

The 2014

**F**   **D**

**and YOU**  **U**

Survey  
UK Bulletin

The 2014

# UK Bulletin 3

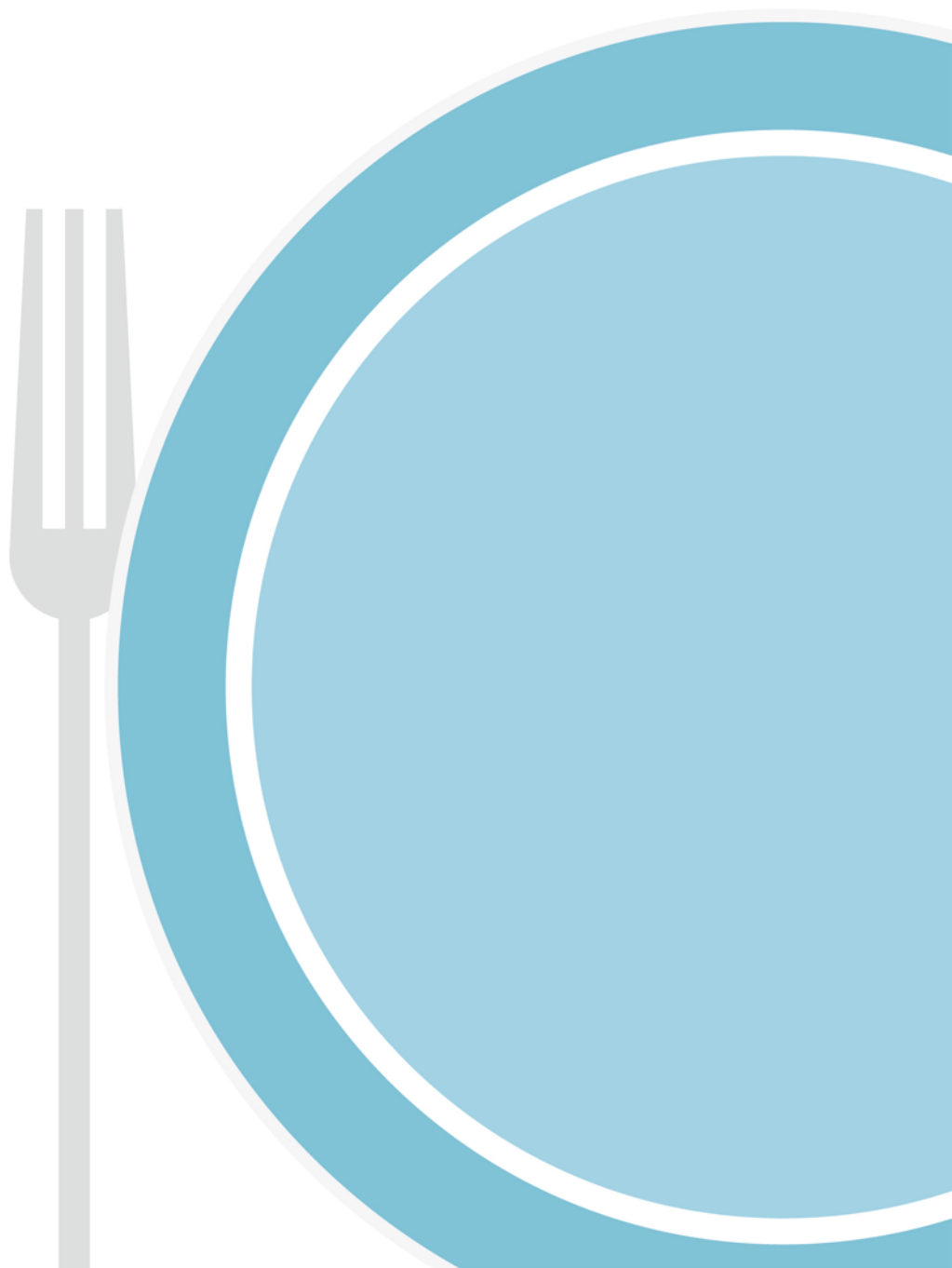
## Eating outside the home

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# Acknowledgments

First and foremost our thanks go to all of the respondents who gave up their time to take part in the survey.

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We also thank the Food and You Working Group – Joy Dobbs, Professor Anne Murcott, and Professor Richard Tiffin – for their valuable direction and guidance.

*This document has been revised to correct an error in the original publication. The Wave 2 percentages on page 21 relating to country differences in the proportions who mentioned using a hygiene certificate or sticker when eating out were previously calculated using a different base to the Wave 3 figures. This error has now been corrected, and does not affect the overall interpretation of the results.*

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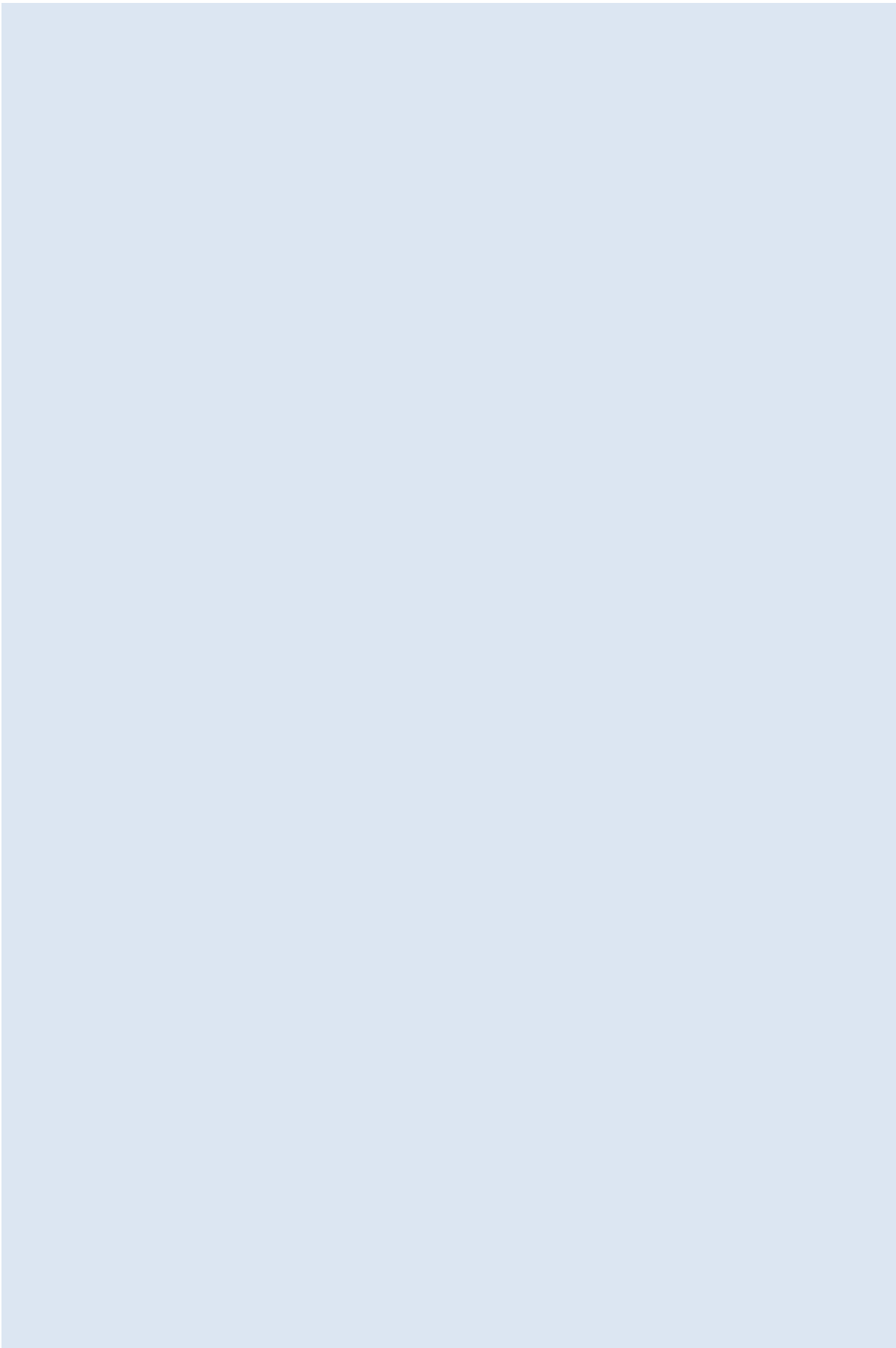
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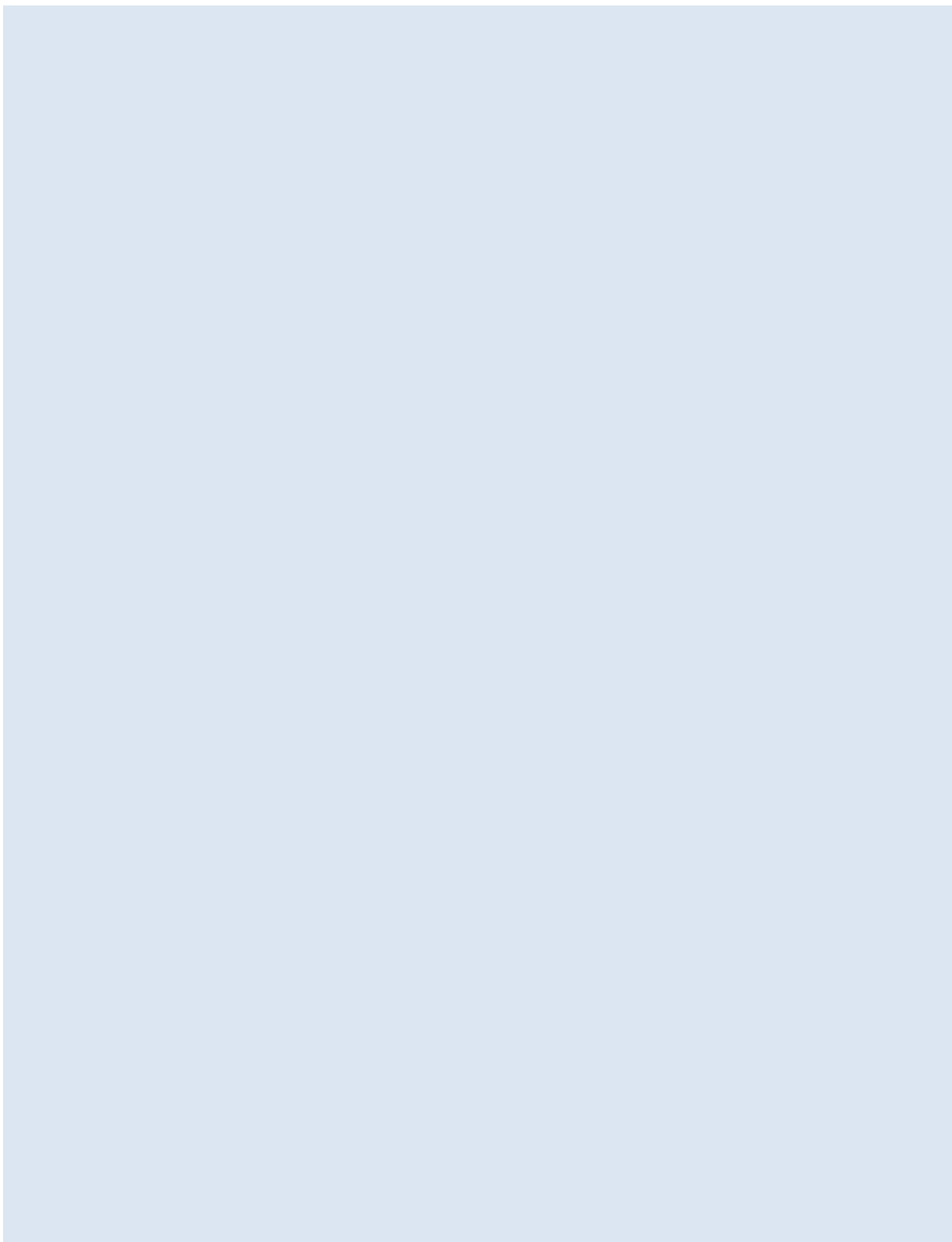
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# Official Statistics

The statistics presented in this bulletin meet the requirements of the UK Code of Practice for Official Statistics.

Further information on Official Statistics can be found on the UK Statistics Authority website.





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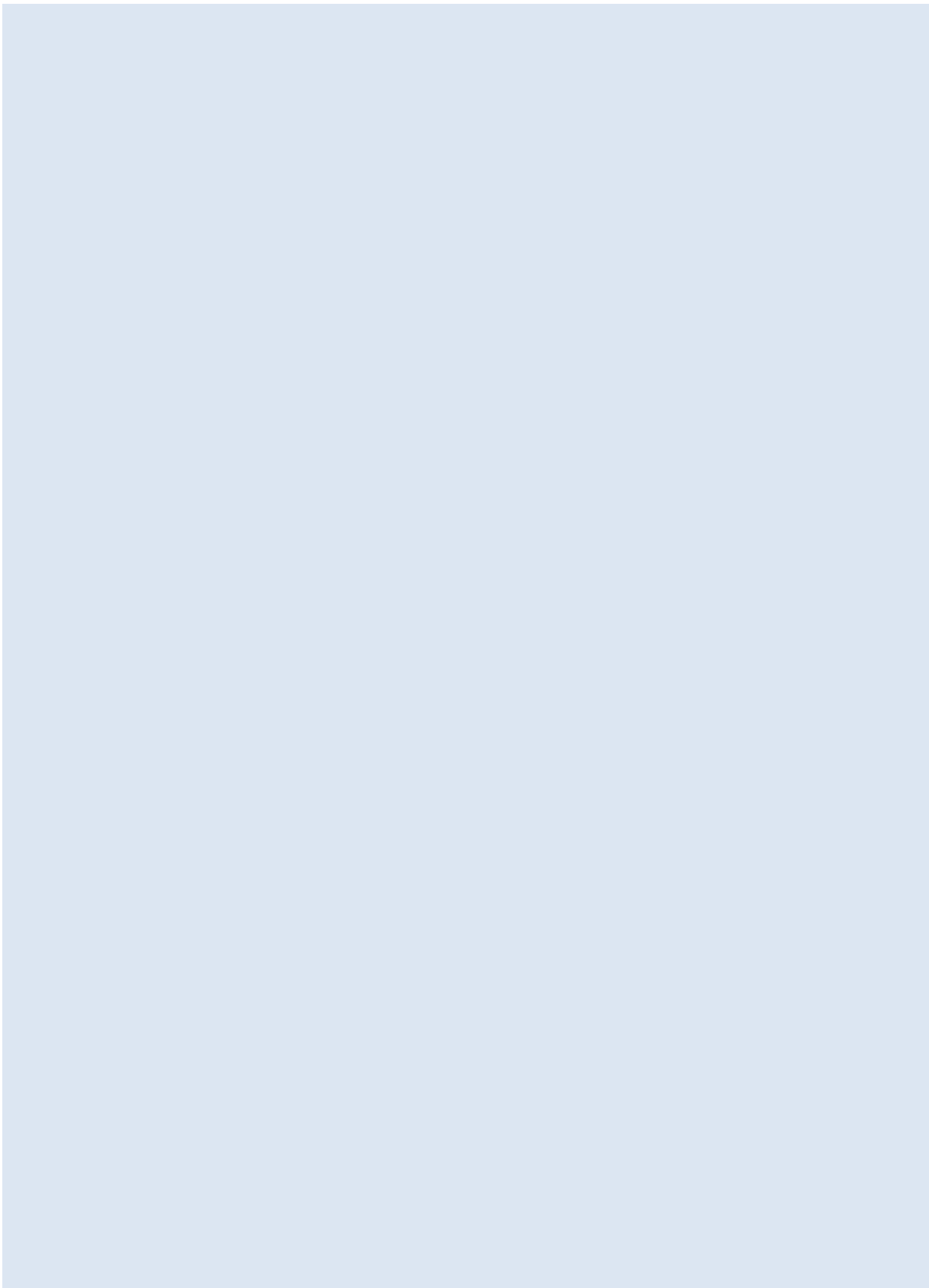
<sup>1</sup> The Wave 1 report can be found at: [http://www.foodbase.org.uk/admintools/reportdocuments/641-1-1079\\_Food\\_and\\_You\\_Report\\_Main\\_Report\\_FINAL.pdf](http://www.foodbase.org.uk/admintools/reportdocuments/641-1-1079_Food_and_You_Report_Main_Report_FINAL.pdf) and the Wave 2 report can be found at: [http://www.foodbase.org.uk/admintools/reportdocuments/805-1-1460\\_Wave\\_2\\_Main\\_Report.pdf](http://www.foodbase.org.uk/admintools/reportdocuments/805-1-1460_Wave_2_Main_Report.pdf)

<sup>2</sup> <http://www.food.gov.uk/news-updates/campaigns/germwatch/>

<sup>3</sup> <http://www.food.gov.uk/science/research/ssres/fs409012>

<sup>4</sup> <http://www.food.gov.uk/science/research/ssres/crosscutss/fs307014>

<sup>5</sup> Separate reports will be published for each of England, Wales, Scotland, and Northern Ireland. The reports for England and Wales will report the data relating to food safety for the individual country.



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<sup>6</sup> <http://www.data-archive.ac.uk/>

<sup>7</sup> <http://data.gov.uk/>



# Glossary

## **Food Hygiene Rating Scheme (FHRS)**

A scheme run by local authorities in England, Wales and Northern Ireland in partnership with the Food Standards Agency, to provide consumers with information about hygiene standards in food premises. In Wales the display of a sticker indicating the food business's hygiene rating became mandatory in November 2013.

## **Food Hygiene Information Scheme (FHIS)**

A scheme run by local authorities in Scotland in partnership with the Food Standards Agency, to provide consumers with information about hygiene standards in food premises.

## **Scores on the Doors scheme (SotD)**

The name used for many of the 'local' food hygiene rating schemes, which local authorities ran prior to the formal launch of the national FSA schemes - FHRS / FHIS.

# 1. Background

The definition of eating out in the Food and You survey encompasses eating at a wide range of establishments: restaurants, pubs, cafés and coffee shops, sandwich bars, fast food outlets, work canteens, leisure facilities such as cinemas, bowling alleys and theme parks, as well as takeaway food (e.g. Indian / Chinese / pizza / fish and chips).

The FSA has the strategic objective that consumers should have the information and understanding they need to make informed choices about what and where they eat. A key element in achieving this is the Food Hygiene Rating Scheme (FHRS) for England, Wales and Northern Ireland and the Food Hygiene Information Scheme (FHIS) for Scotland. These schemes have been introduced in partnership with local authorities and are designed to help consumers choose where to eat out or shop for food by giving them information about the hygiene standards of food premises. The schemes are also intended to encourage food businesses to improve their standards.

Each business is given a 'hygiene rating' when it is inspected by a food safety officer from the business's local authority. The hygiene rating shows how closely the business is meeting the requirements of food hygiene law. At the end of the FHRS inspection, the business is given one of the six ratings. The top rating of '5' means that the business was found to have 'very good' hygiene standards. The bottom rating of '0' means 'urgent improvement necessary'. For the FHIS, a business can be given one of the following two inspection results:

- 'Pass' – this means that the business has achieved an acceptable level of compliance with the requirements of food hygiene law.
- 'Improvement Required' – this means the business has not achieved an acceptable level of compliance with the requirements of food hygiene law.

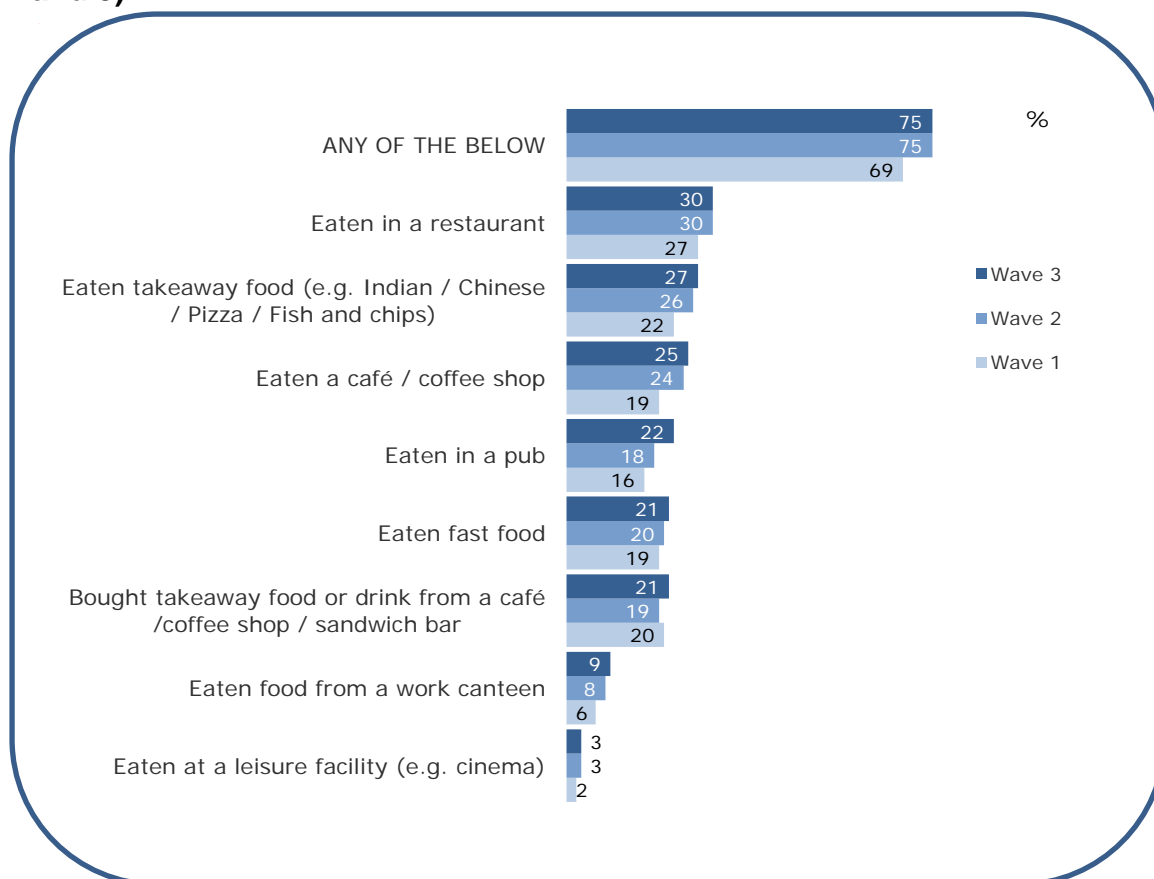
FHRS ratings / FHIS inspection results are published at [www.food.gov.uk/ratings](http://www.food.gov.uk/ratings) and businesses are given stickers or certificates and encouraged – though not currently required in England, Northern Ireland, and Scotland - to display these where their customers can easily see them. Display of stickers at food business premises in Wales became mandatory with the Food Hygiene Rating (Wales) Act 2013 which came into force at the end of November 2013.

Prior to the formal launch of the FHRS and FHIS in November 2010, many local authorities ran their own 'local' hygiene rating schemes. Many were based on six tiers and called 'Scores on the Doors' (SotD) and the term is still often used to describe FHRS.

## 2. Frequency of eating out

### 2.1 Reported eating out behaviour

**Figure 2.1 Reported eating out behaviour in the last seven days: prevalence of eating at, or buying food to take away from, different establishments (Waves 1, 2 and 3)**



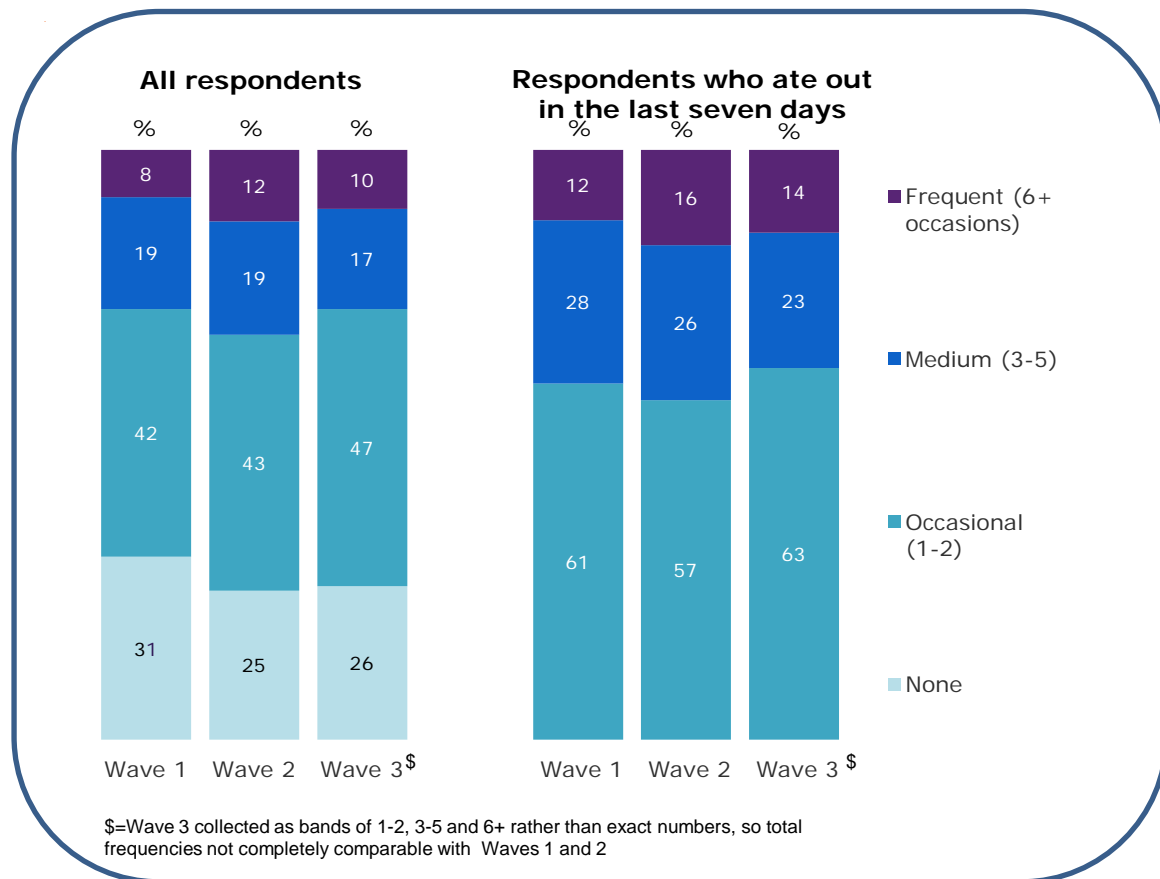
Source: Q2\_33 Have you done any of the following things in the last seven days, that is since last ...

Note: respondents were able to give multiple responses to this question

Base: One third of total sample – Wave 1(1,056); All respondents - Wave 2 (3,231); Wave 3 (3,453)

- Three-quarters of respondents (75%) reported that they had eaten out or bought food to take away in the previous seven days, similar to the proportion at Wave 2 and above that reported at Wave 1 (69%).
- As at Waves 1 and 2, respondents were most likely to report eating out at restaurants (30%), takeaway food outlets (27%) and cafes or coffee shops (25%) over the previous seven days.
- The proportions of respondents who reported getting takeaway food (27%), and eating in a cafe or coffee shop (25%) were similar to the levels seen at Wave 2 and higher than at Wave 1 (22% and 19% respectively). The proportion reporting eating in a pub was also higher at Wave 3 compared with both Waves 1 and 2 (22% compared with 16% at Wave 1 and 18% at Wave 2).

**Figure 2.2 Reported eating out behaviour in the last seven days: frequency of eating out or buying food to take away (Waves 1, 2 and 3)**



Source: Q2\_34 How many times have you eaten in a ... in the last seven days?<sup>8</sup>

Base: One third of total sample – Wave 1 (1,056); All respondents - Wave 2 (3,231); Wave 3 (3,543); All respondents that eat out – Wave 1 (733); Wave 2 (2,270); Wave 3 (2,432)

- Respondents were most likely to report eating out or buying food to take away occasionally (47% saying once or twice in the last week) with only one in ten eating out six times or more in the last week. Of those respondents who had eaten out in the last seven days, 63% had eaten out occasionally (once or twice) and 14% had eaten out at least six times.
- While it is difficult to make direct comparisons given changes to the way the question was asked, these appear to be similar to the findings at Wave 2.
- The majority of respondents who had visited each type of establishment (other than a work canteen), had done so only once or twice in the last seven days, as at previous waves.

<sup>8</sup> At Wave 3 frequencies were collected as bands of 1-2, 3-5 and 6+ for each establishment visited, rather than the exact numbers as at Waves 1 and 2. To calculate total frequencies across all establishments, proxy values were used for each band. These were 6 for those saying 6+ and 4 for those saying 3-5; for those saying 1-2, the mean number of visits reported by those saying 1-2 at Waves 1 and 2 were used. These were: restaurant 1.19, pub 1.09, café 1.21, takeaway from café 1.29, fast food 1.16, canteen 1.44, leisure facility 1.03 & takeaway 1.23.

## 2.2 Variation in frequency of eating out by different groups in the population<sup>9</sup>

### Variation by gender and age, including differences between the survey waves

- As at Waves 1 and 2, there were differences in where people reported eating out in the last week by **gender**, but for the first time at Wave 3 men were more likely to report eating out at all (78%) than women (72%). The difference in reported eating out compared with Wave 1 was greater for men (71% at Wave 1) than for women (68% at Wave 1).
- Men were also more likely than women to report having eaten out three or more times in the past week (33% compared with 22%).
- At Wave 3, men were more likely than women to report eating fast food (26% compared with 15%), takeaways (32% compared with 23%), and food taken out from a café (24% compared with 19%), which are similar patterns to those seen at Wave 1.
- Men were more likely than women to report eating in a work canteen at Wave 3 (11% compared with seven per cent), similar to the findings at Wave 2.
- Women were more likely than men to report eating in a café (28% compared with 22%) and the differences from Wave 1 were greater for women (20%) than for men (18%). Differences from Wave 1 in the frequency of eating in pubs and having takeaways were similar for both men and women.
- Reported eating out behaviour varied by **age**, with younger respondents more likely to report eating out in the past week: 85% of those aged 16-34 said that they ate out, compared with 77% aged 35-54, 68% aged 55-74 and 54% aged 75 and over. Compared with Wave 1, higher proportions of those aged 35-64 ate out at Wave 3, with the greatest difference seen for those aged 45-54 (78% at Wave 3 compared with 59% at Wave 1).
- Younger respondents were also more likely than older respondents to report having eaten out three or more times in the past seven days. Around half (49%) of those aged 16-34 reported having eaten out at least three times, compared with 38% of those aged 25-34, 28% of those aged 35-54, 17% of those aged 55-64 and 10% of those aged 65 and over.
- While there was little difference between the age groups in reported eating out at pubs and cafes, there was a much greater difference in reported consumption of food to takeaway, and fast food in particular. For example, while 44% of those aged 16-24 said they had eaten fast food in the past week, this was lower at 24% of those aged 25-54 and seven per cent of those aged 55 and over. This is a similar pattern to that observed at Waves 1 and 2.

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<sup>9</sup> The following variables were analysed to identify statistically significant differences: age, gender, country of residence, household size, presence of children in household, income, socio-economic classification and working status.

### Other variations at Wave 3

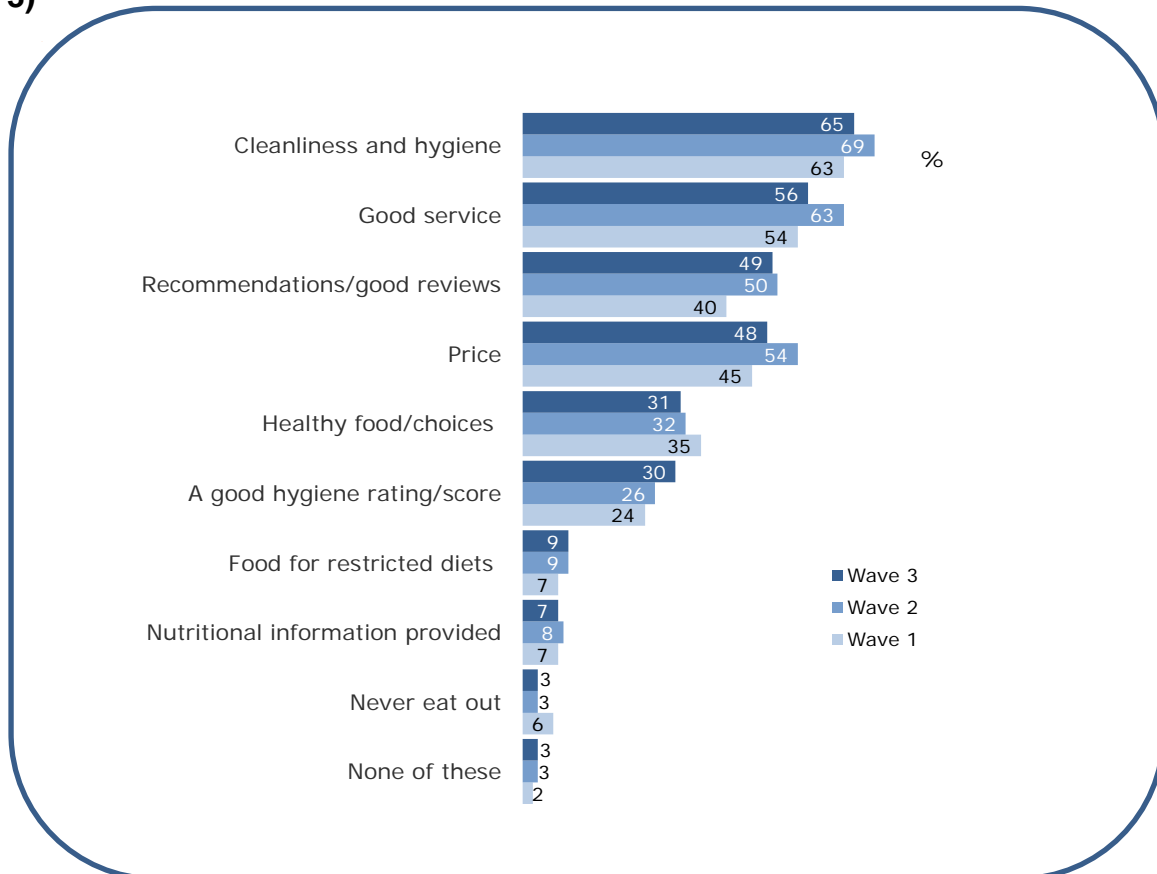
- Variation by **country of residence** was observed, with respondents in Northern Ireland most likely to report eating out in the last week (78%) and those in Wales least likely (71%). In Northern Ireland respondents were particularly likely to report having a takeaway (36% compared with 31% in Scotland, 27% in England and 23% in Wales). Respondents in England and Wales were more likely to report eating in a pub in the last week (23% and 22% respectively) than those in Northern Ireland (7%) and Scotland (9%).
- Variation by **household size** was observed. Respondents in households of two or more people were more likely than those in one person households to report eating out in the past week (76% compared with 66%).
- Respondents with **children aged under 16 in the household** were more likely to report eating out in the past week (79%) than those without (74%).
- There were also variations by **income**<sup>10</sup>, **socio-economic group** and **working status**. Sixty two per cent of respondents with an annual household income of less than £10,400 reported eating out in the past week, compared with 85% of those with a household income of £52,000 or more. The difference was greatest for eating in restaurants, but those in the lowest income households were no less likely to report eating takeaways than those from higher income households.
- Those in households with an annual income of £52,000 and over were more likely to report having eaten out three times or more in the past week (44%) compared with 17% of those in households earning below £10,400.
- Respondents in managerial and professional households were more likely than those in routine / manual households to report eating out in the past week (82% compared with 68%).
- Respondents who were currently employed were more likely to report eating out (82%) than those who were retired (61%) or unemployed (66%). However, unemployed respondents (40%) were more likely than those in work (30%) to report eating takeaway food.

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<sup>10</sup> For the purposes of analysis, respondents were grouped into four categories in terms of household income: Up to £10,399, £10,400-£25,999, £26,000-£51,999 and £52,000 and over. The proportion of respondents in each category respectively was 12%, 29%, 32% and 26%.

### 3. Perception of food safety and hygiene when eating out

Figure 3.1 Importance of factors in deciding where to eat out (Waves 1, 2 and 3)



Source: Q2\_35 Generally, when you're deciding where to eat out, which of the following are important to you?  
 Note: respondents were able to give multiple answers / Only responses of five per cent or more are shown

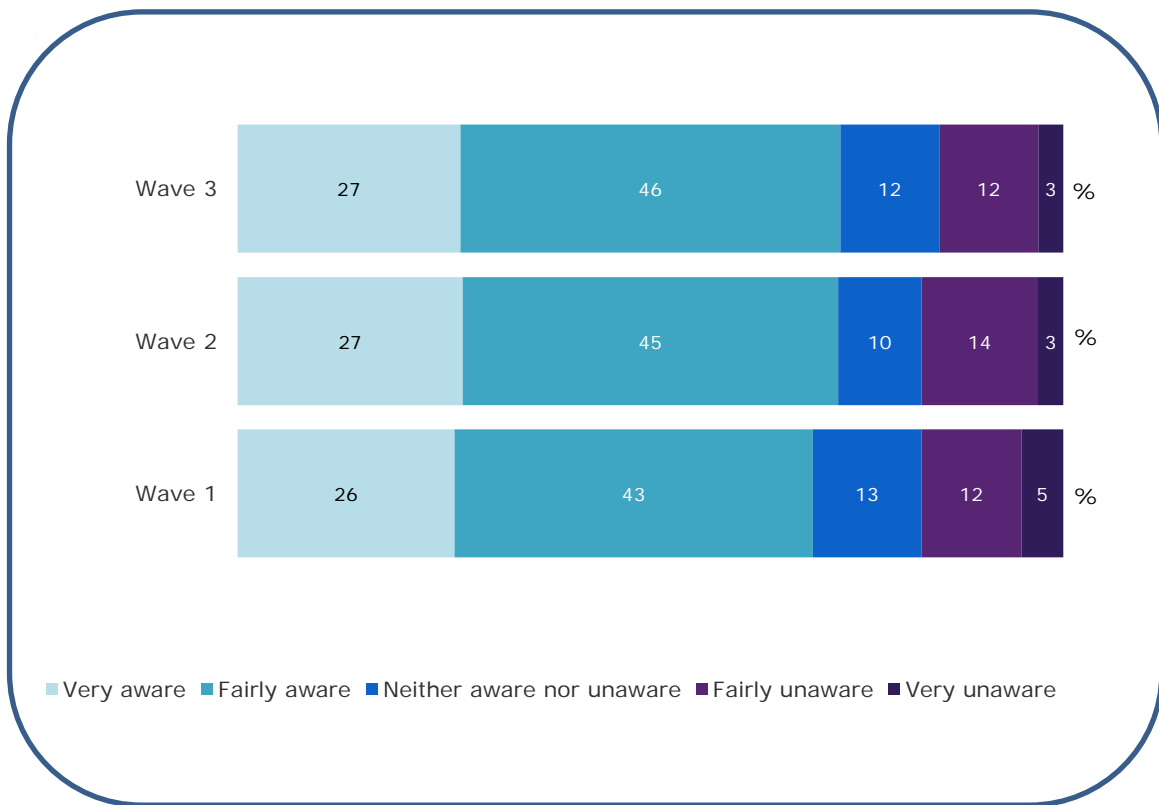
Base: One third of total sample – Wave 1 (1,056); All respondents - Wave 2 (3,231); Wave 3 (3,453)

- When shown a list of factors which might affect their choice of where to eat out or to purchase takeaway food, 65% of respondents reported that the cleanliness and hygiene of the establishment was important; service and price were also important factors for around a half or more (56% and 48% respectively).
- A good hygiene rating or score was mentioned as important when deciding where to eat out by 30% of respondents. This proportion was higher than at Wave 1 (24%), but similar to Wave 2.
- Around half of respondents (49%) said that recommendations and reviews were important, similar to the proportion at Wave 2 (50%) and higher than at Wave 1 (40%). The availability of healthy food was less likely to be mentioned as an important factor at Wave 3 compared with Wave 1 (31% mentioned it at Wave 3 compared with 35% at Wave 1).

- When asked for the single most important factor when deciding where to eat out, 35% reported cleanliness and hygiene and five per cent reported that hygiene rating / scores were most important.
- Recommendations were the next most likely factor to be selected as most important (17%) with a range of reasons given by other respondents such as price (10%), good service (nine per cent) and healthy food choices (eight per cent).
- Respondents who reported eating out were asked how safe they considered food to be when eating out compared with eating at home. Forty-five per cent of respondents who ate out felt food was less safe when eating out compared with eating at home, and six per cent considered food to be safer when eating out, while 43% said that there was no difference. These findings were similar to those at Wave 2.



**Figure 3.2 Awareness of hygiene standards when eating out (Waves 1, 2 and 3)**



Source: Q2\_37 When you eat out, at places such as at restaurants, cafes, pubs and takeaways, or buy food to take home to eat from supermarkets or shops, how aware would you say you generally are about their standards of hygiene?

Base: All respondents who eat out (one third of total sample) – Wave 1 (983); All respondents who eat out - Wave 2 (3,097); Wave 3 (3,307)

- When asked how aware they were of hygiene standards when eating out or purchasing takeaway food, 73% of respondents reported being aware, with 27% stating that they were very aware and 46% fairly aware of standards of hygiene when eating out or purchasing takeaway food. This did not change significantly from Wave 1. A minority (14%) said they were not aware, and this is a lower proportion than at Wave 2 (17%).

### 3.1 Variation in perceptions of food safety and hygiene when eating out by different groups in the population<sup>11</sup>

#### Variation by gender and age, including differences between the survey waves

- Respondents who were **women** were more likely than men to say that cleanliness and hygiene were important when deciding where to eat (70% compared with 61% of men) and that a good hygiene rating was important (32% compared with 28% of men), although it should be noted that women selected more factors than men in general at this question (mean average 3.2 for women compared with 2.9 for men). These are similar to the findings at Waves 1 and 2. In addition, women were more likely than men to say cleanliness and hygiene was the most important factor (39% compared with 30%). Women (76%) were also more likely than men (71%) to say that they were aware of the hygiene standards where they eat out, as at previous waves.
- In terms of **age**, the youngest and oldest respondents were less likely than those in the middle age group to select cleanliness and hygiene as an important factor (59% of those aged 16-24, 60% of those aged 75 and over) while those aged 35-54 were more likely to select this factor (69%). At previous waves either the oldest or youngest respondents were less likely to choose this as a factor, but at Wave 3 both age groups were less likely to choose it.
- Reported awareness of hygiene standards when eating out was lowest among those aged 16-24 (65%), and highest among those aged 75 and over (84%). Similar findings were observed at previous waves.

#### Other variations at Wave 3

- Variation by **country of residence** was observed. Respondents in Wales and Northern Ireland were more likely to say that a good hygiene rating was an important factor when deciding where to eat out (38% and 39% respectively) than those in England (30%) and Scotland (21%). Respondents in England were less likely to say they were very aware of the hygiene standards when they ate out (26% compared with 33% to 36% in other countries), while those in Northern Ireland were most likely to say that they were very or fairly aware of hygiene standards (88% compared with 73% to 76% in other countries).
- Variation was observed by **household size**. Among respondents in households of five or more people, 52% said that eating out was less safe than eating at home, compared with 41% of those in single person households.
- Respondents with **children aged under 16** in the household were more likely than those with no children in the household to say that eating out was less safe than eating at home (50% compared with 43%).

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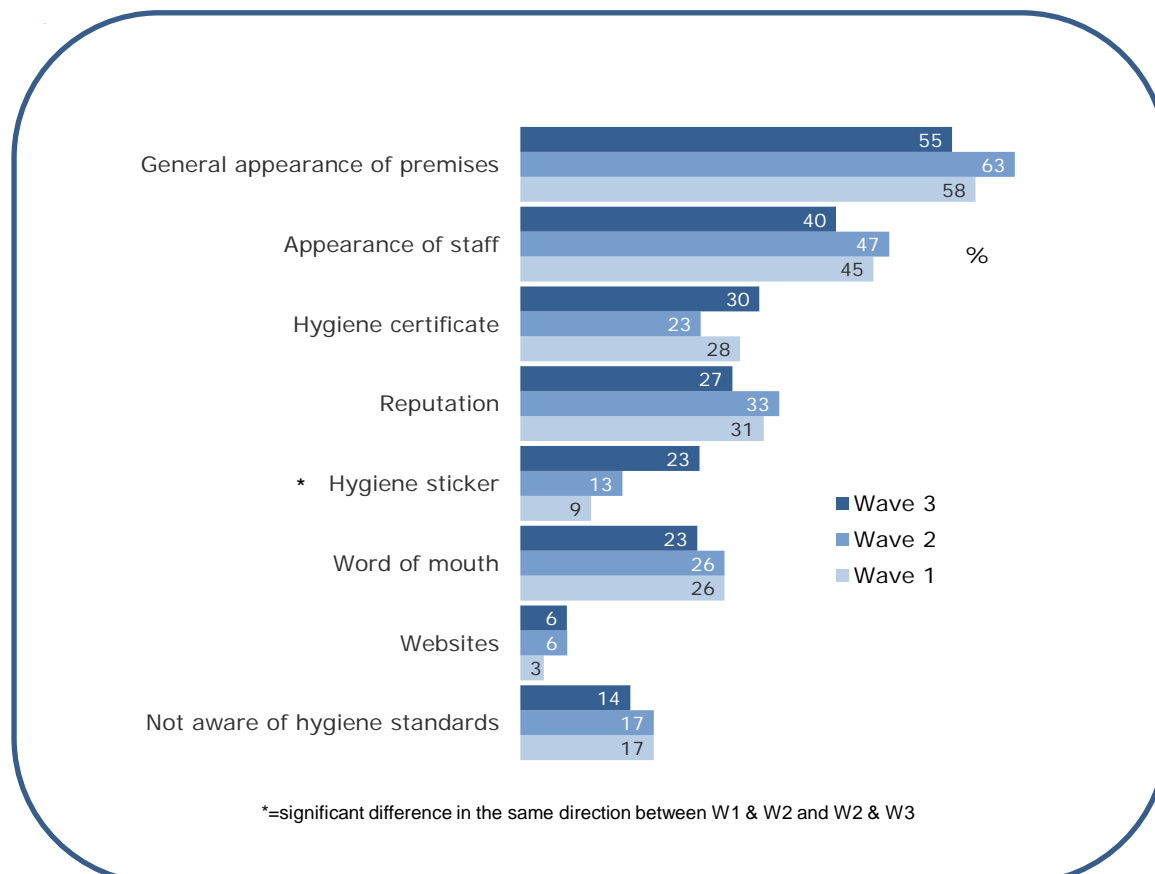
<sup>11</sup> The following variables were analysed to identify statistically significant differences: age, gender, country of residence, household size, presence of children in household, income, socio-economic classification and working status.

- Variation was observed by **income** and **socio-economic group**. Sixty per cent of respondents with an annual household income under £10,400 said cleanliness and hygiene was an important factor when deciding where to eat out, compared with 68% of those with a higher household income. Sixty-one per cent of those in managerial and professional households said that good service was an important factor when deciding where to eat out, compared with 53% of those in intermediate and routine / manual households.
- Respondents who were **employed** were more likely to say that cleanliness and hygiene was an important factor when deciding where to eat out (68%) than those who were retired (63%) or unemployed (51%).

## 4. Awareness and use of hygiene standards indicators

### 4.1 Indicators of food hygiene standards

Figure 4.1 Indicators used to inform hygiene standards (Waves 1, 2 and 3)



Source: Q2\_38 How do you know about the hygiene standards of the places you eat out at or buy food from?  
 Note: respondents were able to give multiple answers

Base: All respondents who eat out<sup>12</sup>– Wave 1 (one third of total sample - 983); Wave 2 (3,097); Wave 3 (3,307)

- As at Waves 1 and 2, respondents at Wave 3 were most likely to say that they used appearance to judge the food hygiene standards of eating establishments, with the most commonly cited indicators being general appearance of premises (55%) and appearance of staff (40%). Reputation was mentioned by 27% of respondents. However, the proportions citing each of these factors were lower than at Wave 2.

<sup>12</sup> These figures have been re-based on all respondents who ever eat out in order to display the total level of awareness of different sources.

- The proportion of respondents mentioning a hygiene certificate (30%) was similar to that at Wave 1, compared with 23% at Wave 2. The proportion who mentioned a hygiene sticker was higher at 23% of respondents compared with nine per cent at Wave 1 and 13% at Wave 2.
- The proportion citing using *either* a hygiene certificate or a hygiene sticker to inform them about hygiene standards was 42% (compared with 32% at Wave 1 and 29% at Wave 2). It is possible that these terms are used interchangeably by some respondents, although greater reporting of using stickers compared with Waves 1 and 2 suggests some differentiation is made.
- Some variations by **country of residence** were apparent in the proportion of respondents who reported that they used either a food hygiene sticker or certificate to check hygiene standards of an establishment prior to eating out.
- Respondents who ate out living in Northern Ireland and Wales were more likely to mention using a hygiene certificate or sticker (56% and 54% respectively) than those in England (43%), or Scotland (26%). While these proportions were higher than at Wave 2 for England (from 28%) and Wales (33%), there was no statistically significant increase for Scotland (24%) and Northern Ireland (48%).

## 4.2 Recognition and use of the food hygiene rating schemes

Respondents were shown images of certificates and stickers for the Food Hygiene Rating Scheme (FHRS) in England and Northern Ireland, the Food Hygiene Rating Scheme (FHRS) in Wales, the Food Hygiene Information Scheme (FHIS) and the Scores on the Doors (SotD) scheme that previously operated in many London Boroughs<sup>13</sup> and were asked whether they had ever seen any of them before.

FHRS sticker and certificate (England and Northern Ireland):



FHIS sticker and certificate (Scotland):



FHRS sticker (Wales):

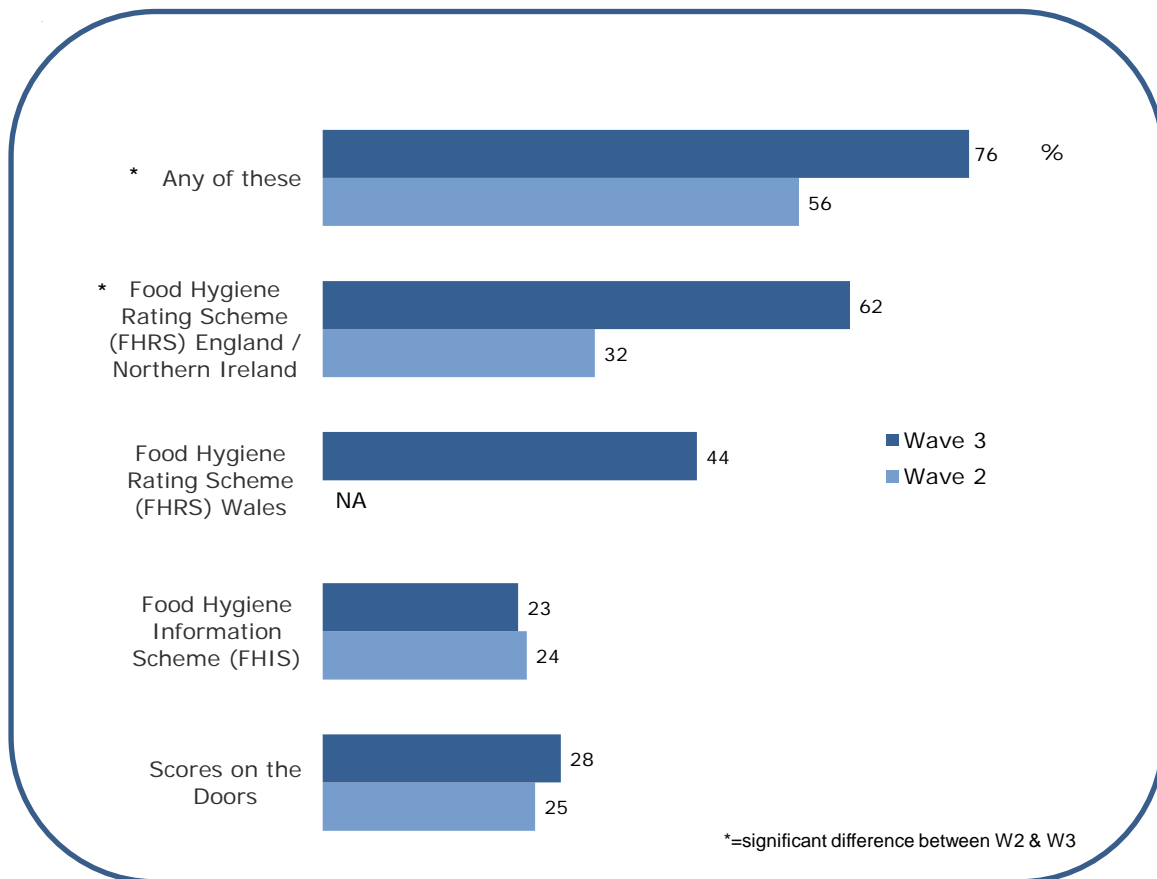


SotD sticker and certificate:



<sup>13</sup> This last scheme is a set of locally delivered schemes which local authorities have replaced with the national FHRS / FHIS scheme. It was decided to include it in the question using the stickers and certificates used in London as this was the most widespread initiative outside of the FHRS / FHIS.

**Figure 4.2 Recognition of stickers or certificates belonging to different food hygiene rating schemes (Waves 2 and 3)**



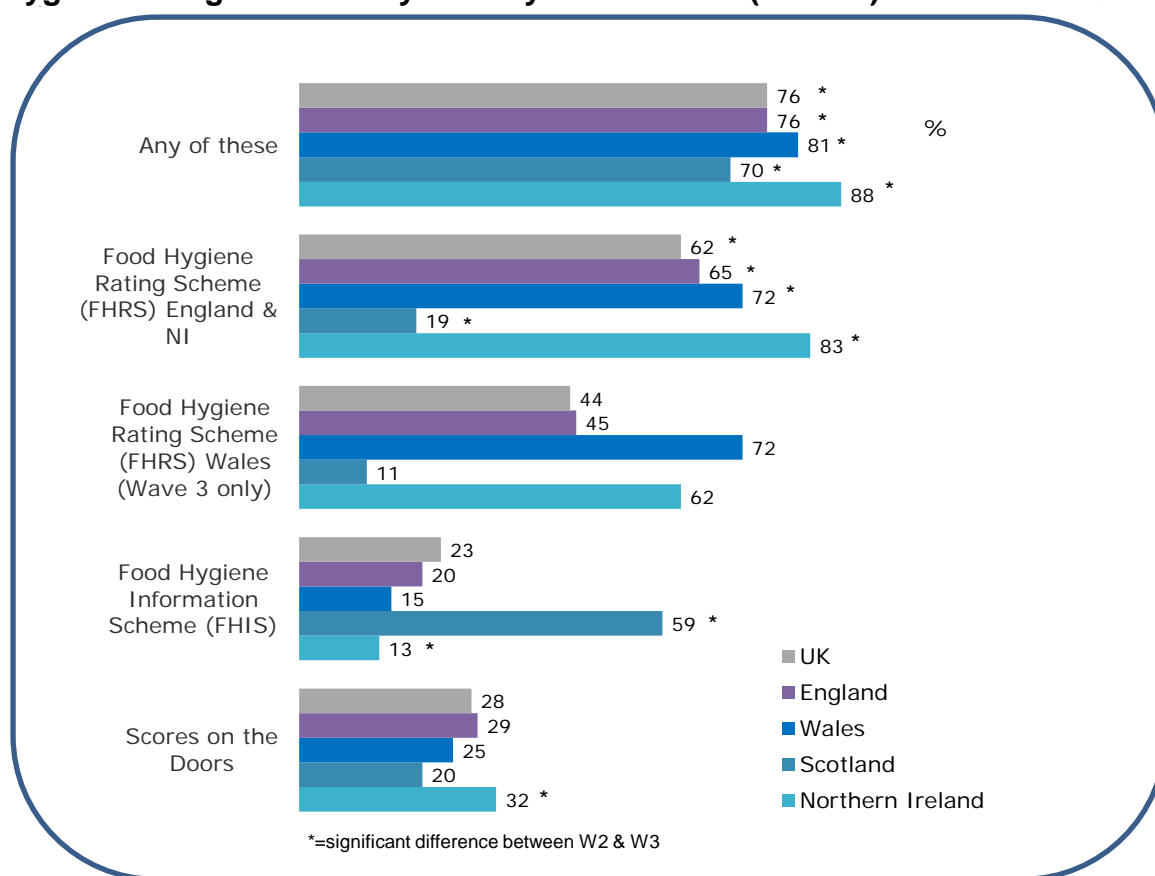
Source: Q12\_1 Have you seen any of these before?

Base: All respondents Wave 2 (3,231); Wave 3 (3,453)

- Around three-quarters (76%) of respondents reported having seen any of the stickers and certificates belonging to different food hygiene rating schemes, compared with 56% at Wave 2. This was driven by higher recognition of the sticker and certificate from the FHRs in England and Northern Ireland (62% at Wave 3 compared with 32% at Wave 2)<sup>14</sup>.
- The FHRs in Wales was included separately in the questionnaire for the first time at Wave 3, and 44% of respondents said they recognised the sticker.
- There was no change in recognition for the certificates or stickers from the FHIS (23%) or the SotD scheme (28%).

<sup>14</sup> Although similarities between the English and Welsh stickers may have contributed to reported levels of awareness of the English sticker, i.e. respondents may not accurately differentiate between the two.

**Figure 4.3 Recognition of stickers or certificates belonging to different food hygiene rating schemes by country of residence (Wave 3)**



Source: Q12.1 Have you seen any of these before?

Base: All respondents Wave 3 – UK (3,453); England (1,951); Wales (503); Scotland (475); NI (524)

- Recognition of any scheme was highest in Northern Ireland with 88% of respondents reporting recognition (compared with 78% at Wave 2) and lowest in Scotland at 70% (compared with 54% at Wave 2). The level of recognition at Wave 3 was higher in all four countries than at Wave 2, particularly in England (76% compared with 55%) and Wales (81% compared with 59%).
- Recognition of the stickers and certificates for the FHRS for England and Northern Ireland was highest among respondents in Northern Ireland, and higher than at Wave 2 (83%, compared with 66% at Wave 2). There was a similar pattern among respondents in England (65% reported seeing them at Wave 3 compared with 33% at Wave 2), Wales (72% compared with 43%), and Scotland (19% compared with 12%)<sup>15</sup>.
- Seventy-two per cent of respondents in Wales recognised the FHRS sticker for Wales.<sup>16</sup>

<sup>15</sup> The FHRS is not used in Scotland, but residents of Scotland may have seen it in the other countries. This also applies to each of the other schemes, particularly if respondents live on country borders.

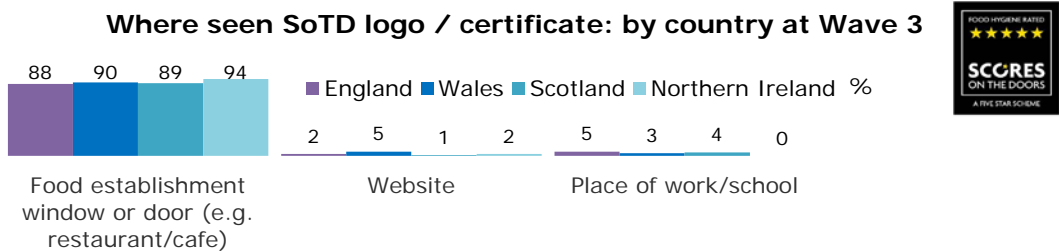
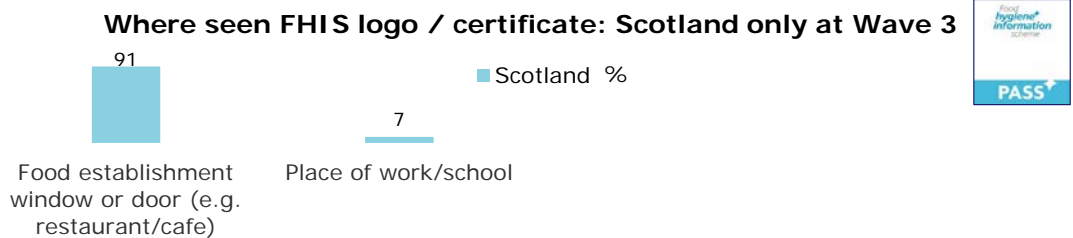
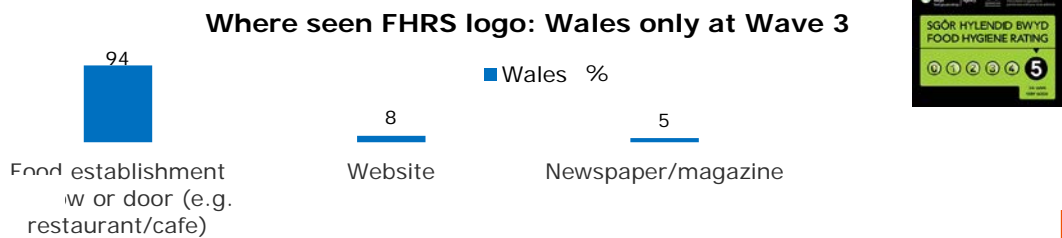
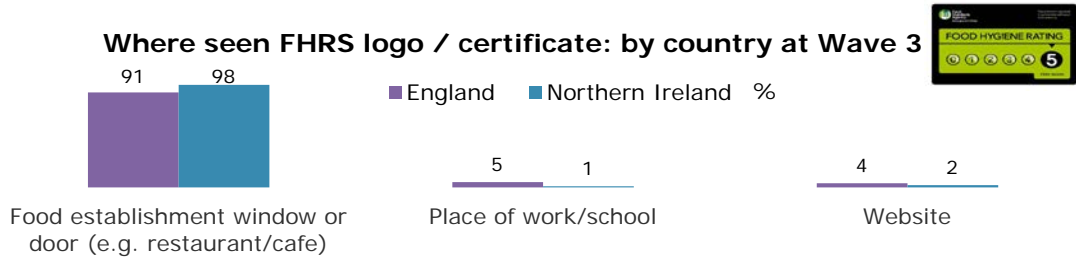
<sup>16</sup> Similarities between the English and Welsh stickers may have contributed to reported levels of awareness of the Welsh sticker by respondents who were not Wales residents i.e. respondents may not accurately differentiate between the two.



- Recognition of any FHRS sticker or certificate (i.e. the sticker or certificate from the England and Northern Ireland scheme or the sticker from the Wales scheme) among respondents in England, Wales and Northern Ireland was 68% overall.
- Recognition of the Scottish FHIS sticker and certificate was highest for respondents in Scotland at 59%, compared with 44% at Wave 2, with lower awareness in the other countries. In Northern Ireland, 13% of respondents at Wave 3 recognised them, compared with 20% at Wave 2.
- Recognition of the SotD certificate and sticker in England (29%), Scotland (20%) and Wales (25%) was roughly the same as at Wave 2. Awareness in Northern Ireland (32%) was lower than at Wave 2 (41%).
- Awareness levels of the FHRS and FHIS are likely to vary by country of residence as the extent of publicity accompanying the launch of FHRS and FHIS has also varied between countries and by local authority. For example, Wales and Northern Ireland conducted public information campaigns before the scheme was established while local authorities in England and Scotland were mostly reliant on publicity through the local media. Publicity for the FHRS was particularly widespread in Northern Ireland.
- The level of local authority participation is now similar across the countries. Local authority participation in the FHRS is voluntary in Northern Ireland and England. However, since its launch in October 2010, the scheme has been adopted by all areas of Northern Ireland and all but one local authority in England. In Wales the scheme is now running in all areas, and display of rating stickers was made mandatory in November 2013. In Scotland, all 32 local authorities have now launched the FHIS.

### 4.3 Where the certificate or sticker had been seen

Figure 4.4 Where respondents had seen the scheme images (Wave 3)



its  
 (158); FHRs England & NI – England (1,224); NI (412); FHRs Wales – Wales (339); FHIS – Scotland (264)

**The FSA recommends that businesses should display the stickers and certificates at their premises in a place where people can easily see them when they visit. In Wales, from 28 November 2013, it has been mandatory for any new FHSR stickers that include the Welsh Government logo to be displayed by businesses in a prominent place – such as the front door, entrance or window.**

- Respondents who reported that they had seen any of the types of certificates or stickers before were asked, unprompted, where they had seen it. As was the case at Wave 2, overwhelmingly, the most common place respondents reported was the window or door of a food establishment (with 88% to 98% of respondents who had seen a certificate or sticker reporting this).

#### **4.4 Use of food hygiene rating schemes**

- After being shown images of certificates and stickers from the hygiene standards schemes, respondents were asked if they had used a hygiene scheme like this in the past 12 months to check an establishment's rating before deciding to eat there. Overall, 20% of respondents reported that they had used a hygiene scheme in the past 12 months, compared with 10% at Wave 2.
- Respondents who reported using a scheme indicated that the most common way that they had checked the information was to look for information displayed at the food establishment (79%), lower than 89% at Wave 2. One in four (25%) Wave 3 respondents said they had used the internet to check a rating, compared with 17% at Wave 2.
- Of those respondents who said they had used a rating scheme in the last 12 months, 91% reported that they had found it helpful, and 51% said it was very helpful, similar to the results at Wave 2.

## 4.5 Variation in awareness of hygiene standard indicators by different groups in the population<sup>17</sup>

### Variation by gender and age, including differences between the survey waves

- There was no statistically significant variation by **gender** in awareness of the various food hygiene rating scheme stickers and certificates and, unlike at Wave 2, men were no more likely than women to be aware of the FHRS in England and Northern Ireland.
- As at Wave 2, awareness of hygiene standards and hygiene certificates or stickers varied by **age**. Forty nine per cent of respondents aged 16-44 who ate out said they used stickers or certificates as one of the ways to judge the hygiene standards of an establishment, compared with 15% of those aged 75 and over who ate out.
- Recognition of any scheme was lower among those aged 75 and over (37%) particularly compared with those aged under 45 (86%). Recognition of each of the individual schemes was lower among older respondents. For example, while 73% of those aged 16-44 recognised the FHRS sticker or certificate for England and Northern Ireland, 45% of those aged 65-74 and 28% of those aged 75 and over recognised the same sticker or certificate.
- A higher level of recognition of the FHRS certificates and stickers compared with Wave 2 was recorded for respondents of all ages.
- The variation in recognition across age groups was similar for the FHRS in Wales.
- There was also lower recognition among older respondents for the FHIS (27% of those aged 16-44 compared with seven per cent of those aged 75 and over) but recognition among those aged 16-24 was lower at 27% at Wave 3 compared with 41% at Wave 2.
- Recognition of the SotD sticker or certificate was also lower for older respondents, with recognition highest among those aged 16-24 (35% compared with 30% of those aged 25-64, 25% of 65-74 year olds and 13% of those aged 75 and over), similar to the findings at Wave 2.
- Younger respondents were also more likely to report having used one of the four food hygiene rating certificates or stickers in the last 12 months, with 29% of 16-24 year olds reporting this compared with six per cent of those aged 75 and over. Respondents of all ages were more likely than at Wave 2 to report using them, but the difference was greatest for those aged 16-24 (11% at Wave 2).

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<sup>17</sup> The following variables were analysed to identify statistically significant differences: age, gender, country of residence, household size, presence of children in household, income, socio-economic classification and working status. There were no significant differences by gender.

### Other variations at Wave 3

- Looking at variation by **household size**, recognition and use of the schemes was lower in single person households (63% recognition and 12% use) than in larger households (79% recognition and 22% use).
- Respondents with **children aged under 16 in the household** were more likely to recognise any of the schemes (88%) than those without children in the household (71%) particularly those with children aged under six in the household. Three in four (75%) of those with children aged under 16 in the household and 79% of those with children under the age of six in the household recognised the FHRS sticker or certificate for England and Northern Ireland, compared with 57% of those with no children in the household; 52% of respondents in households with children aged under 16 and 56% of those in households with children aged under six recognised the FHRS sticker for Wales compared with 40% of those without children in the household.
- Around one in four of those with children aged under 16 in the household reported using one of the schemes in the past 12 months to check an establishment's hygiene standards (26%) compared with 18% of those without children in the household.
- Respondents with the **highest household income** and from **managerial / professional households** were also more likely to recognise the stickers and certificates, although they were no more likely to report using them than those from lower income households or from routine / manual or intermediate occupation households. In total, 84% of those with a household income of over £52,000 recognised one of the schemes, compared with 64% of those with a household income below £10,400. One in four (25%) of those in managerial / professional households recognised the FHIS sticker or certificate compared with 20% in intermediate occupation households.
- Variation by **working status** reflected that by age, with retired respondents less likely to recognise each scheme and report using such schemes than working or unemployed respondents.