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Northern Ireland Bulletin 5 Advice on healthy eating





TNS BMRB





Northern Ireland Bulletin 5 Advice on healthy eating

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Official Statistics

The statistics presented in this bulletin meet the requirements of the UK Code of Practice for Official Statistics.¹

Further information on Official Statistics can be found on the UK Statistics Authority website².

¹ <u>http://www.statisticsauthority.gov.uk/assessment/code-of-practice/index.html</u>

² http://www.statisticsauthority.gov.uk/national-statistician/types-of-official-statistics/index.html

Foreword

This bulletin presents a descriptive overview of selected findings from Wave 3 of the Food and You survey for Northern Ireland, 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, including 524 interviews in Northern Ireland on which this report is based. Wave 3 builds on and extends the previous findings.

The key findings for Northern Ireland from Wave 3 have been published in six 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
- Advice on healthy eating
- Eating and Health

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

This bulletin provides a descriptive overview of the key findings for Northern Ireland from Wave 3 in relation to advice on healthy eating.

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 Northern Ireland the FSA is additionally responsible for nutrition policy and food labelling.

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, avoiding 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 website³. Specific examples of use of the findings include results from Wave 1 being used to determine the theme of the 2012 FSA Food Safety Week⁴ 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 practices⁵ and the relationships between nutrition and food safety⁶. 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 Northern Ireland and Scotland remains the responsibility of the Agency. Waves 2 and 3, therefore, included a question module on healthy eating for respondents in Northern Ireland and Scotland, but focussed solely on food safety issues for respondents in England and Wales.

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.

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

⁵ http://www.food.gov.uk/science/research/ssres/fs409012

³ The Wave 1 report can be found at: <u>http://www.foodbase.org.uk/admintools/reportdocuments/641-1-1079_Food_and_You_Report_Main_Report_FINAL.pdf</u> and the Wave 2 report can be found at: <u>http://www.foodbase.org.uk/admintools/reportdocuments/805-1-1460_Wave_2_Main_Report.pdf</u>

⁴ <u>http://www.food.gov.uk/news-updates/campaigns/germwatch/</u>

⁶ http://www.food.gov.uk/science/research/ssres/crosscutss/fs307014

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. 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 Report⁷ 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 sociodemographic 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 and the Northern Ireland Multiple Deprivation Measure (NIMDM).⁸ Variation by age and gender has been considered across the three waves, while only Wave 3 data was examined for variation by NIMDM. Full data are available in the UK Data Archive⁹ and at data.gov.uk¹⁰ for further analysis.

10 http://data.gov.uk/

⁷ <u>http://www.food.gov.uk/sites/default/files/food-and-you-2014-uk-bulletin-technical-report.pdf</u>

⁸ The Northern Ireland Multiple Deprivation Measure (NIMDM) 2010 is the official measure of area deprivation in Northern Ireland which considers deprivation across income, employment, health and disability, education skills and training, proximity to services, living environment, and crime and disorder. Areas are grouped into quintiles based on their 2010 NIMDM score, with quintile 1 the most deprived areas across Northern Ireland and quintile 5 the least deprived areas.

⁹ http://www.data-archive.ac.uk/

Key Findings

- Respondents were shown a picture of a blank plate with the eatwell plate sections marked but not labelled, and were asked to place cards showing each of the food groups in the recommended sections on the plate to represent what they thought was the recommended balanced diet. Twenty-eight per cent of respondents placed all five food groups in the recommended sections of the eatwell plate, similar to the proportions at Waves 1 and 2 (25% and 27%). Fifty-six per cent placed three of the five food groups in the recommended sections, five per cent placed two food groups in the recommended sections, five per cent placed none of the food groups in the recommended sections. The foods least frequently placed in their recommended sections were starchy foods (44%) and protein (42%).
- A number of measures were included in the survey related to the Government's '8 tips for eating well' advice. Eating fruit and vegetables (82%), drinking plenty of water (79%), eating breakfast every day (78%) and limiting food and drinks high in sugar (77%) were the factors most commonly rated as being very important for a healthy lifestyle. Around seven in ten respondents said that it was important to limit foods high in fat (72%) and saturated fat (71%). Around seven in ten respondents said keeping to a healthy weight (69%) or eating less salt (69%) was very important. Fifty-one per cent thought that it was very important to eat fish and 33% per cent said this about starchy foods.
- In terms of awareness of recommended daily allowances (RDAs), a quarter (25%) stated the recommended maximum daily intake of calories for women was 2,000 calories per day, and 21% said this was 2,500 calories per day for men, in line with FSA guidance. Younger respondents (aged 25-34) were more likely to give an answer in line with the FSA recommendations (35%) than those aged 60 or over (13%).
- Overall, three quarters of respondents (75%) stated that the recommended daily number of portions of fruit and vegetables was five, similar to the proportion at Wave 1 (81%) but below that at Wave 2 (90%). At least two-thirds of respondents identified that frozen vegetables (91% compared with 81% at Wave 1), tinned fruit or vegetables (83%), pure fruit juice (80%), dried fruit (76%), fruit smoothies (73%), baked beans (67%) and pulses (67%) count towards the recommended minimum of five portions of fruit and vegetables per day, in line with FSA guidance.
- Seven per cent of respondents stated that the recommended daily intake of salt was 6g, in line with FSA recommendations. Similarly, a small proportion of respondents said that the maximum daily intake of total fat is 95g for men (one per cent of male respondents) and 70g for women (six per cent of female respondents), in line with guidance. After being told the recommended maximum daily intake of total fat, nine per cent of male respondents and 10% of female respondents said the maximum daily intake for saturated fat was 30g or 20g respectively, in line with Agency recommendations.

1. Background

In Northern Ireland, advice on healthy eating can be found on the Public Health Agency (PHA) website 'choose to live better'¹¹ and the NI Direct Eatwell site¹² provides advice on healthy eating and food safety.

Healthy eating advice centres on the eatwell plate¹³ and '8 tips for eating well', including advice on eating at least five portions of fruit and vegetables a day and the recommended maximum daily intake of salt for adults. There are also guidelines on recommended maximum intakes for fat and calories.

 ¹¹ www.choosetolivebetter.com
 ¹² www.nidirect.gov.uk / index / information-and-services / health-and-well-being / eatwell
 ¹³ The eatwell plate is a pictorial representation of the main food groups and their recommended proportions for a healthy and well balanced diet.

2. The eatwell plate

The eatwell plate illustrates the types and proportions of foods which are recommended to come from each food group for a healthy balanced diet. This includes: plenty of fruit and vegetables; plenty of bread, rice, potatoes, pasta and other starchy foods; some milk and dairy foods; some meat, fish, eggs, beans and other non-dairy sources of protein, and a small amount of foods and drinks high in fat and / or sugar. The eatwell plate is shown below:



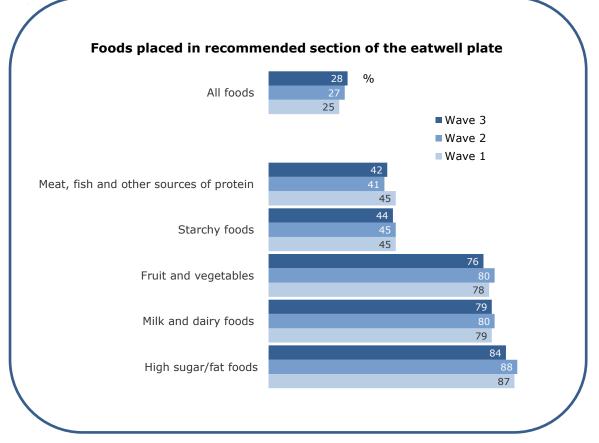


Figure 2.1 Eatwell plate exercise (Waves 1, 2 and 3)

Source: H2_17 Eatwell plate exercise

Base: All NI respondents - Wave 1 (506); Wave 2 (504); Wave 3 (524)

- Respondents were shown a picture of a blank plate with the eatwell plate sections marked but not labelled, and were asked to place cards showing each of the food groups in the sections on the plate to represent the respective proportions they thought represented the recommended balanced diet.
- Overall, 28% of respondents placed all five food groups in the recommended sections of the eatwell plate.
- Fifty-six per cent placed three of the five food groups in the recommended sections, and five per cent placed two of the five food groups in the recommended sections of the eatwell plate.
- Five per cent of respondents placed one of the five food groups in the recommended section, and three per cent did not place any food groups in the recommended sections.
- Respondents were most likely to place high sugar / fat foods in the recommended section of the eatwell plate (84%).
- Almost four fifths of respondents (79%) placed milk and dairy foods in the recommended sections, and 76% of respondents placed fruit and vegetables in the recommended sections.

- The foods most commonly positioned outside the recommended sections were starchy foods (56% did not place this in the recommended section) and meat, fish and other sources of protein (58% did not place this in the recommended section).
- Between Waves 1, 2 and 3, no statistically significant differences were identified.

3. Foods for a healthy lifestyle

3.1 The 8 tips for eating well¹⁴

A number of measures were included in the survey to explore whether respondents were aware of, and followed, the Government's '8 tips for eating well' advice. The headline survey findings relating to the '8 tips' are as follows:

Tip 1 - 'Base your meals on starchy foods: Most of us should eat more starchy foods – try to include at least one starchy food with each of your main meals'

- Seventy-three per cent of respondents reported eating starchy foods such as bread, rice, potatoes and pasta at least once a day¹⁵. Six per cent reported eating them once or twice a week or less often.
- Thirty-three per cent said that eating foods such as bread, rice, pasta and potatoes was very important for a healthy lifestyle and a further 52% that it was fairly important¹⁶.

Tip 2 - 'Eat lots of fruit and vegetables: Try to eat at least 5 portions of a variety of fruit and vegetables every day. It might be easier than you think.'

- Sixty-six per cent of respondents reported that they ate fruit and vegetables at least once a day. Nine per cent reported eating them once or twice a week or less often.
- Eighty-two per cent of respondents reported that eating fruit and vegetables was very important for a healthy lifestyle.
- Forty-seven per cent of respondents reported eating five or more portions of fruit and vegetables on the day before the interview¹⁷.

Tip 3 - 'Eat more fish: Aim for at least two portions of fish a week, including a portion of oily fish.'

- Fifty-two per cent of respondents reported eating oily fish, 15% shellfish, and 59% any fish (excluding shellfish), at least once a week.
- Fifty-one per cent reported that eating fish was very important for a healthy lifestyle and a further 38% said that it was fairly important.

¹⁴ Base for questions in this section at Wave 3: all respondents (524), all men (219), all women (305)

¹⁵ QH2_14/Q2_14: At the moment, how often do you eat...?

¹⁶ QH2_18: Thinking about adults, how important do you think the following are for a healthy lifestyle?

¹⁷ QH2_11: Thinking just about YESTERDAY can you tell me how many portions of vegetables – including salad, fresh, frozen or tinned vegetables you ate?; QH2_12: Thinking just about YESTERDAY did you have a portion of fruit juice (pure juice / 100% freshly squeezed / fruit smoothies / juice from concentrate BUT NOT juice based on drinks such as squash); QH2_13: Thinking just about YESTERDAY can you tell me how many portions of fruit – fresh, frozen, tinned or dried you ate?

Tip 4 - 'Cut down on saturated fat and sugar: Try to choose more foods that are low in fat and cut down on foods that are high in fat. We should all be trying to eat fewer foods with added sugars, e.g. sweets, cakes & biscuits, and drinking fewer sugary soft & fizzy drinks'

- Seventy-seven per cent of respondents reported that limiting food and drinks high in sugar was very important for a healthy lifestyle.
- Seventy-two per cent of respondents said limiting foods high in saturated fat was very important for a healthy lifestyle and 71% said this for total fat.
- Forty per cent of respondents reported eating biscuits, pastries and cakes at least once a day; 18% reported eating fried chips or roast potatoes at least three or four times a week with 74% reporting eating them at least weekly.
- Six per cent of women and one per cent of men stated a maximum recommended daily intake for total fats that was in line with Agency guidance (95g for men and 70g for women)¹⁸.

Tip 5 - 'Try to eat less salt: No more than 6g a day for adults'

- Sixty-nine per cent of respondents said eating less salt was very important for a healthy lifestyle.
- Respondents were asked what the maximum recommended intake of salt per day is for adults¹⁹. Seven per cent of respondents stated a maximum daily intake of salt for adults in line with Agency guidance (6g). Twelve per cent stated a maximum daily intake which was above Agency guidance. Forty-four per cent gave an answer below Agency guidance and 37% said that they did not know what the recommended maximum daily intake of salt was.

Tip 6 - 'Get active and try to be a healthy weight: Only eat as much food as you need. Make healthy choices - it's a good idea to choose low-fat & low-sugar varieties, eat plenty of fruit & veg & whole grains. Get more active.'

- Sixty-nine per cent of respondents said keeping to a healthy weight was very important for a healthy lifestyle.
- A quarter (25%) stated the recommended maximum daily intake of calories for women was 2000 calories per day, and 21% said this was 2500 calories per day for men²⁰, in line with FSA guidance.

¹⁸ QH2_27: It is recommended that we should eat no more than a certain amount of fat each day. How much fat – in grams – do you think an average [CHANGE TEXT DEPENDING ON GENDER OF RESPONDENT] man / woman should eat per day?
¹⁹ QH2_30: It is recommended that we should eat no more than a certain amount of salt each day. How much

 ¹⁹ QH2_30: It is recommended that we should eat no more than a certain amount of salt each day. How much salt do you think this is for adults?
 ²⁰ QH2_25: Health experts make recommendations about the number of calories the average person should eat.

²⁰ QH2_25: Health experts make recommendations about the number of calories the average person should eat. Can you tell me what you think is the recommended number of calories average <u>women</u> should eat a day?; QH2_26: Health experts make recommendations about the number of calories the average person should eat. Can you tell me what you think is the recommended number of calories average <u>men</u> should eat a day?

Tip 7 - 'Drink plenty of water: We should aim to drink at least 6 to 8 glasses (1.2 litres) of water per day'

Seventy-nine per cent of respondents said that it was very important to drink plenty of water for a healthy lifestyle.

Tip 8 - 'Don't skip breakfast'

Seventy-eight per cent of respondents said that it was very important for a healthy lifestyle to eat breakfast every day.

3.2 Importance of different factors for a healthy lifestyle

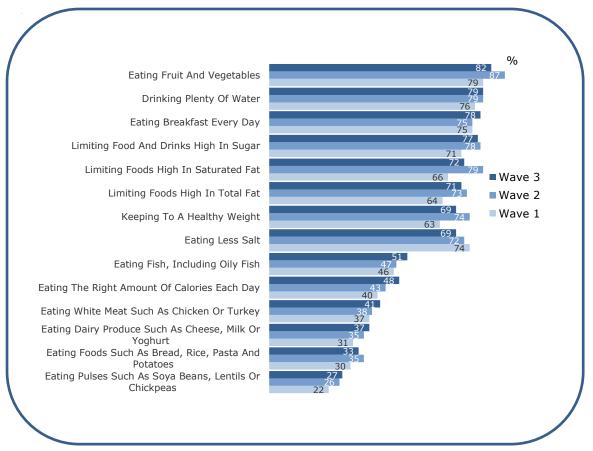


Figure 3.1 Percentage of respondents answering that listed factors were 'very important' for a healthy lifestyle (Waves 1, 2 and 3)

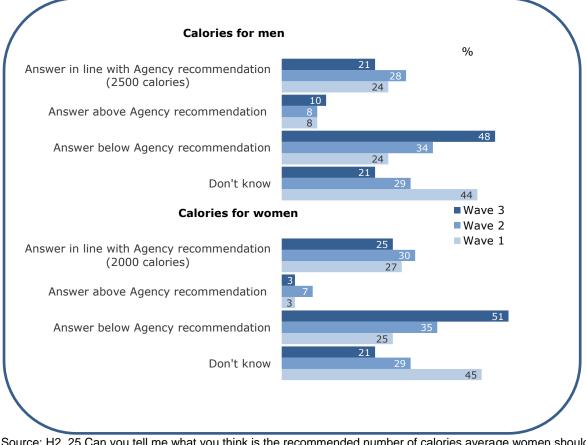
Source: H2_18 Thinking about adults, how important do you think the following are for a healthy lifestyle... Base: All NI respondents - Wave 1 (506); Wave 2 (504); Wave 3 (524)

- Respondents were asked, in turn, how important they thought a variety of factors were for a healthy lifestyle. These covered eating different foods such as fruit and vegetables, as well as other lifestyle factors such as keeping to a healthy weight.
- Eating fruit and vegetables (82% of respondents), drinking plenty of water (79%) eating breakfast every day (78%) and limiting food and drinks high in sugar (77%) were the factors most commonly rated as being very important for a healthy lifestyle.
- Respondents were less likely to rate eating other particular groups of food as being very important, such as eating fish (51%), eating white meat (41%) and eating dairy produce (37%).
- No statistically significant differences in these results were observed across the waves.

4. Awareness and understanding of recommended daily amounts

4.1 Calories

Figure 4.1 Awareness of recommended number of daily calories for men and women (Waves 1, 2 and 3)



Source: H2_25 Can you tell me what you think is the recommended number of calories average women should eat a day? & H2_26 Can you tell me what you think is the recommended number of calories average men should eat a day?

Note: responses were given spontaneously, with no prompted response list shown to respondents

Base: All NI respondents - Wave 1 (506); Wave 2 (504); Wave 3 (524)

The FSA recommends that the average man should consume around 2,500 calories a day and the average woman around 2,000 calories a day.

Around a fifth of respondents (21%) reported the recommended number of daily calories for men in line with Agency guidance, and a quarter (25%) did so for women. Among women, 28% reported the recommended number of daily calories in line with Agency guidance for their gender, and 22% of men reported the recommended number of daily calories in line with Agency guidance for men.

- Respondents were most likely to report that the recommended number of calories was lower than that recommended by the Agency. Almost half of respondents (48%) reported that the recommended number of daily calories for men was below 2500 calories and 51% reported that the recommended number of daily calories for women was below 2000 calories.
- The proportion of respondents giving answers below the recommended level was around twice as high for both men and women compared with that at Wave 1 (24% compared with 48% for men, 25% compared with 51% for women), whilst the percentage who did not know was lower (44% at Wave 1 compared with 21% at Wave 3 for men and 45% compared with 21% for women).

4.2 Fruit and vegetables

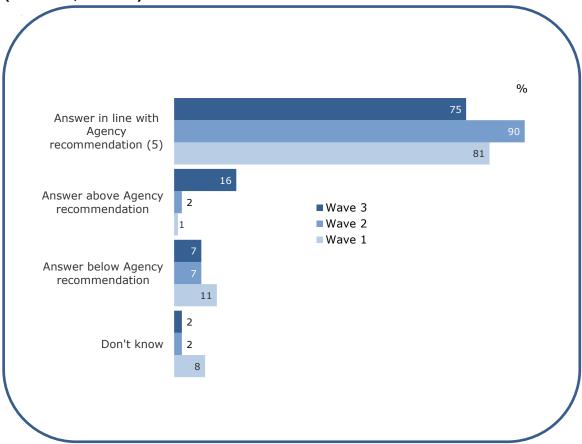


Figure 4.2 Awareness of recommended daily intake of fruit and vegetables (Waves 1, 2 and 3)

Source: H2_9 How many portions of fruit and vegetables do you think that health experts recommend people should eat every day?²¹

Note: responses were given spontaneously, with no prompted response list shown to respondents

Base: All NI respondents - Wave 1 (506); Wave 2 (504); Wave 3 (524)

The FSA recommends that people should aim to eat at least five portions of fruit and vegetables every day.

- Overall, 75% of respondents stated that the recommended number of portions of fruit and vegetables to consume per day was five; this was the similar to the proportion at Wave 1 (81%), compared with 90% at Wave 2.
- Most of those who gave an answer that was not in line with Agency guidance said that the recommended number of portions was above five (16%), and this was higher than at Waves 1 or 2 (one per cent and two per cent respectively). A small proportion (seven per cent) said the recommended number was less than five.

²¹ In the questionnaire these questions were asked after the questions about awareness and consumption, in order to avoid influencing respondents' answers.

Table 4.1 Awareness of foods that can count towards '5 a day' (Waves 1, 2 and3)

% who said food counted towards '5 a day'	Wave 1	Wave 2	Wave 3
Foods that count as a portion of fruit and vegetables			
Frozen vegetables	81%	91%	91%
Tinned fruit or vegetables	82%	88%	83%
Pure fruit juice	87%	89%	80%
Dried fruit	76%	83%	76%
Fruit smoothies	79%	79%	73%
Baked beans	65%	73%	67%
Pulses	61%	68%	67%
Foods that do not count as a portion of fruit and vegetables			
Jacket potato	73%	73%	70%
Rice	30%	27%	27%
Jam	17%	14%	14%

Source: H2_10 Do you think these foods can be counted towards the daily fruit and vegetable intake? Note: respondents were able to give multiple answers at H2_10

Base: All NI respondents - Wave 1 (506); Wave 2 (504); Wave 3 (524)

- The majority of respondents said, in line with FSA guidance, that pure fruit juice (80%), frozen vegetables (91%), tinned fruit or vegetables (83%), dried fruit (76%) fruit smoothies (73%), baked beans (67%) and pulses (67%) could count towards '5 a day'.
- Seventy per cent of respondents said that a jacket potato would count towards the '5 a day'. This, along with jam and rice, are not items classified as portions of fruit and vegetables (they do not count towards '5 a day').
- Twenty-seven per cent of respondents reported that rice, and 14% reported that jam would count towards the recommended daily intake.
- The proportion of respondents who stated, in line with Agency recommendations, that frozen vegetables would count towards the five a day target, was higher at Waves 2 and 3 (91%) compared with Wave 1 (81%). The proportion who stated that baked beans, pulses, tinned fruit or vegetables, and dried fruit could count toward the five a day target was similar across the waves.

4.3 Salt

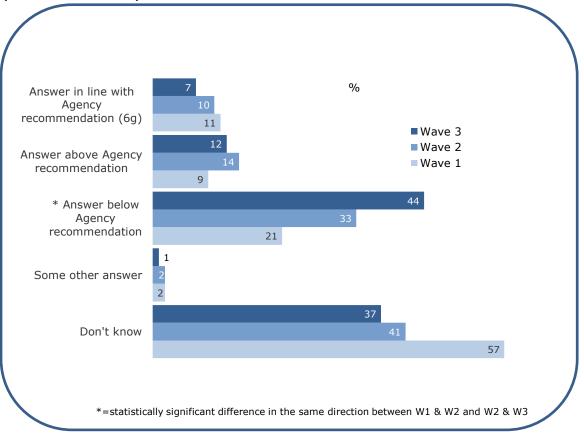


Figure 4.3 Awareness of recommended maximum daily adult intake of salt (Waves 1, 2 and 3)

Source: H2_30 It is recommended that we should eat no more than a certain amount of salt each day. How much do you think this is for adults?

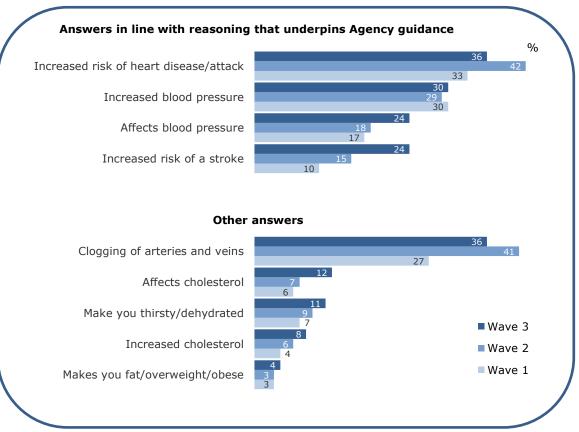
Note: responses were given spontaneously, with no prompted response list shown to respondents

Base: All NI respondents - Wave 1 (506); Wave 2 (504); Wave 3 (524)

The FSA recommends that adults should consume no more than 6g of salt a day.

- Seven per cent of respondents stated, in line with the Agency's recommendation, that the recommended maximum daily intake of salt for adults should be 6g.
- The largest proportion of respondents (44%) gave an answer below the Agency's recommendation, compared with 21% who reported this at Wave 1 and 33% at Wave 2.
- Thirty-seven per cent of respondents said that they did not know what the recommended intake was, which was similar to the proportion at Wave 2 (41%) compared with 57% at Wave 1.
- The proportion of respondents (12%) who gave an answer above the recommended level was similar to the proportion at previous waves (nine per cent at Wave 1 and 14% at Wave 2).

Figure 4.4 Awareness of the effects eating too much salt can have on health (Waves 1, 2 and 3)



Source: H2_32 What effects do you think eating too much salt can have on your health? Responses given by four per cent or more at Wave 3 are shown.

Note: responses were given spontaneously, with no prompted response list shown to respondents; respondents were able to give multiple reasons

Base: All NI respondents - Wave 1 (506); Wave 2 (504); Wave 3 (524)

The main risk related to excessive salt consumption is that it increases blood pressure, and hence the risk of heart disease, heart attacks and strokes.

- Thirty-six per cent of respondents said, in accordance with FSA advice, that eating too much salt could increase the risk of heart disease and a similar proportion (30%) said that it could increase blood pressure.
- Almost a quarter (24%) said it would affect blood pressure (without specifying that blood pressure would increase) and the same proportion though that eating too much salt would cause an increased risk of stroke. The proportion that gave each of these answers was higher compared with that at Wave 1 (17% and 10% respectively at Wave 1).
- Some respondents gave other answers that were not in line with the reasoning underpinning Agency recommendations, such as 'makes you thirsty' (11%) or 'increases cholesterol' (eight per cent). The proportion who reported that too much salt affects cholesterol (without stating how) was 12% at Wave 3 compared with six per cent at Wave 1.

The most commonly reported answer that is not a reason underpinning FSA guidance was that excess salt causes clogging of arteries and veins (reported by 36% of respondents).

4.4 Fat

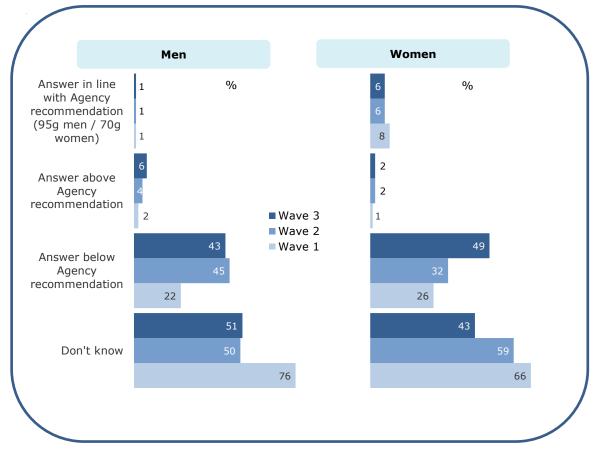


Figure 4.5 Awareness of recommended maximum daily intake of total fat (Waves 1, 2 and 3)

Source: H2_27 How much fat, in grams, do you think an average woman / man should eat a day? Note: responses were given spontaneously, with no prompted response list shown to respondents

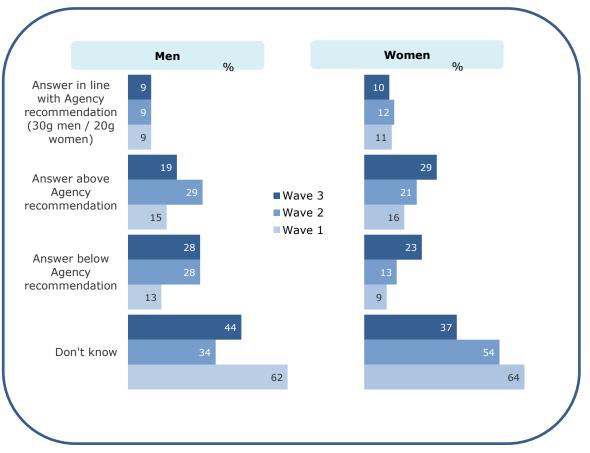
Base: NI Men - Wave 1 (186); Wave 2 (181); Wave 3 (219); NI Women - Wave 1 (320); Wave 2 (323); Wave 3 (305)

Men were asked what they thought the recommended maximum daily intake of total fat for men was, and women were asked about the recommended maximum daily intake of total fat for women.

The FSA recommends that the average daily intake of total fat should not exceed 95g for a man or 70g for a woman.

- As at Waves 1 and 2, few respondents (one per cent of men and six per cent of women) provided an answer in line with Agency recommendations on the recommended maximum daily intake for total fat. Around half of men (51%) reported that they didn't know the recommended maximum amount. Women were most likely to give an answer below the Agency's recommendation (49%).
- At Wave 3, the proportion of both genders giving an answer below the Agency's recommended limit (43% of men and 49% of women) was higher compared with Wave 1 (22% of men and 26% of women).

Figure 4.6 Awareness of recommended maximum daily intake of saturated fat (Waves 1, 2 and 3)



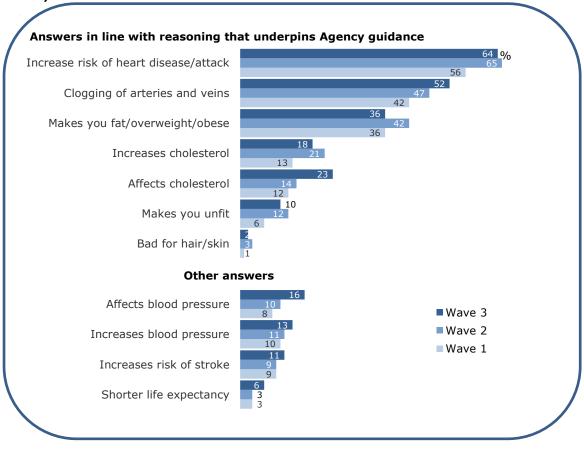
Source: H2_28 It is recommended that the average man / woman should eat no more than 95g / 70g of fat a day. How much of this, in grams, do you think is the maximum recommended amount of saturated fats? Note: responses were given spontaneously, with no prompted response list shown to respondents

Base: NI Men - Wave 1 (186); Wave 2 (181); Wave 3 (219); NI Women - Wave 1 (320); Wave 2 (323); Wave 3 (305)

The FSA recommends that a man's maximum daily intake of saturated fat should not be more than 30g and for women no more than 20g.

- Around one in ten respondents provided an answer in line with the Agency's recommended maximum daily intake of saturated fats (nine per cent of men, 10% of women). This was consistent with previous waves. Respondents of both genders most frequently reported that they did not know the recommended daily intake, with 44% of men saying this, and 37% of women.
- Twenty-nine per cent of women gave an answer above the recommended maximum, and 23% gave an answer below, compared with 16% and nine per cent at Wave 1 respectively. The proportion of women reporting that they did not know the limit was 37% at Wave 3 compared with 64% at Wave 1.
- Twenty-eight per cent of men gave an answer below the recommended maximum compared with 13% at Wave 1, and 44% said they did not know what the limit was, compared with 62% at Wave 1.

Figure 4.7 Awareness of effects of eating too much saturated fat (Waves 1, 2 and 3)



Source: H2_29 What effects do you think eating too much saturated fat can have on your health? All responses in line with Agency guidance and responses not in line with Agency guidance given by four per cent or more are shown.

Note: responses were given spontaneously, with no prompted response list shown to respondents; respondents were able to give multiple reasons in answer

Base: All NI respondents - Wave 1 (506); Wave 2 (504); Wave 3 (524)

Eating too much saturated fat is one of the major risk factors for heart disease, as it causes a build-up of cholesterol in the arteries. Too much fat also increases the risk of overweight and obesity which again is a risk factor for heart disease, as well as for some types of cancer. High saturated fat consumption has also been linked with an increased risk of diabetes.

- Almost two-thirds of respondents reported that eating too much saturated fat would increase the risk of heart disease (64%), and around half reported that it would cause clogging of arteries and veins (52%). Thirty-six per cent mentioned it that it could make you overweight or obese. These reasons are in line with the reasoning that underpins Agency recommendations on recommended daily intake of saturated fat.
- The most frequent responses that are not reasons which underpin FSA guidance were that too much saturated fat affects blood pressure (16%), increases blood pressure (13%) and increases the risk of stroke (11%).
- The proportion of respondents who stated that eating too much saturated fat can cause clogging of arteries and veins was 52% at Wave 3 compared with 42% at

Wave 1. A greater proportion of respondents at Wave 3 also reported that too much saturated fat affects cholesterol (12% at Wave 1 and 14% at Wave 2 compared with 23% at Wave 3).

Of responses that are not reasons which underpin FSA guidance, a greater proportion of respondents reported that blood pressure is affected by eating too much saturated fat compared with previous waves (eight per cent at Wave 1 and 10% at Wave 2 compared with 16% at Wave 3).

4.5 Variation in awareness of recommended daily amounts by different groups in the population²²

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

- There were no statistically significant differences by gender in placing the eatwell plate food groups in the recommended proportions. There were a small number of differences relating to the importance of factors for a healthy lifestyle, for example, women (99%) were more likely than men (93%) to rate eating breakfast every day as important.
- There were no statistically significant differences between men and women in the responses given when asked about the recommended daily maximum intakes of saturated fat and salt, or what the effects are of eating too much salt or eating too much saturated fat. Women were, however, more likely than men to be aware of their recommended maximum daily intake of fat (six per cent compared with one per cent).
- Respondents of all ages were similarly likely to match all foods to the corresponding correct proportion on the eatwell plate.
- There was some variation by age in reported belief that different factors were important for a healthy lifestyle. For example, the youngest respondents (those aged 16-24) were more likely to report that eating food such as bread, rice and pasta were important for a healthy lifestyle (95%) compared with those aged 25-44 (78%). Those aged 45 and over were more likely to think that eating fish was important (95% compared with 81% of those aged under 45). Respondents aged 75 and over were less likely to report that eating the right amount of calories each day was important (68% compared with 85% of those aged under 75).
- As at Wave 2, younger respondents were more likely to say that the recommended daily amount of calories for women was 2000 (35% of those aged 25-34 gave this answer, compared with 13% of respondents aged 60 and over) and that for men it was 2500 (37% of those aged 25-34 compared with six per cent of those aged 60 and over).

²² The following variables were analysed to identify statistically significant differences: age, gender, Northern Ireland Multiple Deprivation Measure.

Other variation at Wave 3

- Some variation was observed by Northern Ireland Multiple Deprivation Measure (NIMDM). Respondents from the least deprived areas were more likely to match each food type to the correct segment of the eatwell plate, compared with those in more deprived areas (43% in quintile five, compared with 25% in quintiles one to four).
- There was little variation by NIMDM in factors considered important for a healthy lifestyle, however respondents from more deprived areas were less likely to consider eating pulses as important (82% of those in quintile five compared with 60% in quintiles one to three).
- Respondents from the least deprived areas were more likely to state (in line with Agency guidelines) the recommended number of calories for women as 2000 per day (31% of those in quintiles four and five, compared with 12% of those in quintile one), and 2500 for men (32% of those in quintile five compared with 12% in quintile one).
- Women from the least deprived areas were more likely to say (in line with Agency guidelines) that women should eat no more than 70 grams of fat per day (21% of those in quintile five, three per cent of those in quintiles one to three); however this pattern was not found for men.
- Respondents from the least deprived areas were more likely to report that excess salt causes clogging of arteries and veins, which is not a reason which underpins FSA guidance (56% of those in quintile five compared with 32% in quintiles one to four).

5. Comparisons between Northern Ireland and Scotland

Table 5.1 Eatwell plate exercise by country (Wave 3)

Placed in recommended section	Northern Ireland	Scotland
Starchy foods	44% ^s	32%
Fruit and vegetables	76%	80%
Meat, fish and other sources of protein	42% ^s	33%
Milk and dairy foods	79%	82%
High sugar / fat foods	84%	79%
Base	(524)	(475)

Source: H2_17 Eatwell plate exercise

Base: All respondents

NB. S / NI indicates that the result is statistically significantly higher than the result for the country indicated by the initial

- Healthy eating questions were not included in the England and Wales surveys so comparisons in this section are only made between Northern Ireland and Scotland.
- Respondents in Northern Ireland were more likely than those in Scotland to place both starchy foods (44% compared with 32%) and meat, fish and other sources of protein (42% compared with 33%) in the recommended section of the eatwell plate.
- They were also more likely than those living in Scotland to match all five foods to the recommended proportion of the eatwell plate (28% of respondents in Northern Ireland did so, compared with 16% in Scotland).
- A similar proportion of respondents in Scotland and Northern Ireland stated that the recommended daily number of portions of fruit and vegetables people should eat is five (71% and 75% respectively).
- However, respondents in Northern Ireland were less likely that those in Scotland to say that dried fruit counted toward the five a day target (76% compared with 84%).
- There were no statistically significant differences between respondents in Northern Ireland and Scotland in relation to awareness of the recommended number of calories an individual should eat per day, however men in Northern Ireland were more likely than those in Scotland to say they did not know the maximum recommended intake of grams of fat (51% compared with 32%) or saturated fat (44% compared with 27%) they should eat each day.

Respondents in Northern Ireland were also more likely say that they did not know the maximum number of grams of salt that the Agency recommends per day (37% compared with 27% of those in Scotland), however respondents in Scotland were no more likely to give the recommended answer (seven per cent of respondents in Northern Ireland said six grams and eight per cent in Scotland).