to consider whether they would still eat or order food from a restaurant or takeaway if on arrival they saw a food hygiene rating sticker with a rating

lower than the maximum rating of 5 (very good). Most respondents said they would still eat at a restaurant or takeaway if they saw a food hygiene rating sticker with a rating of 4 (good) (95%) or 3 (generally satisfactory) (63%). However, most respondents reported that they would not eat at a restaurant or takeaway if they saw a food hygiene rating sticker with a rating of 2 (improvement necessary) (80%), 1 (major improvement necessary) (94%) or 0 (urgent improvement necessary) (95%) (Figure 13)¹⁹.

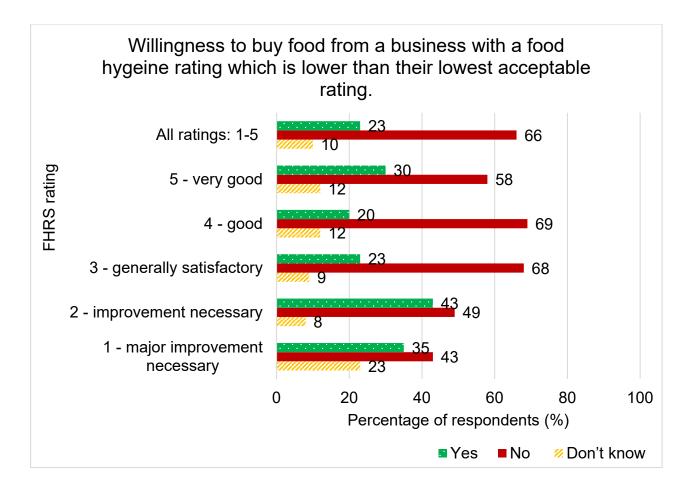
Respondents were asked what they would usually consider the lowest acceptable food hygiene rating when considering buying food from somewhere. Less than 1 in 10 (8%) respondents would only consider a rating of 5 (very good) as the lowest acceptable rating. Over 4 in 10 respondents would consider a rating of 4 (good) (41%) as the lowest acceptable rating, 43% of respondents would consider 3 (generally satisfactory), 4% of respondents would consider 3 (improvement necessary and 4% would consider 2 (improvement necessary) as the lowest acceptable rating. Approximately 1 in 100 (1%) respondents would consider a rating of 1 – major improvement necessary and 1% would consider a rating of 0 – urgent improvement necessary as the lowest acceptable rating²⁰.

¹⁹Question: For each of the following hygiene ratings, please state whether you would still eat at the restaurant or takeaway on seeing the rating, or whether you would decide not to eat at the restaurant or takeaway. Responses: I would still eat at the restaurant / takeaway, I would not eat at the restaurant / takeaway, Don't know. Base= see FHRS11_rebased Summary Table for base numbers, all online respondents and those answering the 'Eating Out' paper questionnaire who have heard of the Food Hygiene Rating Scheme.

²⁰ Question: From a rating of 0 to 5, what is the lowest rating you would usually consider acceptable, if you were considering buying food from somewhere? Responses: 0 - urgent improvement necessary, 1 - major improvement necessary, 2 - improvement necessary, 3 - generally satisfactory, 4 – good, 5 - very good, Don't know. Base= 4646, all online respondents and those answering the 'Eating Out' paper questionnaire, excluding 'I do not usually notice the rating when I go into a food business'.

Situations which impact acceptable food hygiene ratings

Figure 14. Two-thirds of respondents would not buy food from a business with a food hygiene rating which is lower than their usual lowest acceptable rating.

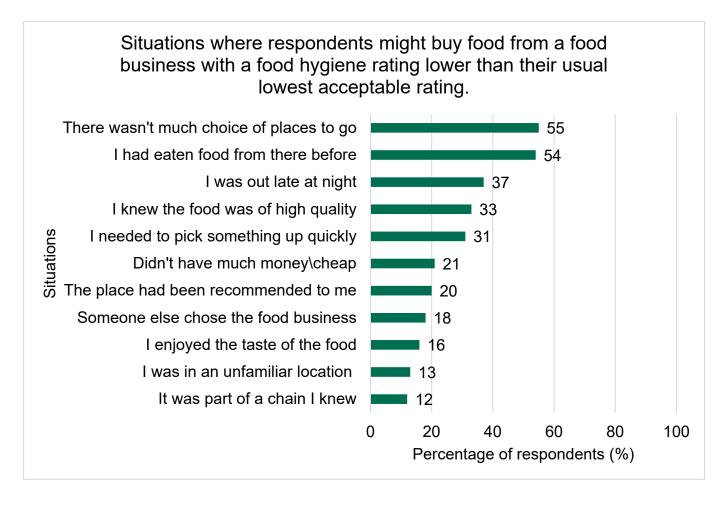


Source: Food & You 2: Wave 2

Respondents were asked if they could think of a situation where they might decide to buy food from a business with a rating lower than their usual lowest acceptable rating. Across all ratings, two-thirds (66%) of respondents could not think of a situation in which they might decide to buy food from a food business with a lower rating, 23% could think of a situation. Most respondents who consider a food hygiene rating of 3-5 to be their lowest

acceptable rating, could not think of a situation in which they might food from a business with a lower rating (Figure 14)²¹.

Figure 15. Most respondents would buy food from a business with the food hygiene rating lower than their usual lowest acceptable rating if there wasn't much choice of places to go, or if they had eaten there before.



Source: Food & You 2: Wave 2

²¹ Question: Can you think of a situation in which you might decide to buy food from a food business with a rating of lower than ... (rating)? Responses: Yes, No, Don't know. Base= All online respondents who said they consider an FHRS rating of ... (rating) ... acceptable when buying food from somewhere, excluding those who have not heard of the Food Hygiene Rating Scheme. Please note: The score presented was the response from the previous question, 'From a rating of 0 to 5, what is the lowest rating you would usually consider acceptable, if you were considering buying food from somewhere?'

Respondents who could think of a situation where they might buy food from a food business with a rating lower than what they would usually consider acceptable were asked what, from a given list, that situation would be. The most common situations were, if there wasn't much choice of places to go (55%) if they had eaten food from there before (54%), if they were out late at night (37%), or if they knew the food was high quality (33%) (Figure 15)²².

²² Question: When would that be? Responses: If there wasn't much choice of places to go, If I had eaten food from there before, If I was out late at night, If I knew the food was of high quality, If I needed to pick something up quickly, If it was a place that had been recommended to me, If I didn't have much money to spend\wanted somewhere cheap, If someone else in my party chose this food business, If I enjoyed the taste of the food from the place, If I was in an unfamiliar location (away with work, on holiday, etc), If it was part of a chain I knew, Because I would assume it is safe if it is still open\running, If the food business served a particular type of food (e.g. Cuisine or vegetarian / vegan options), If I was taking food away rather than eating in, Other, Don't know. Base = 734, all online respondents who can think of a situation where they might buy food from a food business with a rating lower than what they would usually consider acceptable, excluding those who have not heard of the Food Hygiene Rating Scheme.

Figure 16. Sixty percent of respondents could think of a situation in which they would only buy food from a food business with a rating which is higher than their usual lowest acceptable rating.

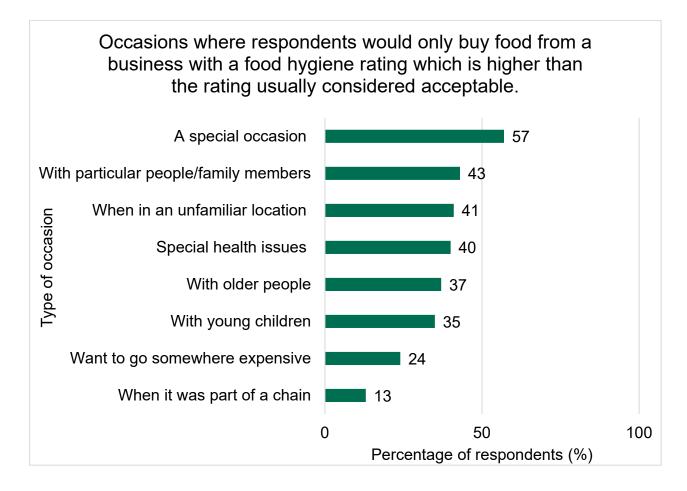


Source: Food & You 2: Wave 2

Respondents were asked if they could think of an occasion in which they would only buy food from a business with a rating which is higher than their usual lowest acceptable rating. Overall, most respondents (60%) could think of a situation in which this would apply, and 29% of respondents could not. Most respondents who considered a rating of 2 (improvement necessary) (59%), 3 (generally satisfactory) (62%), or 4 (good) (60%) as generally acceptable could think of a situation in which they would only buy food from a food business with a higher rating. However, many respondents who considered a rating of 0 (urgent improvement necessary) (68%) or 1 (major improvement necessary) (40%)

as generally acceptable could not think of a situation in which they would only buy food from a food business with a higher rating (Figure 16)²³.

Figure 17. Most respondents would buy food from a business with a higher food hygiene rating than their usual lowest acceptable rating if it was a special occasion.



Source: Food & You 2: Wave 2

²³ Question: Can you think of an occasion where you would only buy food from a food business with a rating of higher than ...(score)? Responses: Yes, No, Don't know. Base = 3075, all online respondents who said they would eat at a food business with an FHRS rating of(score), excluding those who have not heard of the Food Hygiene Rating Scheme. Please note: The score presented was the response from the previous question, 'From a rating of 0 to 5, what is the lowest rating you would usually consider acceptable, if you were considering buying food from somewhere?'

Respondents who could think of an occasion where they would only buy food from a business with a rating higher than what they would usually consider acceptable were asked what, from a given list, that occasion would be. The most common occasions were special occasions (57%), when with particular people or family members (43%), when in an unfamiliar location (41%) or when the respondent or someone else had special health issues (40%) (Figure 17)²⁴.

Impact of food hygiene rating sticker on perceptions and behaviour

Respondents were asked if a food business did not have the food hygiene rating sticker present at the entrance to what extent, if at all, it would affect their decision to eat there. Most respondents (61%) would be less likely (i.e. 'much less likely' or 'a little less likely') to eat at a food business that did not have the food hygiene rating sticker present at the entrance however, 27% of respondents reported that it would not make them any less likely to eat there.

A higher proportion of respondents living in Wales (72%) would be less likely (i.e. 'much less likely' or 'a little less likely') to eat at a food business which did not have the food

²⁴ Question: When would that be? Responses: When it's a special occasion (birthday, anniversary, celebration, etc), When I am with particular people/family members, When I was in an unfamiliar location (away with work, on holiday, etc), When I or someone else had special health issues (illness, pregnancy, etc), When I am taking older people, When I am taking (young) children, When I want to go somewhere expensive, When it was part of a chain, Other. Base = 1882, all online respondents who said they would only eat somewhere with a higher rating, excluding those who have not heard of the Food Hygiene Rating Scheme.

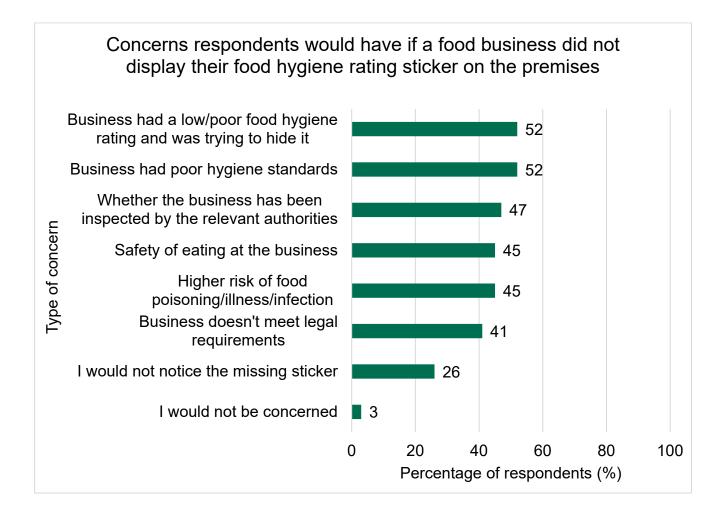
hygiene rating sticker present at the entrance compared to those in England (60%) and Northern Ireland (65%)**²⁵.

Respondents were asked if, in the last 12 months, they had decided against using a food business because it did not display its food hygiene rating sticker. Of the respondents who had heard of the FHRS, 16% reported that they had decided against using a food business because it did not display its food hygiene rating sticker²⁶.

²⁵ Question: If a food business does not have the FHRS sticker present at the entrance to what extent, if at all, will this affect your decision to eat there? Responses: It would make me much less likely to eat there, It would make me a little less likely to eat there, It would not make me any less likely to eat there, Don't know. Base = 4376, all online respondents and all those who completed the 'Eating Out' paper questionnaire who have heard of the Food Hygiene Rating Scheme.

²⁶ Question: In the last 12 months, did you ever decide against using a food business, because it did not display its Food Hygiene Rating Scheme sticker? Responses: Yes, No, Don't know/ can't remember. Base = 4376, all online respondents and those answering the 'Eating Out' paper questionnaire who have heard of the Food Hygiene Rating Scheme.

Figure 18. Most respondents would be concerned that a food business was trying to hide a low or poor food hygiene if the food hygiene rating sticker was not displayed.



Source: Food & You 2: Wave 2

Respondents were asked what concerns they would have if they visited a food business that did not display its food hygiene rating sticker on the premises. The most common concerns were that the food business had a poor or low food hygiene rating and was trying to hide it (52%) and that the food business had poor hygiene standards (52%). Over a quarter (26%) of respondents would not notice the food hygiene rating sticker was

missing and 3% would not be concerned about anything if the sticker was not displayed (Figure 18)²⁷.

²⁷ Question: If you visited a food business that did not display their Food Hygiene Rating Scheme sticker on the premises, would you be concerned about any of the following? Responses: The food business had a low/poor Food Hygiene Rating and was trying to hide it, That the food business had poor hygiene standards, Whether the food business has been inspected by the relevant authorities or not, There would be a higher risk of food poisoning/illness/infection when eating there, The safety of eating at the food business doesn't meet legal requirements, I would not notice that the sticker is missing, I would not be concerned about anything, Other, Don't know. Base = 4376, all online respondents and those answering the 'Eating Out' paper questionnaire who have heard of the Food Hygiene Rating Scheme.

Chapter 4: Attitudes toward the FHRS

Views on mandatory display

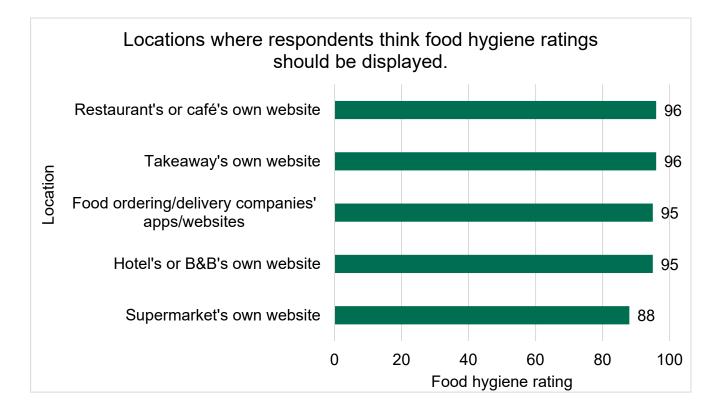
Respondents who had heard of the FHRS were asked whether they thought that food businesses should be required by law to display their food hygiene rating at their premises, or if it should be up to the business to decide whether to or not. Of the respondents who had heard of the FHRS, 95% thought that food businesses should be required by law to display their food hygiene rating on the premises, and 3% thought it should be up to the business to decide whether to display their food hygiene rating. This finding was similar across all three countries; most respondents in England (95%), Wales (94%) and Northern Ireland (94%) thought that food businesses should be required by law to display their food hygiene rating at their premises.

Respondents who had heard of the FHRS were asked whether they thought businesses providing an online food ordering service should display their food hygiene rating where it can clearly be seen by customers before they order food. Of the respondents who had heard of the FHRS, 95% thought that businesses providing an online food ordering service should display their food hygiene rating where it can clearly be seen by customers before they order food. This finding was consistent in England Wales, and Northern Ireland²⁹.

²⁸ Question: Do you think that food businesses should be required by law to display their food hygiene rating at their premises, or should it be up to the business to decide whether to or not? Responses: They should have to, It should be up to them to decide, Don't know. Base = 4376, all online respondents and those answering the 'Eating Out' paper questionnaire who have heard of the Food Hygiene Rating Scheme.
²⁹ Question: Do you think businesses providing an online food ordering service should display their food hygiene rating where it can clearly be seen by customers before they order food? Responses: Yes, No, Don't know. Base = 4376, all online respondents and those answering the 'Eating Out' paper questionnaire who have heard of the Food Hygiene Rating Scheme.

Views on where food hygiene ratings should be displayed

Figure 19. Most respondents thought that food hygiene ratings should be displayed on the website of restaurants, cafés, and takeaways.



Source: Food & You 2: Wave 2

Respondents were asked where they thought hygiene ratings should be displayed, from a given list of locations. Most respondents thought that food hygiene ratings should be displayed on restaurant or café websites (96%), takeaway websites (96%), on the websites or apps of food ordering and delivery companies (95%) and on hotel or B&B websites. Almost 9 in 10 respondents (88%) thought that food hygiene ratings should be displayed on supermarket websites (Figure 19)³⁰.

³⁰ Question: Do you think the hygiene ratings should be displayed on.... Food ordering and delivery companies' apps and websites that allow you to order food from a range of local restaurants and takeaways? / A restaurant's or cafe's own website? / A takeaway's own website? / A hotel's or B&B's own website? / A supermarket's own website? Base = 4376, all online respondents and those answering the 'Eating Out' paper questionnaire who have heard of the Food Hygiene Rating Scheme.

Annex A: Food and You 2

Food and You 2

Background

In 2018 the <u>Advisory Committee for Social Science</u> (ACSS) established a new Food and You Working Group to review the methodology, scope and focus of the Food and You survey. The Food and You Working Group provided a <u>series of recommendations</u> on the future direction of the Food and You survey to the FSA and ACSS in April 2019. Food and You 2 was developed from the recommendations.

The Food and You 2 survey has replaced the biennial Food and You survey (2010-2018), biannual Public Attitudes Tracker (2010-2019) and annual Food Hygiene Rating Scheme (FHRS) Consumer Attitudes Tracker (2014-2019). The Food and You survey has been an Official Statistic since 2014.

The Food and You 2: Wave 1 Key Findings report was published in March 2021.

Methodology

The Food and You 2 survey is commissioned by the Food Standards Agency (FSA). The fieldwork is conducted by Ipsos MORI. Food and You 2 is a biannual survey. Fieldwork for Wave 2 was conducted from 20th November 2020 to 21st January 2021.

Food and You 2 is a sequential mixed-mode 'push-to-web' survey. A random sample of addresses (selected from the Royal Mail's Postcode Address File) received a letter inviting up to two adults (aged 16 or over) in the household to complete the online survey. A first reminder letter was sent to households that had not responded to the initial invitation. A postal version of the survey accompanied the second reminder letter for those who did not have access to the internet or preferred to complete a postal version of the survey. This helps to reduce the response bias that otherwise occurs with online-only surveys. This method is accepted for government surveys and national statistics, including the 2021 <u>Census</u> and <u>2019/2020 Community Life Survey</u>. A third and final reminder was sent to households if the online survey had not been completed.

Respondents were given a gift voucher for completing the survey. Further details about the methodology are available in the <u>Technical Report</u>. Due to the difference in methodology between the Public Attitudes Tracker, FHRS Consumer Attitudes Tracker and Food and You survey (2010-2018) it is not possible to compare the data collected in Food and You 2 (2020 onward) with these earlier data. Comparisons can be made between the different waves of Food and You 2.

The sample of main and reserve addresses³¹ was stratified by region (with Wales and Northern Ireland being treated as separate regions), and within region (or country) by local authority (district in Northern Ireland) to ensure that the issued sample was spread proportionately across the local authorities. National deprivation scores were used as the final level of stratification within the local authorities - in England the <u>Index of Multiple</u> <u>Deprivation (IMD)</u>, in Wales the <u>Welsh Index of Multiple Deprivation (WIMD</u>) and in Northern Ireland, the <u>Northern Ireland Multiple Deprivation Measure (NIMDM</u>).

Due to the length and complexity of the online questionnaire it was not possible to include all questions in the postal version of the questionnaire. The postal version of the questionnaire needed to be shorter and less complex to encourage a high response rate. To make the postal version of the questionnaire shorter and less complex, two versions were produced. All data collected by Food and You 2 are self-reported. The data are the respondents own reported attitudes, knowledge and behaviour relating to food safety and food issues. As a social research survey, Food and You 2 cannot report observed behaviours. Observed behaviour in kitchens has been reported in <u>Kitchen Life</u>, an ethnographic study which used a combination of observation, video observation and interviews to gain insight into domestic kitchen practices. This study will be updated through Kitchen Life 2, which is in progress now and due to report in 2023.

The minimum target sample size for the survey is 4,000 households (2,000 in England, 1,000 in Wales, 1,000 in Northern Ireland), with up to two adults in each household invited to take part as mentioned above. For Wave 2 a total of 5,900 adults from 3,955households across England (2,968 adults), Northern Ireland (1,566 adults), and

³¹ A reserve sample of addresses was created to use if the target number of respondents was not achieved from the main sample of addresses.

Wales (1,366 adults), completed the survey. An overall response rate of 28% was achieved (England 30%, Wales 29%, Northern Ireland 25%). Sixty-four per cent of respondents completed the survey online and 36% completed the postal version of the survey. The postal responses from 156 respondents were removed from the data set as the respondent had completed both the online and postal survey. Further details about the response rates are available in the <u>Technical Report</u>.

Weighting was applied to ensure the data are as close as possible to being representative of the socio-demographic and sub-groups in the population, as is usual practice in government surveys. The weighting applied to the Food and You 2 data helps to compensate for variations in within-household individual selection, for response bias, and for the fact that some questions were only asked in one of the postal surveys. Further details about weighting approach used and the weights applied to the Food and You 2: Wave 2 data are available in the <u>Technical Report</u>.

The data have been checked and verified by six members of Ipsos MORI and two members of the FSA Statistics branch. Descriptive analysis and statistical tests have been performed by Ipsos MORI. Quantum (statistical software) was used by Ipsos MORI to calculate the descriptive analysis and statistical tests (t-tests).

The p-values that test for statistical significance are based on t-tests comparing the weighted proportions for a given response within that socio-demographic and sub-group breakdown. An adjustment has been made for the effective sample size after weighting, but no correction is made for multiple comparisons.

Reported differences between socio-demographic and sub-groups typically have a minimum difference of 10 percentage points between groups and are statistically significant at the 5% level (p<0.05). However, some differences between respondent groups are included where the difference is fewer than 10 percentage points when the finding is notable or of interest. Percentage calculations are based only on respondents who provided a response. Reported values and calculations are based on weighted totals.

Food and You 2: Wave 2

Food and You 2: Wave 2 data were collected between 20th November 2020 and 21st January 2021, during the COVID-19 pandemic which had a significant societal and economic impact and an impact on the day-to-day lives of everyone. It is expected that the COVID-19 pandemic had an impact on the level of food security reported by respondents in Food and You 2³².

Food and You 2 is a modular survey, with 'core' modules being included every wave, 'rotated' modules being repeated annually or biennially, and 'exclusive' modules being asked on a one-off basis. The modules presented in the Food and You 2: Wave 2 Key Findings report include 'Food we can trust' (core), 'Concerns about food' (core), 'Food security' (rotated), 'Eating out and takeaways' (rotated), 'Food hypersensitivities' (rotated), and 'Eating at home' (brief, rotated)³³.

Technical terms and definitions

1. Statistical significance is indicated at the 5% level (p<0.05). This means that where a significant difference is reported, there is reasonable confidence that the reported difference is reflective of a real difference at the population level.

2. Food security means that all people always have access to enough food for a healthy and active lifestyle (World Food Summit, 1996). The United States Department of

³² Covid-19 consumer tracker survey (2021), FSA. Food in a pandemic (2021). FSA. Life under Covid-19: Food waste attitudes and behaviours in 2020 (2021), WRAP. State of hunger: Building the evidence on poverty, destitution, and food insecurity in the UK (2021). The Trussell Trust. Family Resources Survey (FRS): financial year 2021 to 2020 (2021). DWP. The FRS asks respondents to report experiences of food insecurity in the last 30 days so responses cannot be compared with Food and You 2.
³³ Two versions of the Eating at Home module have been created, a brief version which includes a limited number of questions, and a full version which includes all related questions. The full version of the module was reported in Wave 1.

<u>Agriculture</u> (USDA) has created a series of questions which indicate a respondent's level of food security. Food and You 2 incorporates the <u>10 item U.S. Adult Food Security</u> <u>Survey Module</u> and uses a 12 month time reference period. Respondents are classified as having high food security, marginal food security, low food security and very low food security.

3. <u>NS-SEC</u> (The National Statistics Socio-economic classification) is a classification system which provides an indication of socio-economic position based on occupation and employment status.

4. Index of Multiple Deprivation (IMD) / Welsh Index of Multiple Deprivation (WIMD) / Northern Ireland Multiple Deprivation Measure (NIMDM) is the official measure of relative deprivation of a geographical area. IMD/WIMD/NIMDM classification is assigned by postcode or place name. IMD/WIMD/NIMDM is a multidimensional calculation which is intended to represent the living conditions in the area, including income, employment, health, education, access to services, housing, community safety and physical environment. Small areas are ranked by IMD/WIMD/NIMDM; this is done separately for England, Wales and Northern Ireland.

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