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Survey
UK Bulletin

The 2014

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Survey

UK Bulletin 4

Experience of food poisoning and attitudes towards food safety and food production

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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.

Foreword

This bulletin presents a descriptive overview of selected findings from Wave 3 of the Food and You survey, commissioned by the Food Standards Agency (FSA or the Agency). Much of the Agency's work with the public is concerned with informing and influencing the ways in which food is purchased, stored, prepared and consumed. Food and You provides data about the prevalence of different reported behaviours, attitudes and knowledge relating to these topics.

Waves 1 and 2 of the Food and You survey were carried out in 2010 and 2012 respectively. Wave 3 was conducted in 2014 and consisted of 3,453 interviews from a representative sample of adults aged 16 and over across the UK. Wave 3 builds on and extends the previous findings.

The key findings from Wave 3 have been published in four separate bulletins, one for each of the following main topics:

- Eating, cooking and shopping
- Food safety in the home
- Eating outside the home
- Experience of food poisoning and attitudes towards food safety and food production

In addition to the bulletins, an executive summary has been published which presents key findings from across the entire survey.

This bulletin provides a descriptive overview of the key findings from Wave 3 in relation to experience of food poisoning and attitudes towards food safety and food production.

Background and objectives

Role of the FSA

The FSA was created in 2000 as a non-ministerial, independent government department governed by a Board whose members have extensive knowledge and experience in a wide range of sectors relevant to the FSA. The Agency was set up to protect public health from risks which may arise in connection with the consumption of food, and otherwise to protect the interests of consumers in relation to food.

The FSA is responsible for food safety and hygiene across the UK, and is committed to ensuring the general public can have trust and confidence in the food they buy and eat.

In providing guidance on food safety to consumers, the Agency aims to minimise the risk of food poisoning. Advice generally relates to four aspects of food hygiene: cleaning, cooking, cross-contamination and chilling (collectively known as the 4 Cs), with advice provided on each aspect. Guidance is also given on the use of date labels (such as 'use by' and 'best before' dates) and storage instructions on foods to help ensure the safety of food eaten at home.

The Food and You survey

In 2009, the FSA commissioned a consortium comprising TNS BMRB, the Policy Studies Institute (PSI) and the University of Westminster to carry out Wave 1 of Food and You. The main aim of this survey was to collect quantitative information as a baseline on the UK public's reported behaviour, attitudes and knowledge relating to food issues (such as food safety and healthy eating). The results from this survey provided an extensive evidence base to support policy making at the FSA and across other government departments.

Waves 1 and 2 of the Food and You survey were conducted by the same consortium in 2010 and 2012 respectively. Reports of the findings and methodological details are available on the FSA

website¹. Specific examples of use of the findings include results from Wave 1 being used to determine the theme of the 2012 FSA Food Safety Week² and findings from Wave 2 informing FSA public campaigns on food safety. Secondary analysis of the Waves 1 and 2 data has explored domestic food safety practices³ and the relationships between nutrition and food safety⁴. Wave 3 was carried out in 2014 by TNS BMRB.

Prior to 2010, the FSA was responsible for food safety and nutrition policy across the UK. Accordingly, Wave 1 of the Food and You survey contained questions covering both healthy eating and food safety, and the findings were reported together. During Wave 1, responsibility for nutrition policy (healthy eating) was transferred in England and Wales to the Department of Health (DH) and the Welsh Government respectively. Nutrition policy in Scotland and Northern Ireland remains the responsibility of the Agency. Waves 2 and 3, therefore, focussed solely on food safety issues for respondents in England and Wales but included an additional question module on healthy eating for respondents in Scotland and Northern Ireland. This bulletin covers the UK wide food safety questions only; separate bulletins published for Scotland and Northern Ireland will include findings from the healthy eating module of questions⁵.

The objectives for Wave 3 of the Food and You survey were to collect quantitative information to enable the Agency to:

- Explore public understanding of, and engagement with, the Agency's aim of improving food safety
- Identify specific target groups for future interventions (e.g. those most at risk or those among whom FSA policies and initiatives are likely to have the greatest impact)
- Monitor changes over time (compared with data from Waves 1 and 2 or from other sources) in reported attitudes and behaviour
- Broaden the evidence base and develop indicators to assess progress in fulfilling the Agency's strategic plans, aims and targets.

About this bulletin

Self-reported behaviours

Interviews as a data collection method do not necessarily capture people's actual practices. What respondents say in interviews about what they do and think is necessarily *reported* for a number of reasons, including recall not being accurate, certain behaviours being habitual and therefore possibly difficult to recall, and desirability bias – described further below. Here self-reported behaviour is used as a proxy for actual behaviour. Where the report refers to behaviour, attitudes or knowledge, the fact that the data refer to reported behaviour must always be borne in mind.

When developing the Food and You questionnaire, it was apparent that the risk of social desirability bias was high i.e. respondents tended to answer questions based on what they thought they ought to say, rather than reflecting what they actually do, know or think. In particular, there were a number of topics in the questionnaire for which respondents might be reluctant to report behaviour which goes against a generally well known 'best practice' (for example, not washing their hands before cooking or preparing food). The Food and You questionnaire was carefully designed to limit this as far as possible by asking questions about behaviour in specific time periods (e.g. asking whether a respondent did something 'in the last seven days' rather than 'usually') and framing questions in a neutral way.

¹ 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 and the Wave 2 report can be found at: http://www.foodbase.org.uk/admintools/reportdocuments/805-1-1460_Wave_2_Main_Report.pdf

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

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

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

⁵ 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.

Questionnaire changes between waves

To reflect the changing responsibilities of the FSA, the focus of the survey content was changed between Wave 1 and Wave 2. To minimise any effects caused by changing the order of the questions attempts were made to keep the structure of the questionnaire as similar as possible between the waves. Despite this, the removal of the healthy eating questions in England and Wales, and further revisions of the food safety questions introduced unavoidable differences between the two waves of the survey. As the context in which survey questions are asked is known to influence the way respondents reply we cannot rule out the possibility that differences in responses between Waves 1 and 2 may have been partly or wholly because of changes to the questions in general and to the changed context resulting from removing the 'healthy eating' questions in particular. Further changes were made to the questionnaire at Wave 3. Again, whilst efforts were made to keep the structure of the questionnaire as similar as possible to the Wave 2 questionnaire, unavoidable differences were introduced between these two waves of the survey. That observed differences could be an effect of changes to the questionnaire should be kept in mind when considering the findings.

Where questions have remained consistent across the waves of the survey, statistical analysis has been used to determine whether results have changed significantly over time. Although having three data points now means it is possible to see trends starting to emerge, doing so is inevitably still tentative, whereas further waves of data collection would allow greater confidence in identifying trends.

At Wave 1 of the survey, in order to cover additional topics without over-burdening respondents, three question modules (eating arrangements, eating out and shopping patterns) were each asked of a random third of respondents. At Waves 2 and 3, all question modules were asked of all respondents. The larger sample sizes for these modules at Waves 2 and 3 mean that smaller differences observed between Waves 2 and 3 are statistically significant compared with differences between Wave 1 and Waves 2 or 3.

The Food and You Technical Report (published separately) provides a summary of questionnaire changes between Wave 2 and Wave 3.

Reporting conventions

Unless stated otherwise, where comparisons are made in the text between different population groups or variables, only those differences found to be statistically significant at the five per cent level are reported. In other words, differences as large as those reported have no more than a five per cent probability of occurring by chance.

Percentages may not add to 100% as a result of rounding.

Topics covered

The Food and You survey collected data on a wide range of topics. As a result it is not feasible for this series of bulletins to present detailed analysis of all of the questions. In particular, only selected socio-demographic variables have been analysed to uncover statistically significant differences. These variables were identified by the FSA as of key interest, providing the most useful information about sub-group variation at this initial stage of data analysis. The identified variables were: age, gender, country of residence, household size, presence of children in household, income, socio-economic classification, and working status. Analysis of ethnicity has not been included in this report due to the small base numbers for 'non-white' respondents. Secondary data analysis will be conducted to explore these, and other variables, in more detail in due course. Full data are available in the UK Data Archive⁶ and at data.gov.uk⁷ for further analysis. Variation by age and gender has been considered across the three waves, while only Wave 3 data was examined for variation by the other demographic variables.

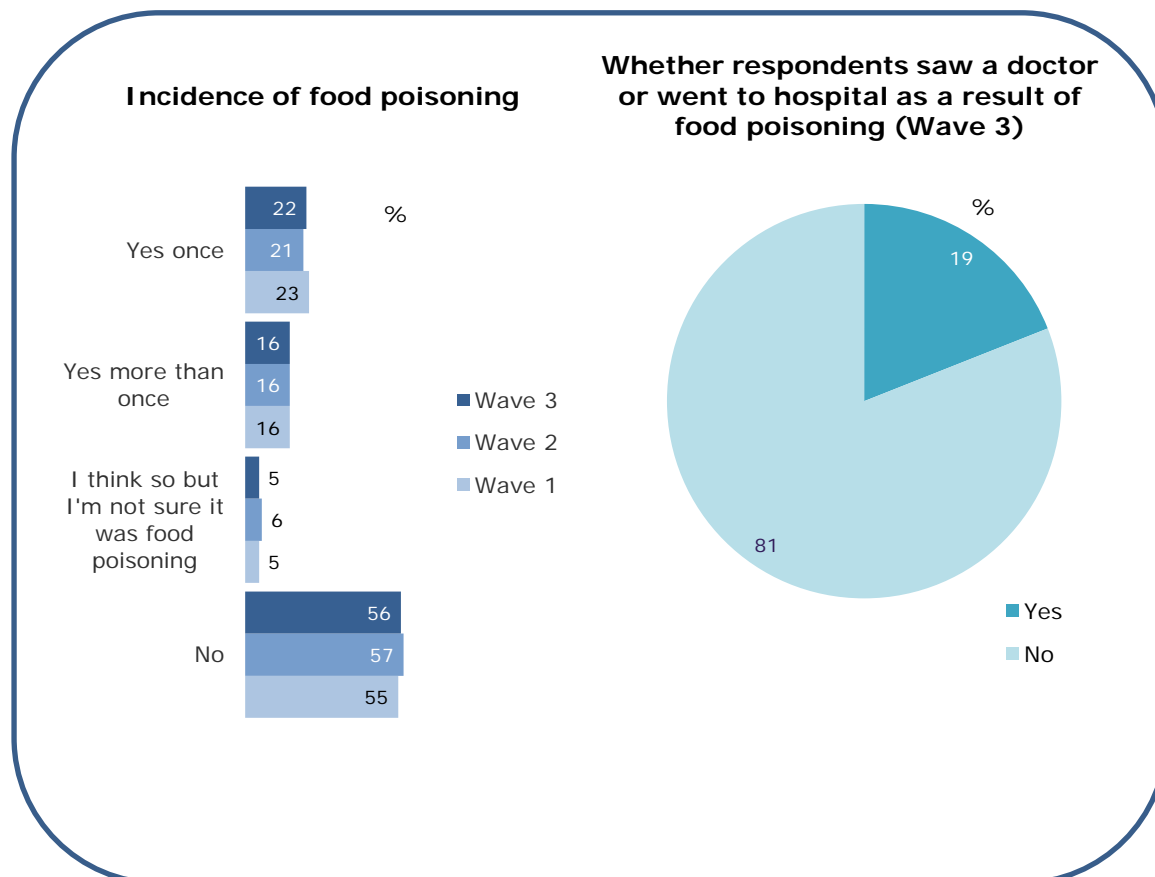
⁶ <http://www.data-archive.ac.uk/>

⁷ <http://data.gov.uk/>

1. Food poisoning

1.1 Experience of food poisoning

Figure 1.1 Incidence of food poisoning and whether respondents saw a doctor / went to hospital (Waves 1, 2 and 3)



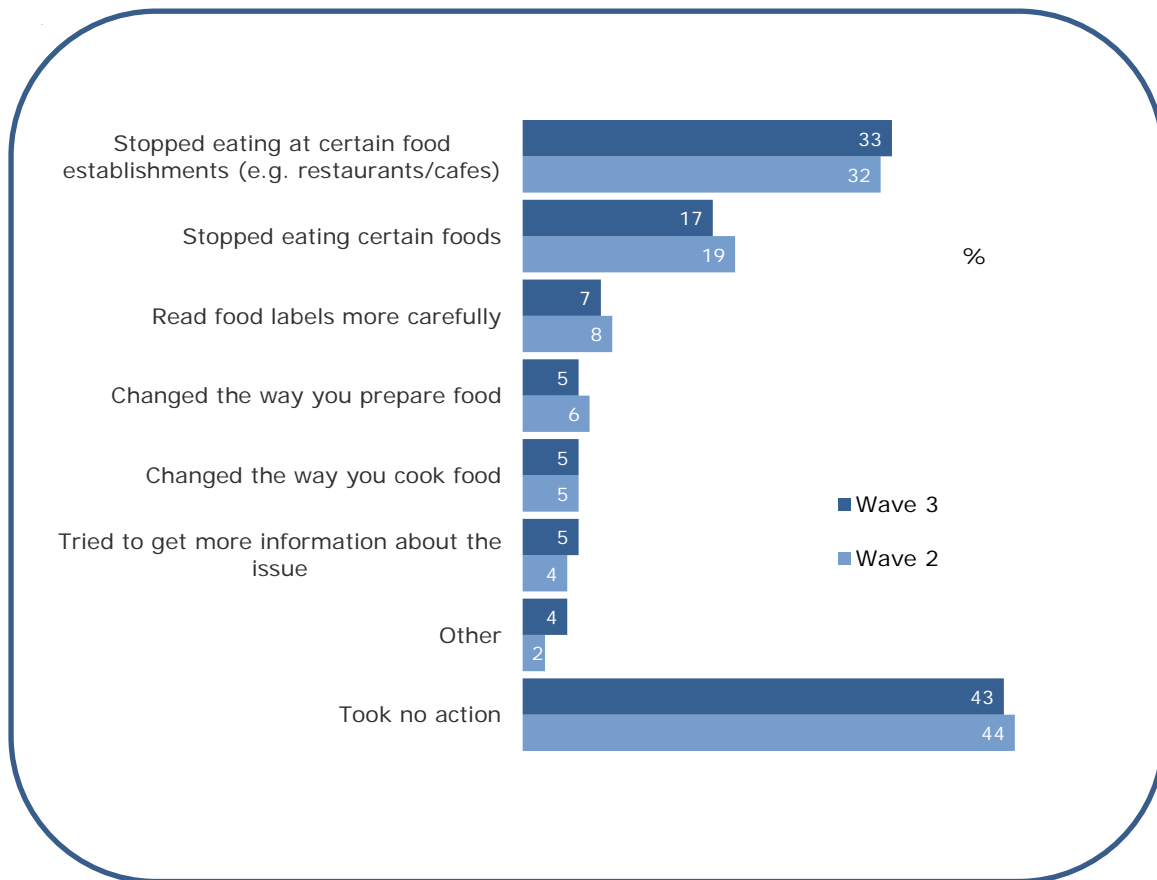
Source: Q4_28 Have you personally ever had food poisoning? & Q4_28a Thinking about the most recent occasion you had food poisoning, did you see a doctor or go to hospital because of it?

Base: Q4_28 All respondents – Wave 1 (3,163); Wave 2 (3,231); Wave 3 (3,453); Q4_28a All respondents who have had food poisoning in the past year – Wave 3 (202)

- Overall, 39% of respondents reported that they had ever had food poisoning (22% once and 16% more than once).
- Fifty-six per cent of respondents reported they had never had food poisoning and five per cent said that they were not sure.
- Six per cent of respondents said they had experienced food poisoning in the last year, with one per cent reporting they had experienced it more than once during this time.

- Of those who reported that they had experienced food poisoning in the last year, 19% said they had visited a doctor or gone to hospital as a result. Of those visiting a doctor, 69% (31 respondents) said that their food poisoning had been medically diagnosed. When expressed as a proportion of all respondents who said they had food poisoning in the past year, this is 13%.
- Of the 31 respondents in the survey saying their food poisoning was medically diagnosed, six reported having *Escherichi coli (E. coli)*, six reported having viral food poisoning, four reported having campylobacter, and one reported salmonella. Five respondents reported having something else. The remainder said that they did not know what it was.

Figure 1.2 Action taken as a result of having food poisoning on most recent occasion (Waves 2 and 3)



Source: Q4_28B In response to when you had food poisoning (most recently) have you done any of the following?

Base: All respondents who have had food poisoning – Wave 2 (1,293); Wave 3 (1,411)

- As a consequence of having had food poisoning, 33% of respondents reported that they had stopped eating at certain food establishments and 17% reported that they had stopped eating certain foods. Seven per cent said that they had started reading food labels more carefully.
- Forty-three per cent of respondents who had experienced food poisoning reported that they had taken no action as a consequence. There was no statistically significant change from Wave 2 in actions reported.

1.2 Variation in experience of food poisoning by different groups in the population⁸

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

- Variation by **gender** in experience of food poisoning was apparent, with men more likely than women to report having had food poisoning more than once (20% compared with 13%). While women were no more likely than men to say they had ever had food poisoning, they were more likely to say that they had gone to see a doctor if they had had food poisoning in the last year (28% of women who said that they had experienced food poisoning in the last year went to see a doctor or went to hospital because of it compared with 11% of men). Similar findings were observed at Waves 1 and 2.
- **Age** was associated with experience of food poisoning. Respondents aged 75 and over were least likely to report having ever experienced food poisoning (23%)⁹ followed by those aged 16-24 (29%), while 44% of respondents aged 25-64 reported ever having had food poisoning. Similar findings were observed at Wave 1.

Other variations at Wave 3

- Respondents in **Northern Ireland** were less likely to report having had food poisoning (25%) than those in other countries: 32% in Scotland, 35% in Wales and 40% in England.
- Respondents with **children in the household** were more likely to report having experienced food poisoning (42% of those with children aged 16 or under in the household, and 47% of those in households with children aged under six) than those in households with no children (37%).
- Respondents with an annual **household income**¹⁰ above £26,000 were more likely than those in households with incomes below £26,000 to report experiencing food poisoning (44% compared with 35%). Similarly, respondents in **managerial / professional** households were more likely to report having had food poisoning (45%) than those in intermediate (39%) or routine / manual households (33%).
- Respondents **in employment** were more likely to report having experienced food poisoning (44%) than those who were retired (31%).

⁸ 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 statistically significant differences by household size.

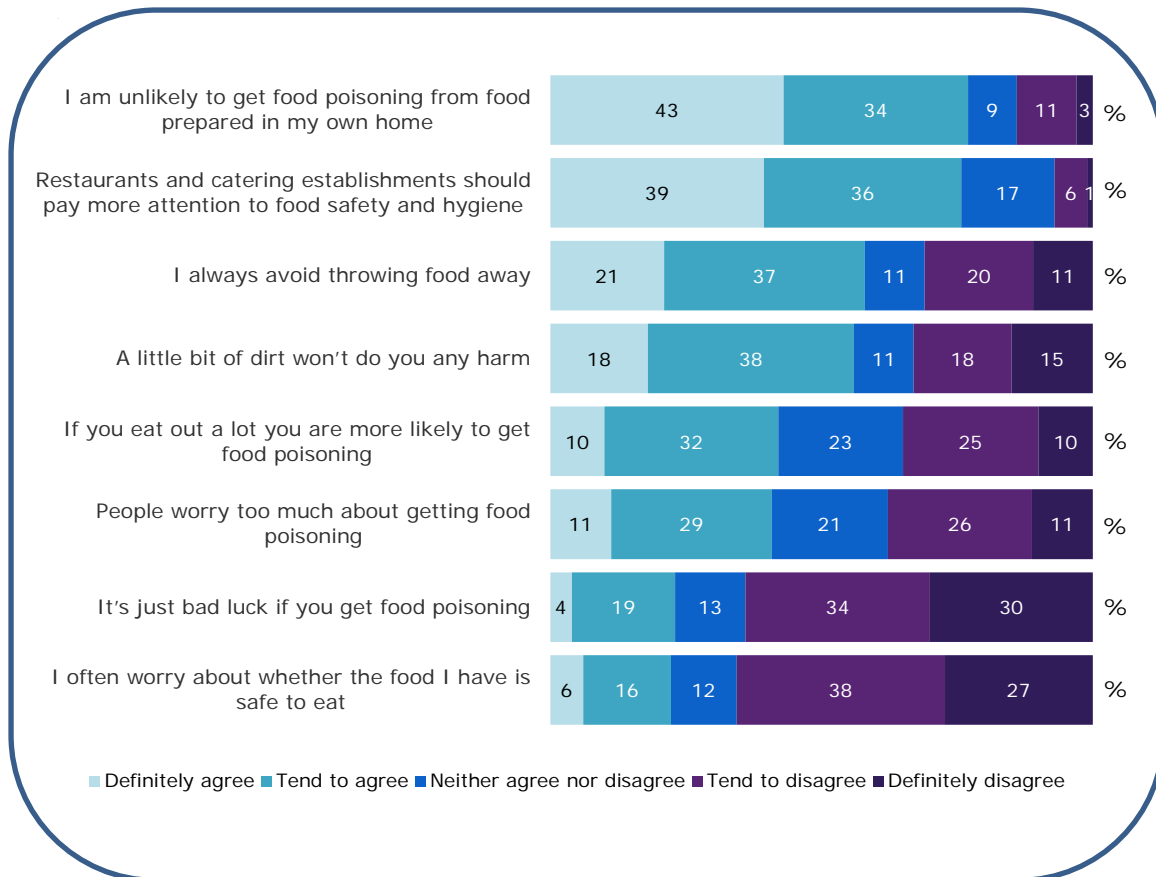
⁹ It is thought that this may be an artefact of lower recall, whereby older respondents do not remember having had food poisoning, or association, whereby they do not think that what they experienced would be classed as food poisoning.

¹⁰ 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%.

2. Attitudes towards food safety

2.1 Level of agreement with statements about food safety

Figure 2.1 Attitudes towards food safety (Wave 3)



Source: Q4_27 And now I will read out a few statements people have made and would like you to tell me whether or not you agree with them?

Base: All respondents (3,453)

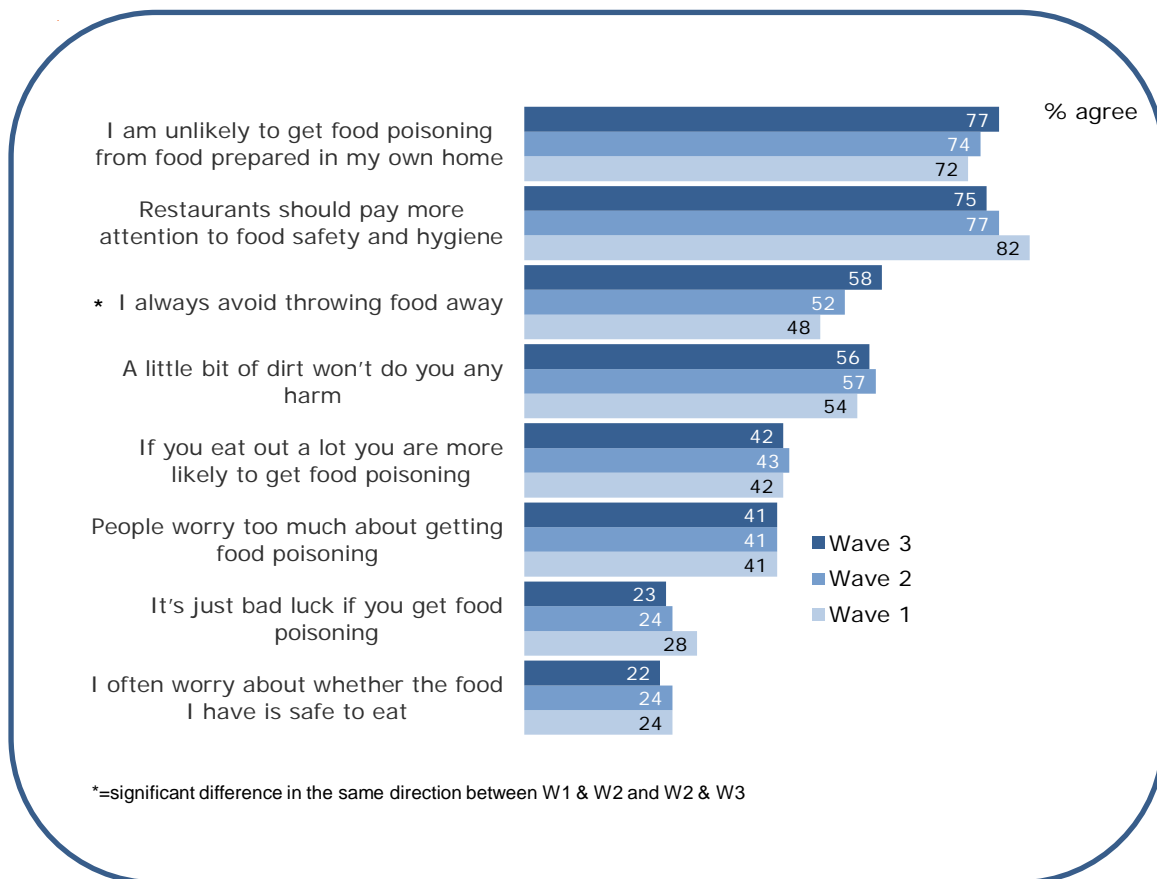
- Around four in ten respondents said they definitely agreed that they were unlikely to get food poisoning from food prepared in their own home (43%), and that restaurants and catering establishments should pay more attention to food safety and hygiene (39%). Around three in four agreed¹¹ with each statement (77% and 75% respectively).
- Around a fifth of respondents said they definitely agreed that they always avoid throwing food away (21%) and that a little bit of dirt will not do you any harm (18%), and over half agreed with each of these statements (58% and 56% respectively).

¹¹ 'Agreed' includes those who responded either 'Definitely agree' or 'Tend to agree'. This definition applies throughout this section of the report.

- While only one in ten definitely agreed, 42% agreed that if you eat out a lot you are more likely to get food poisoning while 35% disagreed.¹² Around a quarter (23%) agreed that it is just bad luck if you get food poisoning while 63% said they disagreed.
- Over one in five (22%) agreed that they often worry about whether the food they have is safe to eat, although only six per cent definitely agreed. Respondents were more likely to agree that people worry too much about getting food poisoning (41%) although almost as many disagreed (37%).

¹² 'Disagreed' includes those who responded either 'Definitely disagree' or 'Tend to disagree'. This definition applies throughout this section of the report.

Figure 2.2 Attitudes towards food safety (Waves 1, 2 & 3)



Source: Q4_27 And now I will read out a few statements people have made and would like you to tell me whether or not you agree with them?

Base: All respondents: Wave 1 (3,163), Wave 2 (3,231), Wave 3 (3,453)

- These statements were also included at Waves 1 and 2 of the Food and You survey, allowing changes in attitudes over time to be monitored. Whilst some changes were statistically significant, the changes were generally small in size.
- The proportion of respondents agreeing that they are unlikely to get food poisoning in their own home was higher at Wave 3 (77%) than at Wave 1 (72%).
- Agreement with the statement 'I always avoid throwing food away' was higher at Wave 3 (58%) than at Wave 1 (48%) and Wave 2 (52%). The difference was greatest in the proportion of respondents who definitely agreed with the statement (21% at Wave 3 compared with 15% at Wave 1).
- The proportion at Wave 3 agreeing that restaurants and catering establishments should pay more attention to food safety and hygiene was similar to that at Wave 2 (75% and 77% respectively) but below that at Wave 1 (82%). Strong agreement in particular was lower at Wave 3 (39%) than at Wave 1 (47%).
- The proportion of respondents who agreed that it's just bad luck if you get food poisoning was also similar to that seen at Wave 2 (23% compared with 24%) but below that at Wave 1 (28%).

2.2 Variation in attitudes towards food safety by different groups in the population¹³

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

- There was little variation in attitudes towards food safety by **gender**, although men were slightly more likely than women to agree that if you eat out a lot you are more likely to get food poisoning (44% compared with 39%) and that people worry too much about food poisoning (44% compared with 37%), similar to the variation observed at Waves 1 and 2.
- The proportion of men agreeing that 'you are unlikely to get food poisoning at home' was higher at Wave 3 (78%) than Wave 1 (69%).
- There was also variation in attitude by **age**. In general, respondents aged 75 and over were less likely than other age groups to be concerned about food safety, especially compared with the youngest respondents (aged 16-24). In particular, 91% of those aged 75 and over agreed that you are unlikely to get food poisoning at home, compared with 63% of 16-24 year olds; 46% agreed it is just bad luck if you get food poisoning, compared with 16% of 16-24 year olds; 14% agreed they often worried about whether food is safe to eat compared with 29% of 16-24 year olds and 61% agreed a little dirt would not do you any harm compared with 50% of 16-24 year olds. These were similar to findings at Waves 1 and 2.
- There was also variation by age in the proportion of respondents agreeing that you are more likely to get food poisoning if you eat out a lot: 35% of 16-34 year olds agreed with this statement compared with 42% of those aged 35-64 and 51% of those aged 65 and over. At Wave 1, the proportion of those aged 65 and over agreeing with this statement was higher than at Wave 3 (58%).
- Agreement with the statement 'I always avoid throwing food away' differed by age with 44% of 16-24 year olds agreeing with the statement compared with 59% of those aged 25-74 and 69% of those aged 75 and over. Different levels of agreement were observed compared with those at Wave 1 among all age groups but the difference was greatest for those aged 35-74, with 60% agreeing with the statement at Wave 3 compared with 48% at Wave 1.

Other variations at Wave 3

- Variation in attitude by **country of residence** was observed. Respondents in Northern Ireland were more likely to agree that you are more likely to get food poisoning if you eat out a lot (53% compared with 38% to 42% in the other countries) and that restaurants should pay more attention to food safety (82% compared with 71% to 75% in the other countries). Respondents in Northern Ireland were also more likely to agree that they always avoid throwing food away (64% compared with 54% to 58% in the other countries).

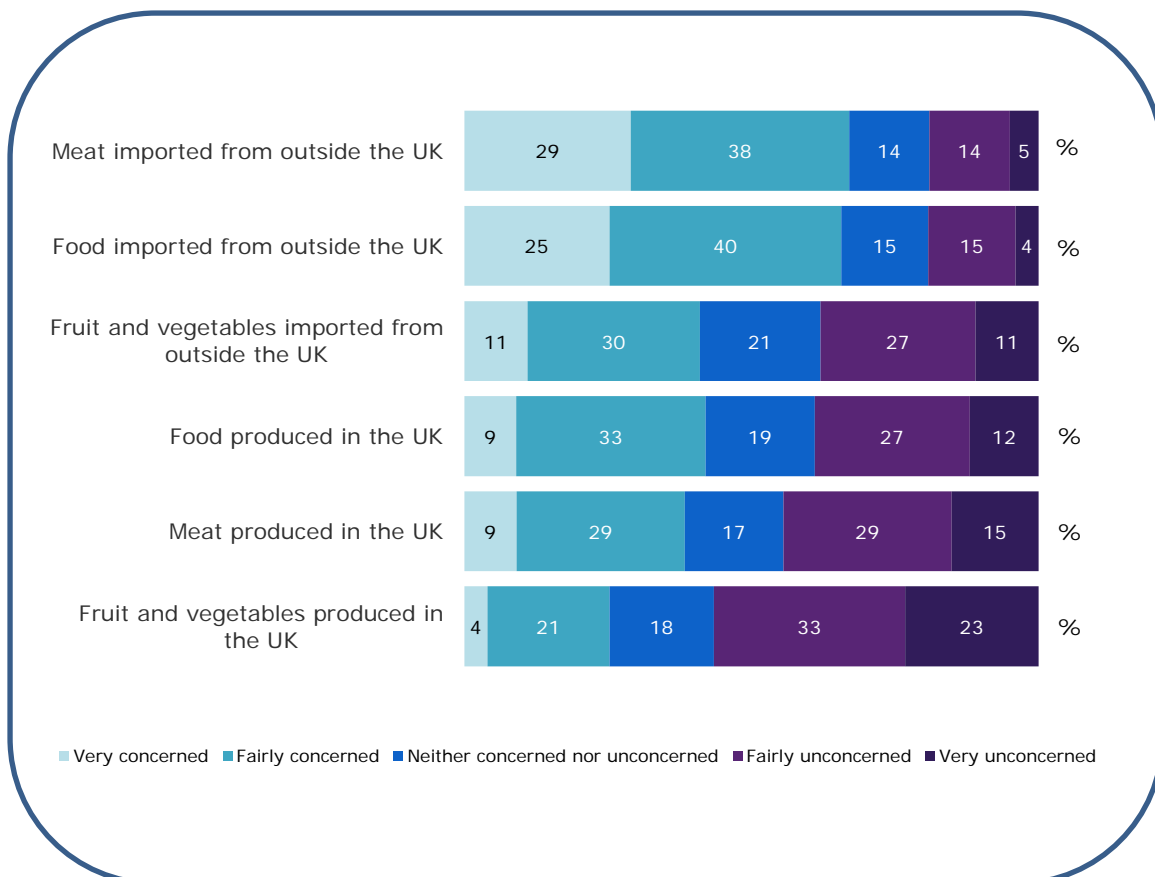
¹³ The following variables were analysed to identify statistically significant differences: age, gender, country of residence, household size, presence of children in household, income, socio-economic classification, and working status.

- Respondents in Scotland were less likely to agree they often worry if food is safe to eat (19% compared with 23% to 25% in other countries).
- Variation was observed by **household size**. Respondents in one person households were more likely than those in two to four person households to agree that they always avoid throwing out food (65% compared with 56%). Respondents in two to five person households were more likely than those in one person households to agree that they often worry whether food is safe to eat (26% compared with 19%).
- Respondents in **households with children** were more likely to agree they often worry whether food is safe to eat (26% of those in households with children aged under 16, 30% of those in households with children aged under six) compared with those with no children in the household (21%).
- **Income** and **socio-economic group** were also related to opinions about food safety. Those from lower income households (below £26,000 per year) were more likely to be concerned about food safety than those from higher income households. Those in managerial / professional households were less likely than those in routine / manual households to be concerned about food safety issues. For example, 26% of those from households with incomes below £26,000 agreed that they often worry if food is safe to eat compared with 20% of those from higher income households, and 81% of those in routine / manual households agreed that restaurants should be more concerned about food safety, compared with 68% of those in managerial / professional households.
- However, those from lower income households were also more likely to agree that food poisoning was just bad luck: 26% of those in households with incomes of less than £26,000 agreed, compared with 20% of those in higher income households. Those in routine / manual households were also more likely than those in managerial / professional households to agree that people worry too much about food poisoning (44% compared with 38%).
- Variation by **working status** was observed, with retired respondents reporting being generally less concerned about food safety, other than concerns about eating out. Unemployed respondents were more concerned about food safety, particularly when eating out, than those in employment. For example, 88% of unemployed respondents agreed that restaurants should pay more attention to food safety (compared with 71% of those in employment), 35% agreed that they often worry whether food is safe to eat (compared with 20% of those in employment), and 48% agreed that you are more likely to get food poisoning if you eat out a lot (compared with 38% of those in employment).
- However, unemployed respondents were also more likely than those in employment to agree that people worry too much about food poisoning (60% compared with 42%).

3. Concern about where food is produced

3.1 Levels of concern about where food is produced

Figure 3.1 Concern about the safety of food produced in the UK and imported from outside the UK (Wave 3)



Source: Q9_2 Please tell me the extent to which you are concerned or unconcerned by each of the following issues...

Base: All respondents (3,453)

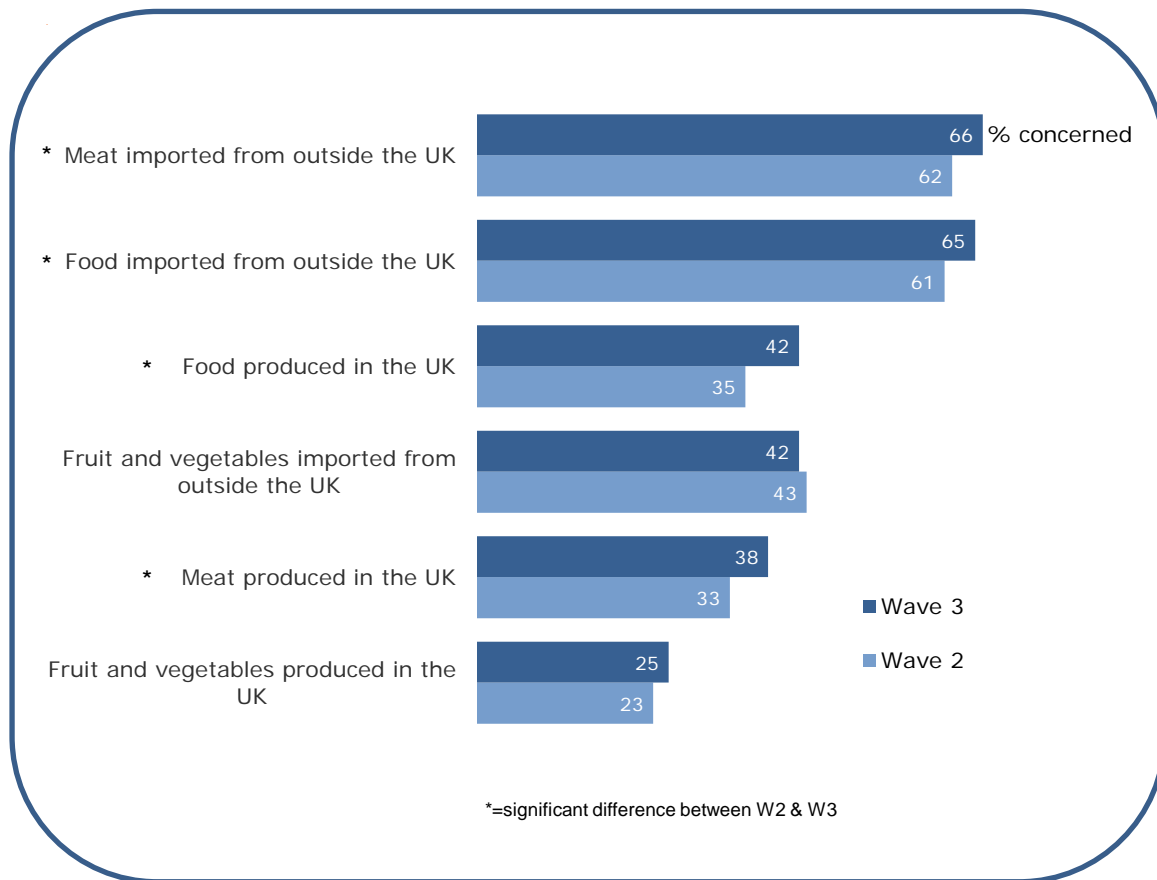
- Respondents were most likely to report concern about the safety of food imported from outside the UK, especially meat. Around two in three respondents were concerned¹⁴ about each type of import (65% about food, 66% about meat) and 29% were very concerned about the safety of imported meat. There was considerably less concern about the safety of imported fruit and vegetables (42%, with 11% very concerned).
- Around four in ten respondents were concerned about the safety of food produced in the UK (42%) with nine per cent reporting being very concerned. As with imported food, there was greater concern reported about the safety of meat produced in the UK (38%, with nine per cent very concerned) than about fruit and

¹⁴ 'Concerned' includes those who responded either 'Very concerned' or 'Fairly concerned'. This definition applies throughout this section of the report.

vegetables (25% concerned). Over half (56%) said they were unconcerned¹⁵ about the safety of UK fruit and vegetables.

¹⁵ 'Unconcerned' includes those who responded either 'Very unconcerned' or 'Fairly unconcerned'. This definition applies throughout this section of the report.

Figure 3.2 Concern about the safety of food produced in the UK and imported from outside the UK (Waves 2 and 3)



Source: Q9_2 Please tell me the extent to which you are concerned or unconcerned by each of the following issues...

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

- Compared with Wave 2, there were small differences in concerns at Wave 3 about the safety of food, especially meat, imported from outside of the UK (66% were concerned about imported meat compared with 62% at Wave 2, 65% were concerned about imported food in general compared with 61% at Wave 2). The differences were greatest for those saying they were very concerned: 29% compared with 24% for imported meat, and 25% compared with 20% for imported food more generally.
- There was no change compared with Wave 2 in concern about imported fruit and vegetables.
- There were similar patterns of difference from Wave 2 in concern about the safety of food, especially meat, produced in the UK. At Wave 3, 38% of respondents said they were concerned about meat produced in the UK, compared with 33% at Wave 2. The corresponding proportions regarding all food produced in the UK were 42% at Wave 3 and 35% at Wave 2. These differences were seen in the proportions reporting being very and fairly concerned.

3.2 Variation in concern about where food is produced by different groups in the population¹⁶

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

- Variation by **gender** was observed, as at Wave 2. Women were more likely than men to be concerned about food produced in the UK (44% compared with 39%), the production of meat in the UK (41% compared with 36%) and imported meat (69% compared with 64%). The higher levels of concern compared with Wave 2 were seen equally for both men and women.
- While there was no variation by gender at Wave 3 in concern about imported food, concern among men was higher at Wave 3 (64%) than Wave 2 (58%).
- There was also variation by **age**. Younger respondents aged 16-24 were generally less concerned about food safety and there were generally no differences between Wave 2 and Wave 3 in concern for this age group. For example, 31% said they were concerned about food produced in the UK (compared with 44% of respondents aged 25 and over), and this was similar to the level at Wave 2 (29%); among those aged 25 and over, however, the 44% reporting concern was higher than at Wave 2 (36%).
- Older respondents aged 75 and over were less likely than younger groups to say they were concerned about some products. In particular 19% said they were concerned about fruit and vegetables produced in the UK compared with 26% of respondents aged under 75.
- The difference from Wave 2 in concern about imported food was greatest for those aged 25-54, with 64% reporting being concerned at Wave 3 compared with 56% at Wave 2. The difference in concern about imported meat was greatest for respondents aged 35-54, with 69% reporting this concern at Wave 3 compared with 61% at Wave 2.

Other variations at Wave 3

- Variation in concern about food production was observed by **country of residence**. Respondents in Scotland were generally less concerned about UK produced foods than those in other countries. For example, 34% of respondents in Scotland were concerned about food produced in the UK, compared with 46% in Wales, and 31% were concerned about meat produced in the UK compared with 39%-42% in other countries.
- Respondents in Northern Ireland were more concerned than those in other countries about imported meat (74% compared with 64%-68%).

¹⁶ 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 statistically significant differences by presence of children.

- There was little variation by **household size**, although respondents in one to two person households were more likely to report concern about imported foods (68%) than those in larger households (61%).
- Variation in concerns about food safety and food production was observed by **income** and **socio-economic group**, with those from higher income and managerial / professional households generally less concerned about the safety of UK and imported food products. For example, 57% of those with household incomes of £52,000 or more per year were concerned about imported foods compared with 67% of those from lower income households, and 37% of those in managerial / professional households were concerned about UK produced food, compared with 44% of those in routine / manual and intermediate households. Similar patterns were seen for all products other than UK produced meat, for which there was no statistically significant difference between the groups.
- Variation by **working status** reflected that by age, with retired respondents reporting being more concerned about imported foods (73% compared with 63% of those in employment and 66% of unemployed respondents). The same patterns were seen for imported meat and imported fruit and vegetables.