



## **Young people and food allergies / intolerances**

**Food Standards Agency**

**Sarah Kovacs**

**Social Science Team**

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## Chapter 1. Background and methodology

### Purpose

The social science team at the Food Standards Agency (FSA) led research on young people with food allergies and intolerances to gain a deeper understanding of the challenges young people face living with their condition. The research was supported by Allergy UK and Anaphylaxis Campaign, who allowed us to contact their membership providing our targeted sample base.

The specific aims of the work were to:

- Understand the profile of this cohort of young people
- Characterise their experience of living a food allergy/ intolerance or other food condition
- Explore their experiences of eating out, specifically when not with someone who provides support
- Identify key support mechanisms for young people eating out with a food allergy/intolerance

Findings are intended to provide more detailed consumer data on young people and the challenges associated with living with a food allergy or intolerance and will inform key messaging and content of a planned campaign targeting young people when eating out or ordering food, especially when moving away from home. Findings will also form baseline pre-campaign data against which subsequent surveys can be benchmarked. A survey post campaign is currently planned.

### Methodology

The online platform Survey Monkey was used for data collection on 28 questions and the same platform will be used in subsequent data collection exercises.

The questionnaire was designed and piloted by the FSA and peer reviewed by an independent expert and can be viewed in full at annex A.

### Sampling

Participants were recruited by sending a callout to Allergy UK and Anaphylaxis Campaign membership databases, and by advertising the research on various platforms hosted by the Food Standards Agency. Participation was entirely voluntary and an incentive to enter a prize draw was offered to those who provided their details at the end of the survey.

The total number of participants who completed the survey was N= **2910**. Of these, **2599** were included in the survey analysis. They fulfilled the following criteria, ensuring we were looking at the group of interest:

- Indicated that they had experienced a reaction to food (responded “Yes” to Question 2), AND
- Specified their age group in Question 1.



All these 2599 respondents had the opportunity to answer all other questions. There is only one partial exception. In Q1a(iv), respondents were only asked who had diagnosed them with a food condition, if they had indicated that they had been diagnosed in the first part of the question. Those that responded to particular questions are henceforth referred to as 'respondents' or 'eligible respondents'. The following should also be noted:

- In question Q2a(i), respondents were asked "Pick all that apply" from several options. Anyone who selected at least one option is treated as responding to this question. The same approach was taken for questions Q5a, Q12 and Q13,
- In contrast, questions Q7 and Q8 consist of multiple frequency questions, each of which were treated separately.
- Two-way breakdowns only include those responding to both the relevant question and the relevant breakdown measure (i.e. Region, Age group or Employment/Education Status).
- In addition, breakdowns by the allergy/intolerance condition only include respondents indicating that they had some form of food allergy or food intolerance.

The sample base is reported below tables, graphs and reported as relevant.

## Analysis

All analysis was carried out with the sample of relevant respondents in line with the sampling conventions noted above. To do so, the data was exported into both CSV and excel formats and cleaned and analysed using R.

Chi-square tests were performed to identify any differences in the data focussing on breakdowns by age, condition, region and status. In doing so, some response options were grouped in order to perform the the Chi-square tests. (This is because Chi-square tests do not work well on tables with small cells - less than 3 - 5 respondents). Therefore, some small categories were pooled or omitted, leading to a small loss of detail. Options were grouped in the following way and this terminology is used through the report:

### Age

- This comprises the three age groups as per the questionnaire

### Condition

- This comprises the following groups<sup>1</sup>:

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<sup>1</sup> Respondents not indicating that they suffered from either Food Allergy, Coeliac disease, Food Intolerance or Non-coeliac gluten sensitivity were classed as other.



- Allergy (only) – Respondents indicating that they suffered from either Food Allergy or Coeliac disease but not Food Intolerance or Non-coeliac gluten sensitivity.
- Intolerance (only) – Respondents indicating that they suffered from either Food Intolerance or Non-coeliac gluten sensitivity but not Food Allergy or Coeliac disease.
- Both – Respondents indicating that they suffered from both Food Allergy (and/or Coeliac disease) and Food Intolerance (and/or Non-coeliac gluten sensitivity)

#### Status

- The Employment\Education status variable was derived from responses to Question Q16 as follows:
  - Responses of "Full time student/at school" were combined into a category
  - "On a government training scheme/apprenticeship" were combined into a "Education/Training" category
  - All responses not relating to education or employment were combined into a "NEET/Other" category. They included: "Long term sick or disabled", "Looking after family or home", "Unable to work because of short term illness or injury", "Unemployed" and "Other (please specify)".

#### Region

- This comprises the regions as per the questionnaire, However, given the relatively small numbers per region, the Chi-square test may not perform well or have the power to detect isolated regional differences. So, the test results for regional breakdowns should be treated with caution. Further caveats are noted below.

Where questions were open ended and respondents provided text-based answers, these were coded into broad themes and quantified using Excel.

Data could not be weighted as the demographic profile of the population of those with food allergy and intolerance is unknown, Furthermore, we cannot say with confidence that the sample is representative of that population given that recruitment of respondents involved self-selection. Therefore, relationships seen in the sample may not reflect the patterns present in target population. Additionally, it should be borne in mind that results are simply based on respondent self-reports.

This report looks at the top-line findings plus some selected key differences by the four breakdowns noted (data tables for all differences can be found in annex B). Data is reported using a variety of tables and graphs with the unweighted base stated below. As above, it is indicated in the report where the base is not the total sample (N=2599).



All data is reported at the 5% significance level and corresponding p values are presented through the report.

There may be other significant findings present within the dataset as we only looked at a selected number of variables. Please refer to the full dataset for further details.

It is also worth noting that in this dataset, there was a very strong relationship between condition, age and status. Therefore, significant differences between age and status groups might reflect differences between conditions, and vice versa. In contrast, there is much less evidence of relationship between region and the other three breakdowns variables. No further analysis was carried out to explore this further.

All references are reported using the APA referencing system.

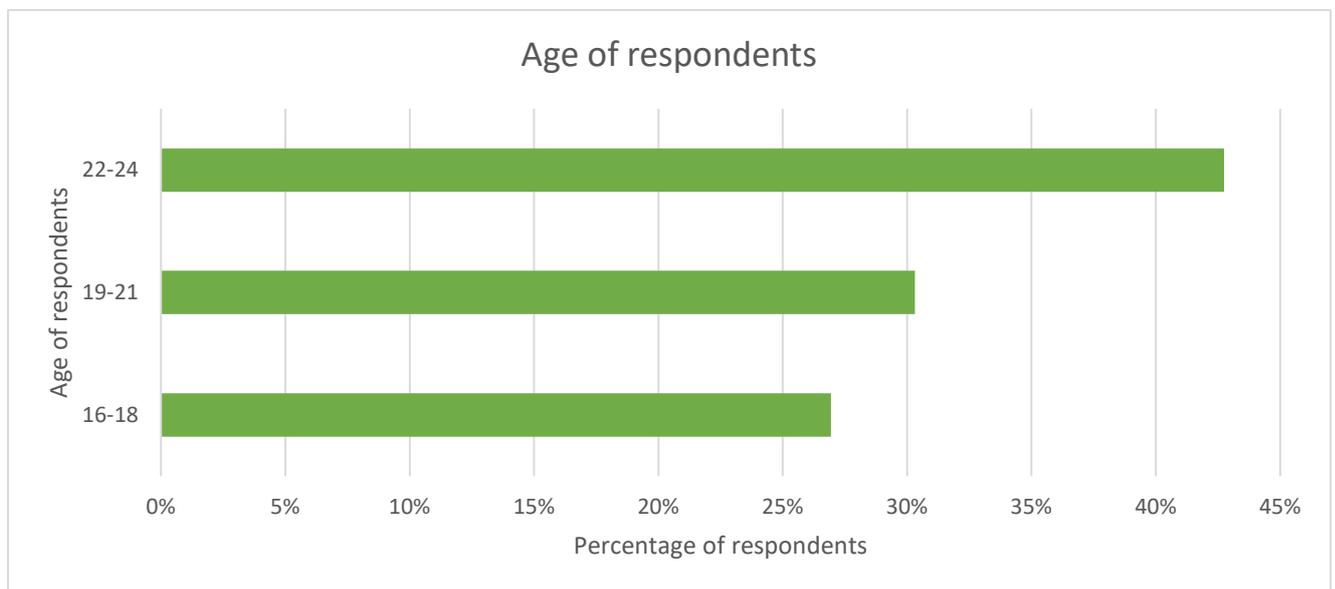


## Chapter 2. Profile

To help us to understand the profile of this population, respondents were asked several questions on their age and condition. Data was also used to further characterise the experiences of young people with food allergy/ intolerances according to the breakdowns noted in chapter 1.

### Age of respondents

Respondents were first asked to specify whether they fell into one of three different age categories relevant to this survey. The largest age category of eligible respondents<sup>2</sup> was aged 22-24, making up 43% of the sample.

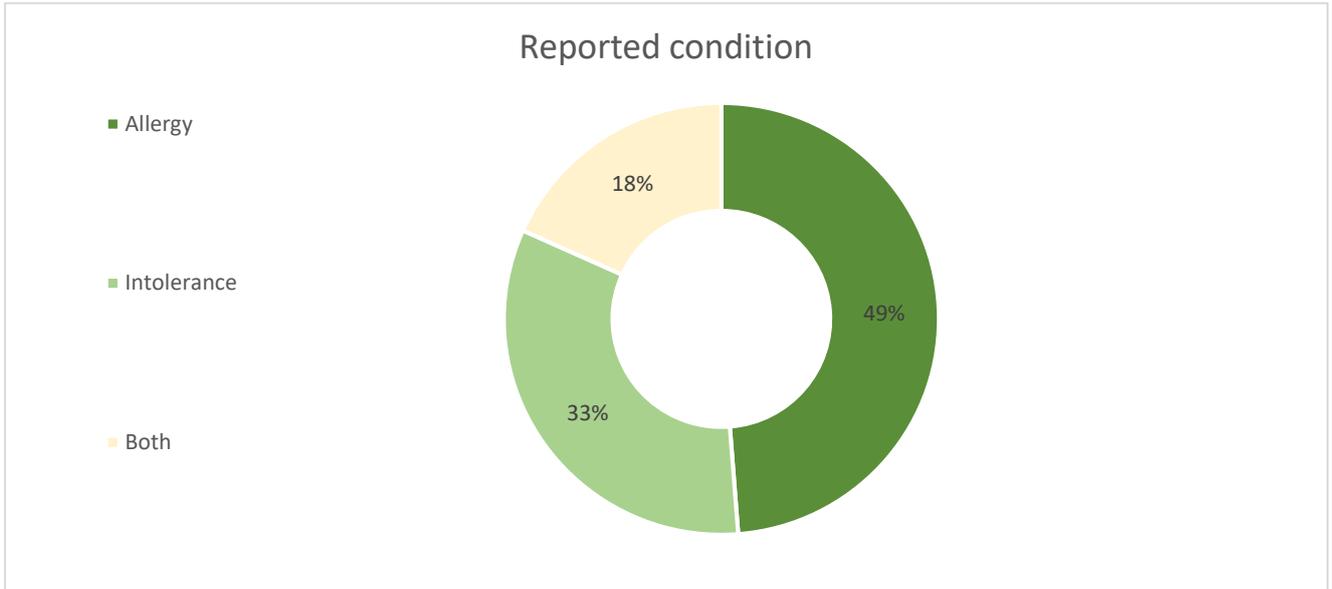


Base: 2599

### How would you describe your problem with this/ these foods?

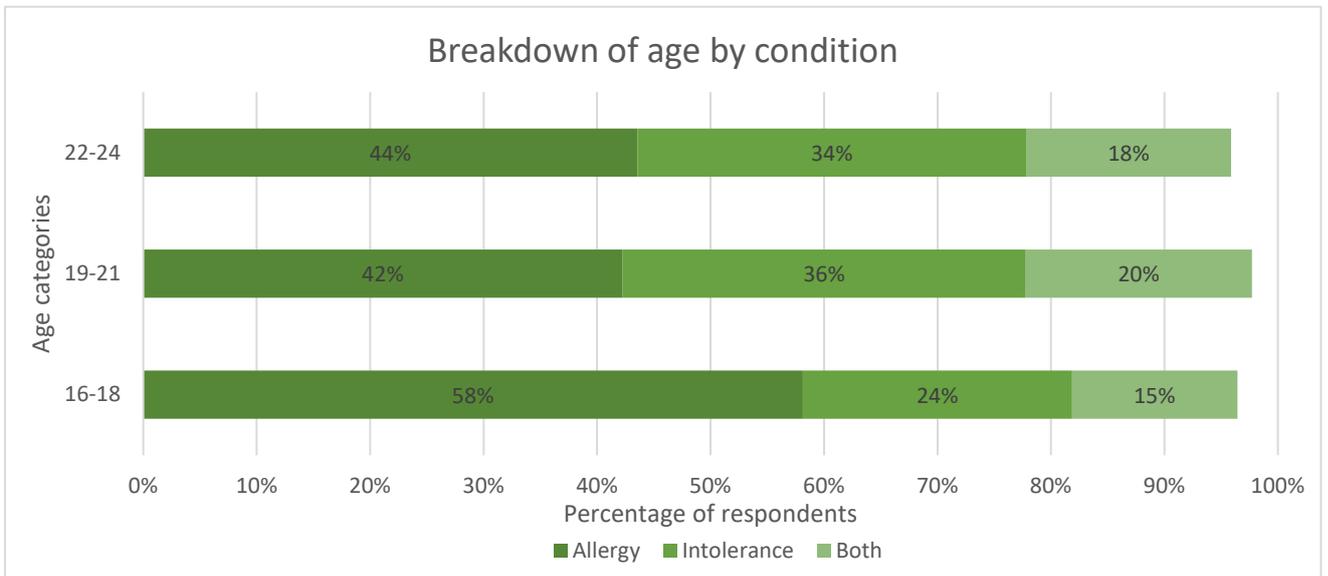
2866 respondents reported having a reaction to certain foods. They were then asked to describe their condition. Of those that reported an allergy or an intolerance, 49% of these respondents reported having an allergy only, 33% reported having an intolerance only and 18% report having both.

<sup>2</sup> Throughout this report, eligible respondents refer to those who were aged between 16-24 and reported that they had ever had a reaction after eating certain foods and therefore invited to complete the rest of the survey.



Base:2510<sup>3</sup>

Of these respondents, 36% who reported a food intolerance were aged 19-21 years old. Of respondents aged 16-18 years old, the majority reported having a food allergy only (58%)<sup>4</sup>.



Base:2599

<sup>3</sup> 89 respondents reported a reaction other than allergy or intolerance.

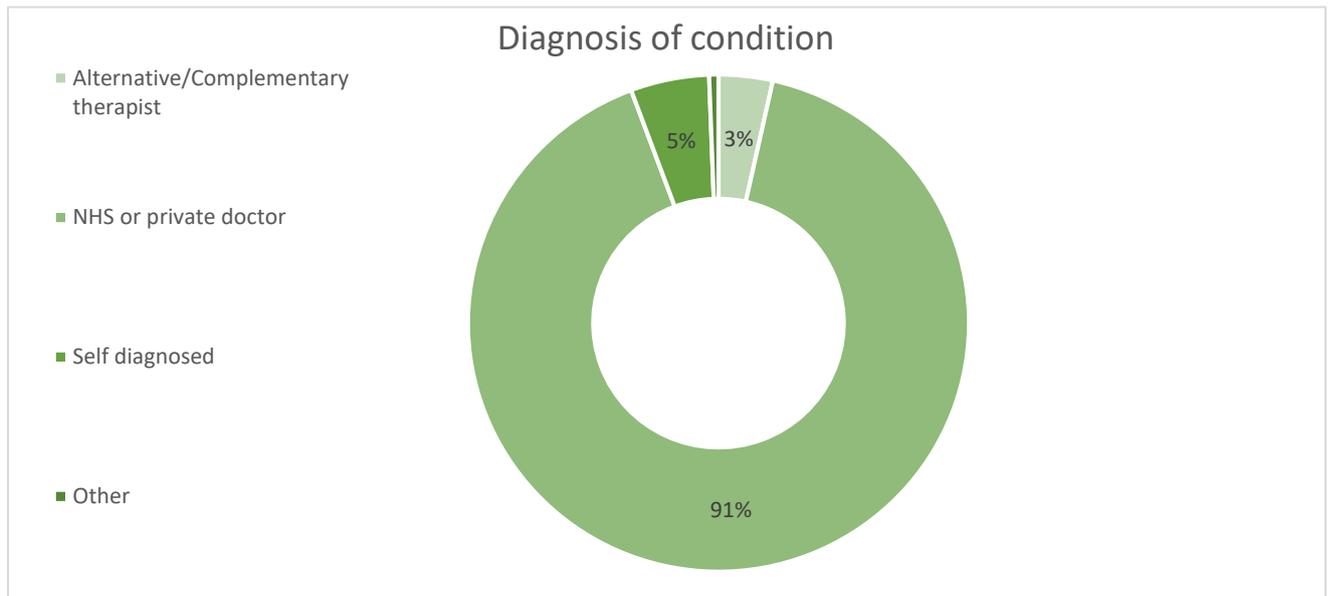
<sup>4</sup> As per chapter 1, 'food allergy' incorporates both 'food allergy' and 'coeliac disease', and 'food intolerance' incorporates both 'food intolerance' and 'non-coeliac gluten sensitivity'. 'Both' incorporates those with a food allergy and intolerance – this terminology is used throughout the remainder of the report



### Diagnosis of condition

Respondents were then asked if their condition had been diagnosed. Here, 73% of all eligible respondents reported having their condition diagnosed and of these, 91% reported being diagnosed by the NHS or a private doctor.

Per condition, 97% of those with a food allergy had their condition diagnosed by the NHS or a private doctor, compared to 73% of respondents with a food intolerance, and 88% of respondents with both.

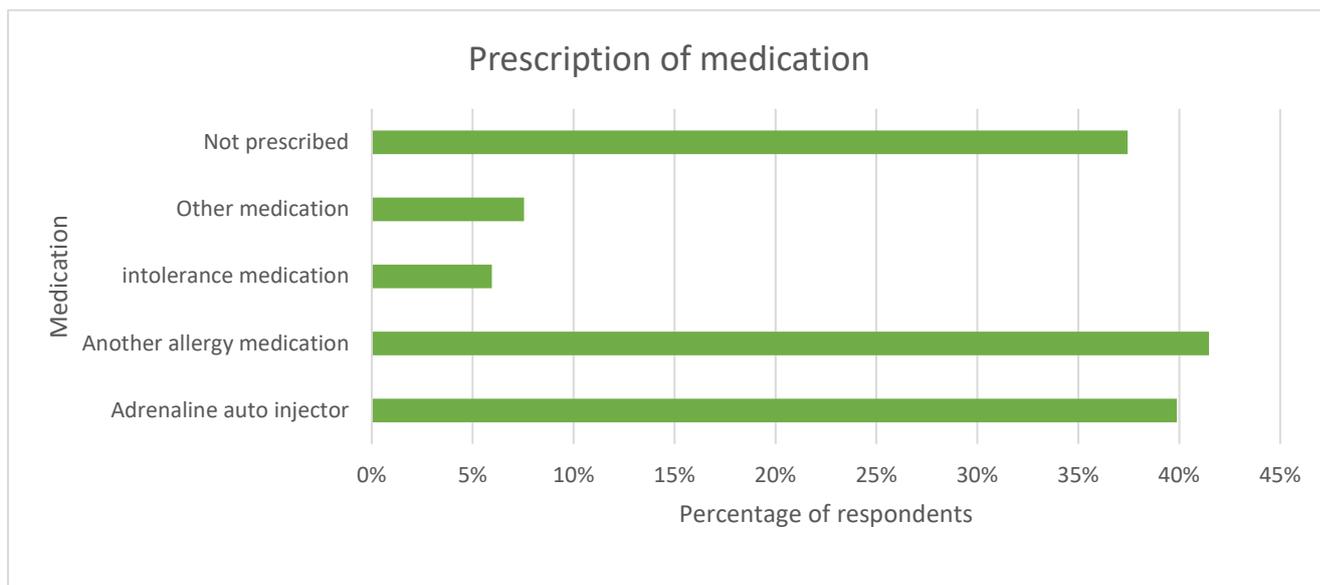


Base:1834<sup>5</sup>

### Prescription of medication

We then asked respondents whether they had been prescribed medication by a medical practitioner; it was possible to select multiple medications in response to this. Here, 40% reported being prescribed Adrenaline auto injectors and 41% reported being prescribed additional or other allergy medication. 37% of respondents reported not being prescribed medication.

<sup>5</sup> Only those that reported having their condition diagnosed were asked this question



Base: 2505

### Carrying adrenaline auto-injectors

Respondents who reported having an adrenaline auto-injector were then asked how often and where they carry them. 73% of these respondents<sup>6</sup> reported carrying it everywhere. 3% of these respondents reported rarely carrying their adrenaline auto-injectors.

	Respondents	Proportion
I carry it/them with me everywhere I go	723	73%
I carry it/them with me most places I go	174	18%
I carry it/them with me sometimes but not all the time	56	6%
I never carry it/them with me	13	1%
I rarely carry it/them with me	26	3%
Sum	992	100%

### Reasons for not carrying adrenaline auto-injectors

Of those who commented<sup>4</sup>, 37% of respondents stated that they forget their adrenaline auto-injectors. 24% explain that it is inconvenient to carry their auto injector around. 24% state that they do not carry their adrenaline auto-injector(s) if

<sup>6</sup> 10% of respondents reported not always carrying their adrenaline auto-injectors were eligible to answer this question N=985.



they are not eating and 21% explain that if there is minimal risk of a reaction they will not carry one. 4% of respondents explain that they do not carry their adrenaline auto-injector(s) if they are going out to a pub or nightclub.

**Additional breakdowns**

Across these questions, some additional differences were found between different age groups, condition and status, plus a smaller number by region which are not reported here. Full details can be found in Annex B.

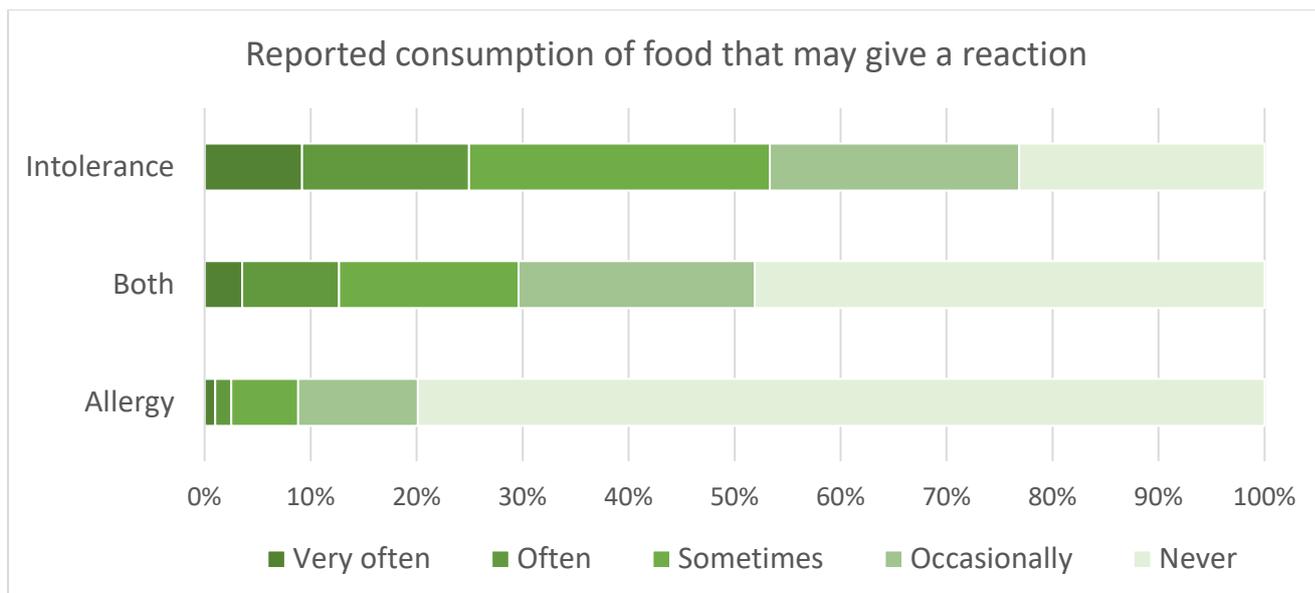
### Chapter 3. Experience of the condition

This part of the survey looked in more detail at young people’s wider experience of their condition exploring consumption of foods, telling others and sources of support. These questions were intended to explore in more detail some trends noted in the literature that are specific to this age group, plus sources of support, before considering eating-out experiences without this support (chapter 4).

#### Consuming foods that may give a reaction

We asked respondents if they ever consumed foods that they know might cause a reaction, a trend seen in wider work particularly amongst a younger age group<sup>5</sup>. Of the respondents who answered this question<sup>6</sup>, 56% reported never consuming foods they know might give them a reaction, 17% reported occasionally, 15% reported sometimes, 8% reported often and 4% reported very often.

When looking at this data by reported condition, 23% of respondents with food intolerances reported never consuming these foods, compared to 80% of respondents with a reported food allergy and 48% of respondents who reported both.



Base:2419

#### Telling others about condition

Respondents were asked when they make new friends or meet new people, when they tell them about their condition. 56% of respondents with a food allergy reported only telling others about their condition when eating together, 26% told others when they got to know them better, 5% reported not telling anyone at all. 67% of respondents with a food intolerance reported telling others if they are eating together

<sup>5</sup> SAMPSON, M., MUNOZFURLONG, A., & SICHERER, S. (2006). Risk-taking and coping strategies of adolescents and young adults with food allergy. *Journal Of Allergy And Clinical Immunology*, 117(6), 1440-1445. doi: 10.1016/j.jaci.2006.03.009

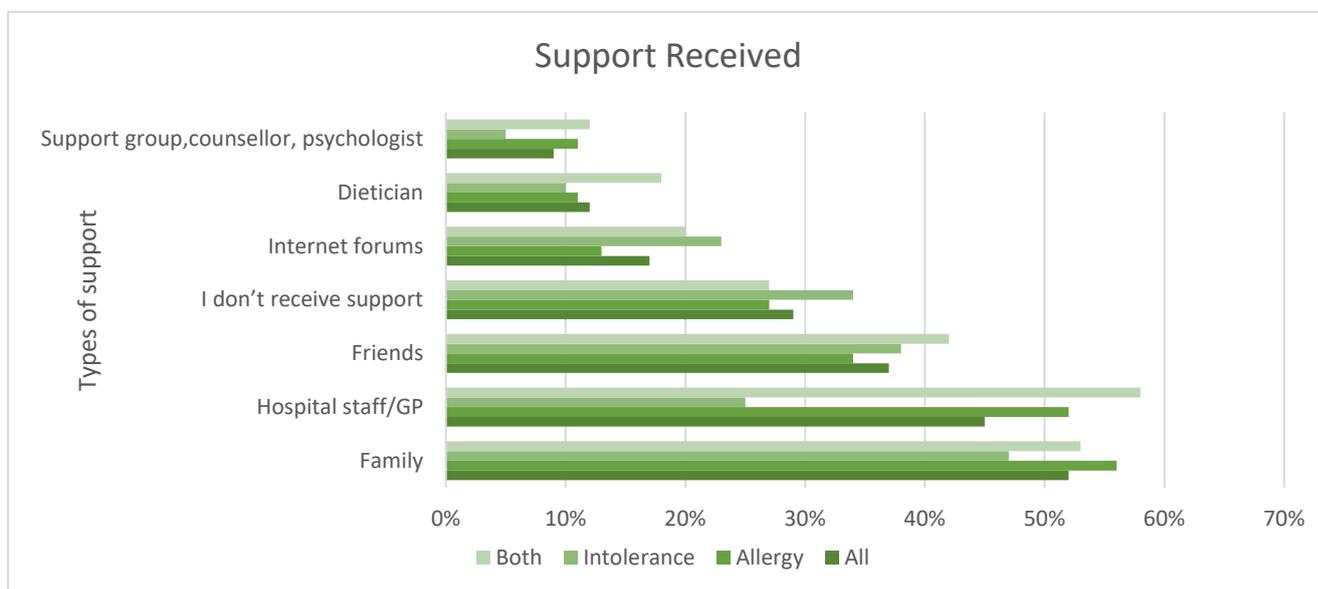
<sup>6</sup> N=2447

and 11% reported not telling anyone, 7% reported telling others when they got to know them better.

Respondents <sup>7</sup> were also asked why they did not tell anyone about their condition, and the broad themes that were identified related to embarrassment, their condition being complicated to explain and that it was unnecessary for others to know.

### Receiving support

Respondents were also asked whether they received support for their condition from: Family, Hospital staff/ GP<sup>7</sup>, Friends, Dietician, Internet forums, or support groups<sup>8</sup> and were invited to select all that apply. 53% of respondents reported receiving support from their family, while 29% reported not receiving support from these sources.



Base:2348

### Support in main residency in managing conditions

When asked if respondents received support in the management of their condition from someone in their main residency, overall, 61% reported receiving such support. Per condition, 67% of respondents with an allergy reported to receive support in their place of residency. 50% of respondents with a food intolerance reported receiving support in their place of residency. 61% of respondents with both a food allergy and intolerance reported receiving support in managing conditions in their main residency.

<sup>7</sup> N=108

<sup>7</sup> Hospital staff and GP were placed into the same category after analysis for ease

<sup>8</sup> Support groups, Support charities and psychologist/counsellor were collated



Base:2359

Looking at the breakdowns by status, 55% of respondents who were in full-time employment reported receiving support in their main residency while 56% of respondents that identified as being in the NEET category reported receiving support in their main residency.

	Education/Training	Employed full-time	Employed part-time	NEET/Other	All
Yes	70%	55%	60%	56%	62%
No	30%	45%	40%	44%	38%

Base: 1951

**Additional breakdowns**

Again, across these questions, some additional differences were found by different age groups, conditions and status, plus a smaller number by region which are not reported here. Full details can be found in Annex B.

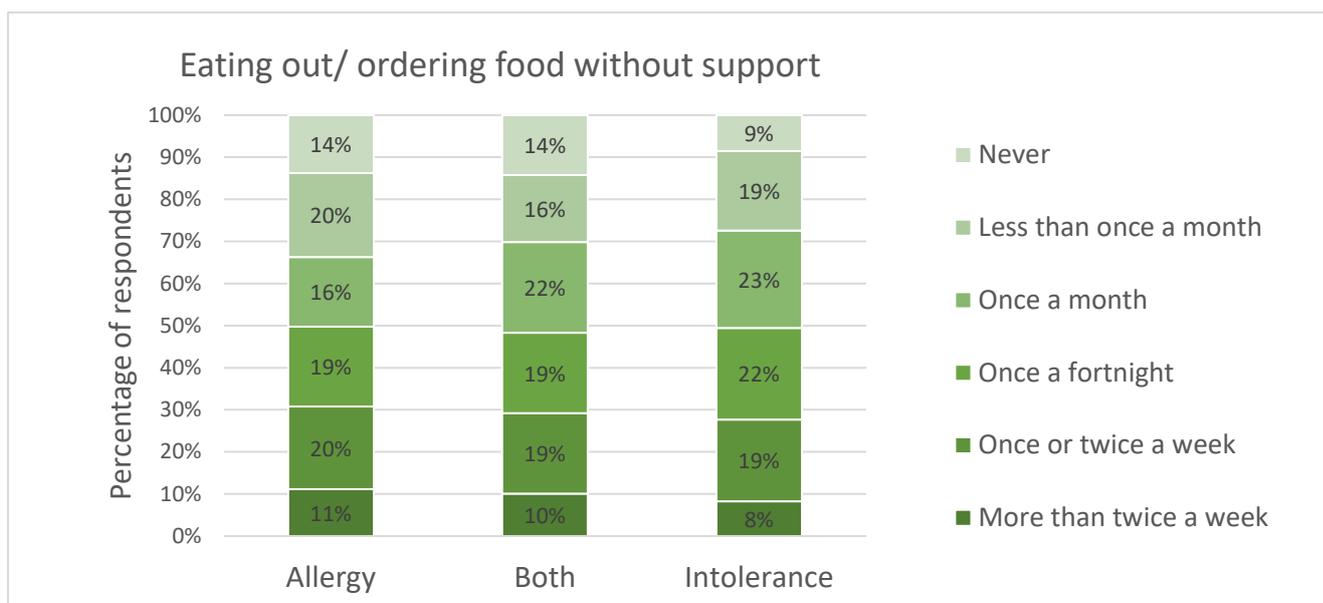
## Chapter 4. Experience when eating out

This section of the survey explored respondent’s experiences of eating out when not with someone who can provide support. This is of interest as wider research has shown going to restaurants without support is a concern for young people with allergies<sup>10</sup>. We were also keen to gauge awareness of legislation which specifies that information on the 14 food allergens must now be provided to consumers, and to learn about other ways young people with food allergies and intolerance could be supported to improve their eating out experience – helping to inform possible, future interventions.

### Eat out or ordering takeaway/ ordering food online without support

88% of respondents reported eating out/ordering takeaway online without support.

Per condition, 66% of those with a food allergy reported they ate out or ordered takeaway/ food online without support at least once a month compared to 73% of those with both a food intolerance and 70% of those with both.



Base: 2308<sup>11</sup>

### Likelihood of allergy management practices before eating out without support

We asked respondents to rate the likelihood of a number of allergy management practices before and when eating out without support. Before eating out without support 49% of respondents across all conditions reported that they always pack their medication before eating without support,

<sup>10</sup> Worth, A., Regent, L., Levy, M., Ledford, C., East, M., & Sheikh, A. (2013). Living with severe allergy: an Anaphylaxis Campaign national survey of young people. *Clinical and Translational Allergy*, 3(1), 2. doi:10.1186/2045-7022-3-2

<sup>11</sup> Base exclude 'other'

55% reported always researching the menu online before going to a new/unfamiliar place. 30% report always asking friends to go to a place they know is safe, a further 30% report that they always trust their friends will support them if they have a reaction and 9% reported always contacting the restaurant to check they provide allergen information. 7% of respondents report never preparing before eating out without support.

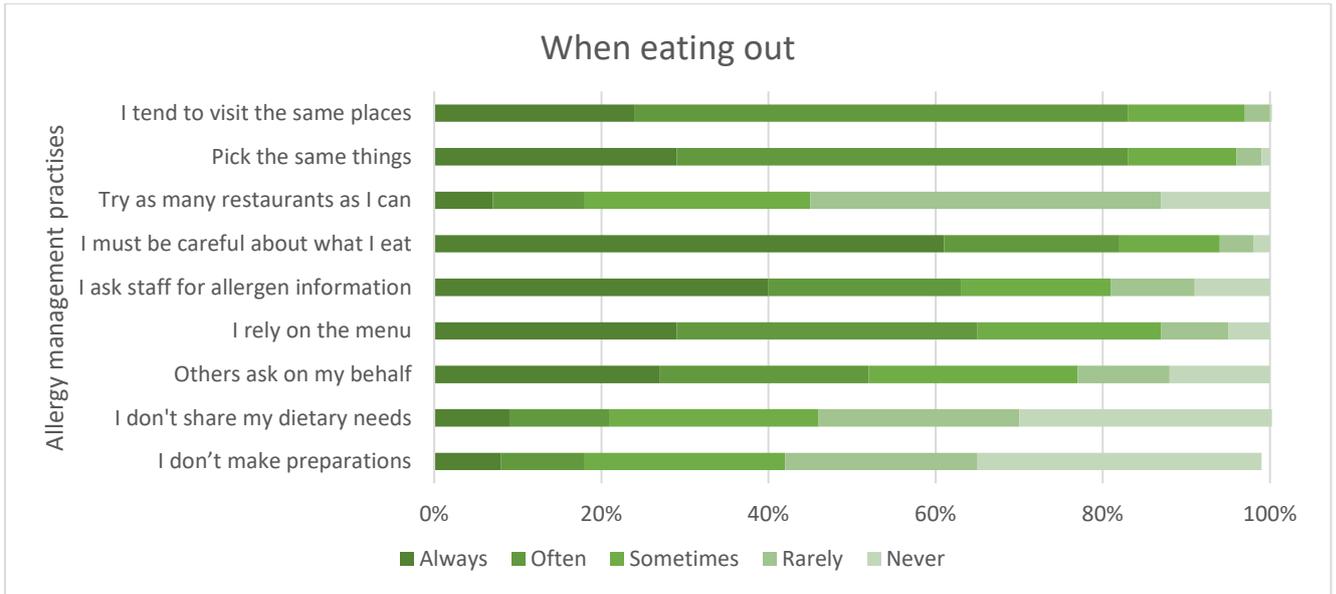
Across age groups, 40% of respondents aged 16-18 reported never contacting the restaurant to check if they provide allergen information and/or prepare a meal that is safe for their needs, compared to 34% of 22-24 year olds.



Base:1751-1776

### Likelihood of allergy management practises when eating out without support

When eating out, 59% of eligible respondents reported that they often tend to visit the same places, and 7% reported that they always like to try lots of different types of restaurants. 61% of respondents stated that they must always be careful when choosing what to eat. 40% of respondents reported that they always ask the restaurant staff for allergen information



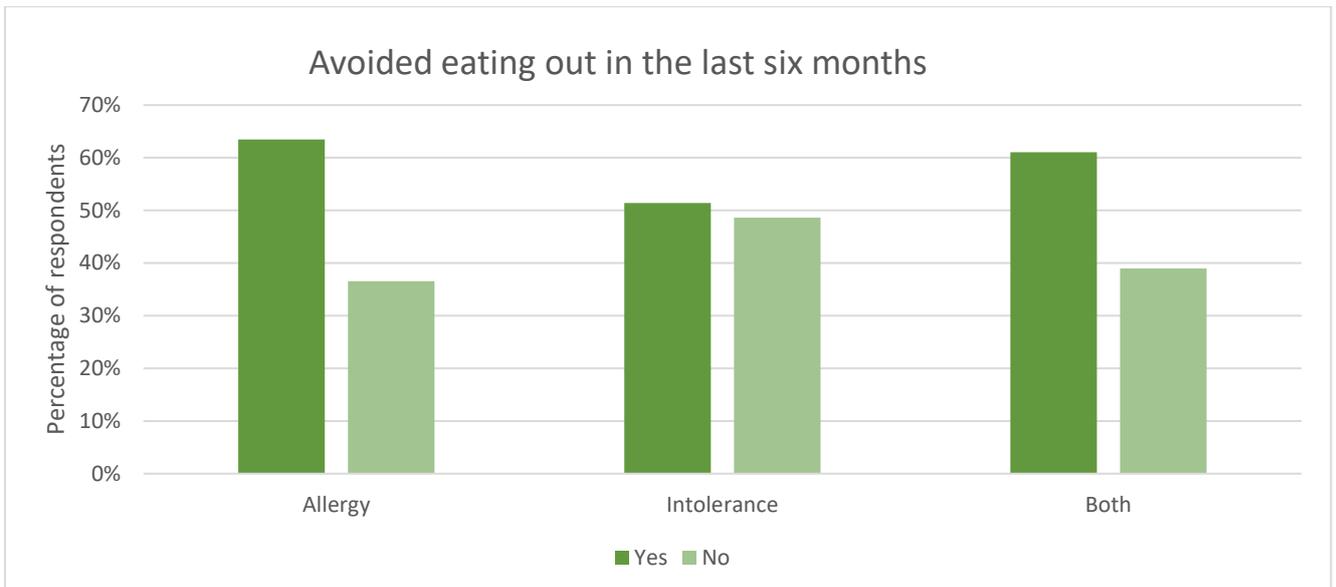
Base:1761-1776

### Likelihood of allergy management practices when ordering a takeaway/ food online

We also asked respondents to rate the likelihood of a number of practices when ordering a take way or food online. 51% of all eligible respondents reported that they always check an online menus allergen information before choosing what to eat. 39% reported that they only order specific dishes that they know are safe, a further 54% admitted to often ordering specific dishes.

### Avoiding eating out

We then asked if respondents had avoided going out for a meal because of their condition in the last six months. Overall, 60% of respondents reported yes. Per condition, 64% of those with a food allergy reported avoiding going out, compared to 53% of those with a food intolerance.



Base:1753

### Avoided ordering a takeaway/ food online

We also asked respondents if they had avoided ordering a takeaway/ food online because of their condition in the last six months. 61% of respondents reported this and per condition, 65% of respondents with a food allergy report to avoiding ordering takeaway/ food online compared to 54% of those with a food intolerance.

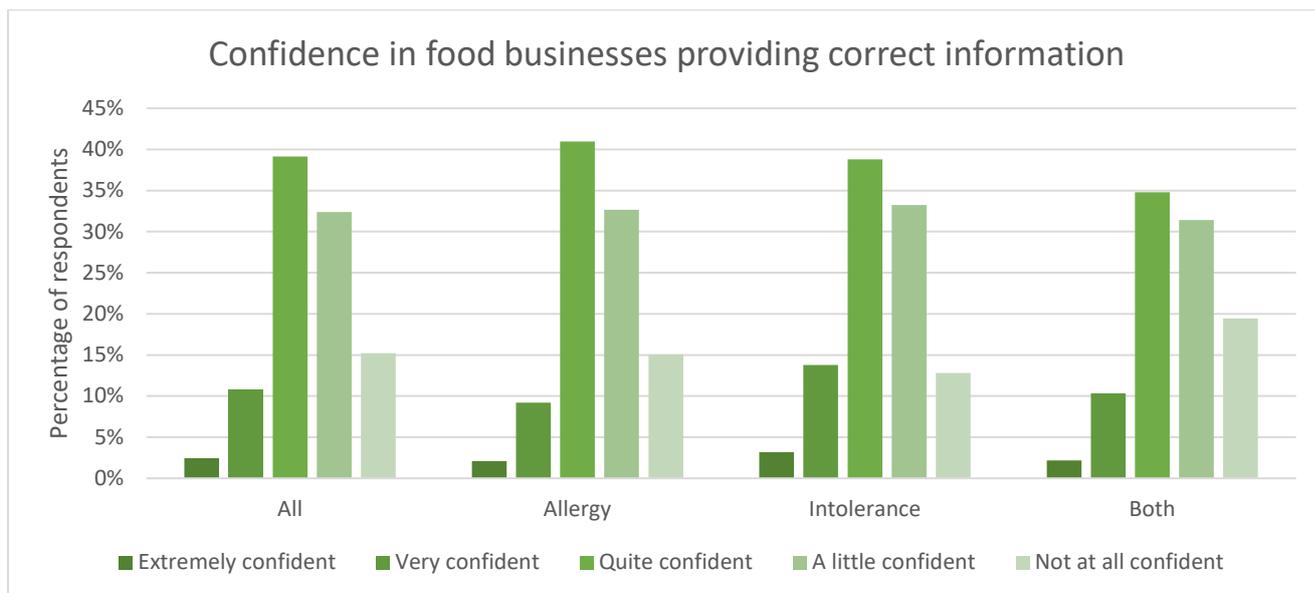
### Allergen Information

The survey then asks a series of questions about allergen information and support.

When asked if respondents were aware of the legal requirement of food businesses to provide customers with information on the top 14 allergens when used as ingredients in the food they serve, 67% of respondents reported yes to this, whilst 26% were not aware and 6% reported that they were not sure.

### Confidence in food businesses providing correct information

When asked how confident respondents are that food businesses, such as restaurants and takeaways, can provide correct information regarding allergens in food they serve, 53% of all eligible respondents stated that they felt extremely, very or quite confident. The full range of responses can be found in the graph below.



Base:1676

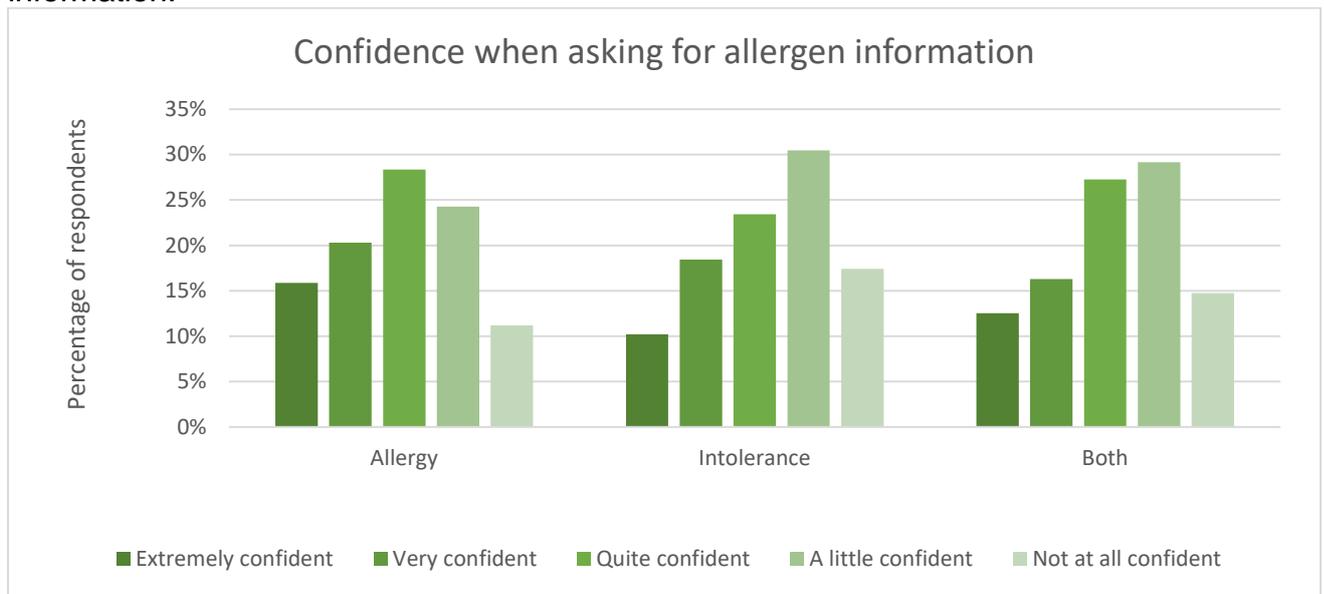
### Confidence asking for allergen information

We asked all respondents how confident they felt asking for allergen information when eating out or ordering a takeaway/ food online. Of the 1695 respondents that answered, 14% reported feeling extremely confident, 19% reported feeling very confident, 27% reported feeling quite confident, 27% reported feeling a little confident and 14% reported feeling not at all confident<sup>11</sup>

Of those with a food allergy, 16% reported feeling extremely confident compared to 10% of respondents with an intolerance. 13% of respondents with both a food allergy

<sup>11</sup> Percentages may not add up to 100% as they are rounded to the nearest percent

and intolerance report feeling extremely confident when asking for allergen information.

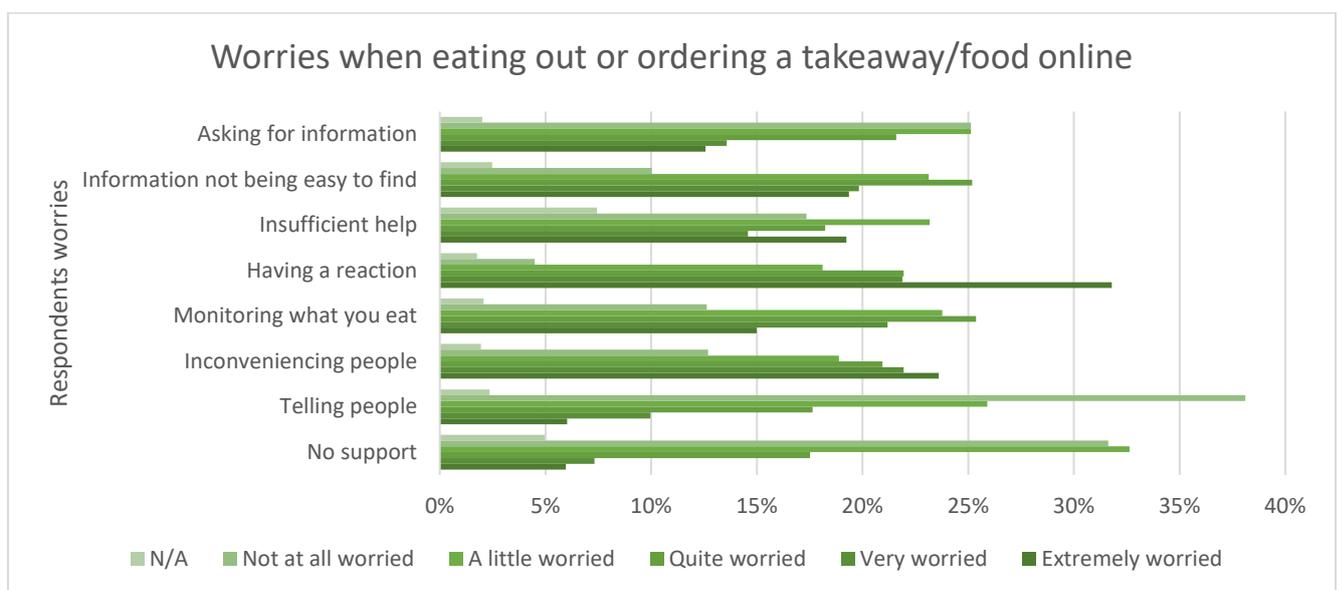


Base: 1675

### Worries when eating out or ordering a takeaway/ food online

Respondents were also asked to rate a number of statements to gauge if they were at all worried about a number of items when eating out or ordering a takeaway/ food online.

32% of respondents reported feeling extremely worried about having a reaction when eating out, this was the most significant worry. 38% of respondents reported feeling not at all worried about telling people about their condition. 33% of respondents reported feeling quite worried about receiving no support from someone who helps them in managing their condition when eating out. The full breakdown of responses can be seen in the graph below.





Base:1695<sup>12</sup>

### Help in managing conditions

Respondents were asked to provide suggestions of what could improve their eating out/ online experience.

65% of all eligible respondents agreed that a separate menu for people with food allergies/ intolerances would help in the management of their condition. Furthermore, 84% reported that allergen information listed next to dishes on the menu would help manage their conditions, additionally 72% reported that to improve the managing of their condition waiting staff could pro-actively ask if anyone on the table has a food allergy or intolerance when taking your reservation or your food order.

	Percentage of respondents	Total
Separate allergy menus	65%	1105
Allergen information listed next to dishes	84%	1421
Allergen symbols next to dishes	81%	1375
Signs encouraging people to ask for allergen info	46%	774
Staff to proactively ask if anyone has a food allergy	72%	1220
None of the above	2%	35
Other	6%	109
Total	100%	1697

### Improvements when eating out or ordering takeaway / online?

Respondents were also asked to make suggestions that would improve their experience when eating out or ordering takeaway/ food online. A selection of these free-text responses was grouped by type, it is important to note that not all the free-text responses were analysed <sup>13</sup>. Of these, 40% reported that staff should have a better knowledge of allergens/ intolerances and a more positive attitude towards helping customers. 23% stated that greater transparency of allergen information and all ingredients used would improve their experience. A further 14% reported that menus should include allergen information beyond the required 14.

<sup>12</sup> N/A represents respondents who did not answer all parts of the question.

<sup>13</sup> Not all respondents that answered were eligible to be included in the sample.



## Chapter 5. Demographics

To help to understand the profile of this population further and aid analysis, respondents were asked a small number of demographic questions at the end of the survey. Data from these are presented below.

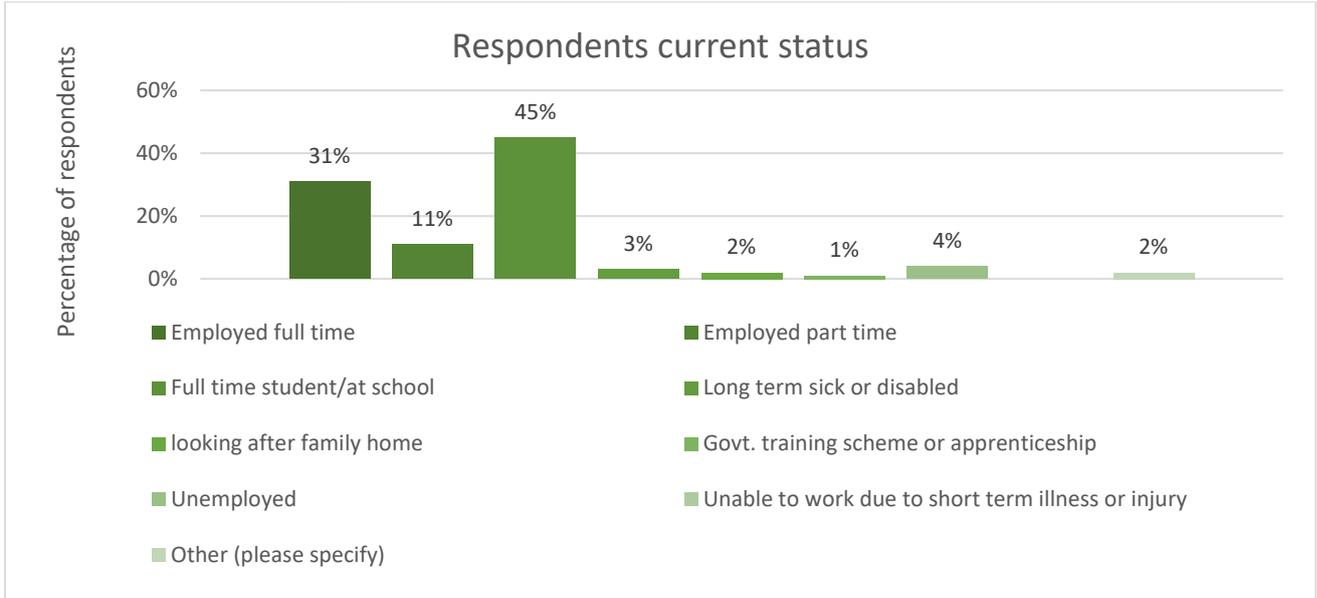
### Region

Respondents were asked where they currently live, and respondents from the South East represented the largest region at 18%, the South West at 12% and Scotland at 11%.

Region	Respondents	Proportion
East Midlands	187	10%
East of England	118	6%
London	161	8%
North East	73	4%
North West	160	8%
Northern Ireland	99	5%
Scotland	205	11%
South East	343	18%
South West	227	12%
Wales	107	5%
West Midlands	128	7%
Yorkshire & Humber	141	7%
Total	1949	100%

### Employment

Respondents were then asked about their household composition and employment status. Household composition is not reported as this question did not provide useful data but can be viewed in the survey datafile. Regarding employment status, 45% of respondents reported their current status as full-time student/ at school, 31% reported being employed full time, 11% reported being employed part time and 4% reported being unemployed.



Base:1952

## Chapter 6. Summary

The survey provides an insight into the experiences of young people living with a food condition, and specifically an allergy or intolerance. In summary, 49% of respondents reported having a food allergy, 33% reported having a food intolerance and 18% reported having both a food allergy and intolerance. 27% of respondents were aged 16-18, 30% were 19-21 and the largest category was those aged 22-24 years old (43%)

The survey focused largely on young people's experiences of eating out or ordering takeaway/ food online without support, reports of which varied, with 20% of respondents reporting to eat out or order takeaways/ food online once a fortnight, a further 20% reported once a month. 12% of respondents reported never ordering a takeaway or eating out.

Reflecting on a number of allergy management practices, before eating out, 55% of respondent reported always researching the menu, and 49% said that they always pack their medication. 7% of respondents reported never preparing. When ordering a takeaway/food online without support, 51% of eligible respondents stated that they always check an online menus allergen information before choosing what to eat. 39% reported that they always only order specific dishes that they know are safe.

Respondents were asked if they have avoided eating out in the last 6 months due to their condition. 63% of respondents with a food allergy reported yes to this question. 51% of those with a food intolerance only avoided eating out in the last 6 months as well as 61% of those with both. 65% of respondents with a food allergy also reported to avoid ordering a takeaway/ food online, as well as 54% of those with a food intolerance and 61% of those with both a food allergy and intolerance.

With regards information to support people when eating out, 67% of respondents reported that they were aware of the legal requirement of food businesses to provide customers with information on the top 14 allergens, when used as ingredients in the food they serve. 53% of all eligible respondents stated that they felt extremely, very or quite confident that food businesses are able to provide correct information regarding allergens in food they serve. 46% of respondents reported feeling very or quite confident when asking for allergen information.

84% reported that allergen information listed next to dishes on the menu would help manage their conditions, a further 72% reported that to improve the managing of their condition waiting staff could pro-actively ask if anyone on the table has a food allergy or intolerance when taking your reservation or your food order. When asked for suggestions on how respondents experience of ordering takeaway/ eating out could be improved, 40% noted that restaurant staff with knowledge about food allergies and intolerances would be beneficial.

Responses vary depending on Condition, Age and Sociodemographic full data tables can be found in Annex B.



## Annex A - Questionnaire

### Q1a(i). How old are you?

- 16 – 18 years old
- 19 – 21 years old
- 22 – 24 years old

### Q1a(ii). Have you ever had a reaction after eating certain foods?

- Yes
- No [screen out]

### Q1a(iii). How would you best describe your problem with this/these food(s)?

Please select all that apply:

- Food allergy
- Food intolerance
- Coeliac disease
- Non-coeliac gluten sensitivity
- Other (please specify)

Please note that from this point onwards, 'condition' refers to food allergy/intolerance.

### Q1a(iv). Has this condition been diagnosed?

- Yes
- No [skip to Q2a]

### Q1a(v). How have you arrived at the diagnosis for your condition?

- I have been formally diagnosed by an NHS or private medical practitioner (e.g., GP, dietician, allergy specialist in a hospital or clinic)
- I have been diagnosed by an alternative or complementary therapist (e.g., applied kinesiology (a process based on muscle testing), Vega test (measuring electromagnetic conductivity in the body), hair analysis, online or walk-in allergy testing service)
- I have diagnosed myself based on the foods which cause me problems
- Other (please give details)

### Q2a(i) Do you have any medication for your condition that has been prescribed by a medical practitioner?



Please select all that apply:

- Yes – adrenaline auto-injector (e.g. Emerade ®, EpiPen ®, or Jext ®) [if selected, to Q2b(i)]
- Yes – another allergy medication (e.g. antihistamine, asthma inhaler etc) Go to Q3
- Yes – intolerance medication (e.g. lactase tablets) Go to Q3
- Yes – other medication relating to your other food condition [Go to Q3]
- No [skip Q2b]

**Q2b(i). How often do you carry your adrenaline auto-injector(s) with you?**

Please select the appropriate response.

- I carry it/ them with me everywhere I go [Go to Q3]
- I carry it/ them with me most places I go [to Q2b(iii)]
- I carry it/ them with me sometimes but not all the time [Q2b(iii)]
- I rarely carry it/ them with me [Q2b(iii)]
- I never carry it/ them with me [Q2b(iii)]

**Q2b(iii). When you don't carry your adrenaline auto-injector(s), why is this?**

**Q3. Do you ever consume foods that you know might give you a reaction?  
(This does not include accidental eating foods that you thought were safe to eat)**

- Never – I strictly avoid these foods
- Occasionally – once or twice a year
- Sometimes – once a month
- Often – once a week
- Very often – every few days or more

**Q4a(i). When you make new friends or meet new people, when do you generally tell them about your condition?**

- I tell them as soon as I meet them
- I tell them when I know them better
- I tell them if we are eating together
- I tell them if I start to get allergic / intolerance symptoms
- I don't tell them [to Q4a(ii)]
- Other (please specify)



**Q4a(ii). Why do you not tell others about your condition?**

**Q5a. Do you ever receive or seek support for your condition from any of the following sources?**

Please select all that apply:

- Support group
- Support charities
- Psychologist / counsellor
- Hospital staff, e.g. allergy specialist, nurse or doctor
- GP
- Dietician
- Internet forums
- Friends
- Family
- I do not receive support from any of these sources
- Other (please specify)

**Q5b. Thinking about your main residence, i.e. where you spend most of your time, is there anyone who provides support in the management of your condition, e.g. with cooking, food purchasing, or restaurant choices?**

- Yes
- No

We'd now like to ask you a few questions about eating out without someone who provides support in the management of your condition.

**Q6. How often do you eat out or order takeaway / food online without someone who provides support in the management of your condition?**

- At least once a day
- 5-6 times a week
- 3-4 times a week
- Once or twice a week
- Once a fortnight
- Once a month
- Less than once a month
- Never [skip eating out qs]

**Q7. Before eating out:**



Please rate the following statements using the scale below: (1 = very unlikely – 5 = very likely, not applicable)

- I ensure that I pack my medication that is related to my condition
- I ask my friends to go to a place I know is safe for me to eat in
- I call / email the restaurant to check if they can provide allergen information and / or prepare a meal that is safe for my needs
- I research the menu online before I go to a new/unfamiliar place
- I usually decide what meal to have before arriving at the restaurant and check its ingredients are safe (e.g. via an online menu)
- I trust that my friends will be able to provide support if I start to have a reaction
- I don't make any particular preparations

### **Q8. When eating out:**

Please rate the following statements using the scale below: (1 = very unlikely – 5 = very likely, not applicable)

- I tend to visit the same places
- I tend to pick the same things to eat
- I try and eat out at new places wherever possible
- I like to try lots of different types of restaurants
- I must be careful about what I choose to eat
- I ask the restaurant staff for allergen information
- I rely on the menu when I am making decisions about what to eat
- I am happy for others to ask on my behalf about allergen information  
I don't share my dietary / allergen needs with the restaurant's staff
- I don't make any particular preparations

### **Q9. When ordering a takeaway / food online:**

Please rate the following statements using the scale below: (1 = very unlikely – 5 = very likely, not applicable)

- I check the online menu for allergen related information before I choose what to eat
- I call the restaurant / takeaway before I make an order to ask about the allergen information
- I check the food for allergy information when it is delivered, and when there is no written information available, I call the restaurant / takeaway
- At home, I check if the food visibly contains allergens, e.g. pieces of peanut
- I sample a small amount of food on my mouth to see if I have a reaction
- I only order specific dishes which I know from experience I can eat
- I only order from specific restaurants / takeaways which I know from experience are safe to eat from
- I don't make any particular preparations



**Q10a. Have you ever avoided going out for a meal in an eating out venue because of your condition in the last six months?**

- Yes
- No

**Q10b. Have you avoided ordering takeaway / food online because of your condition in the last six months?**

- Yes
- No

**Q11a. Since December 2014, all food businesses are legally required to provide customers with information on the top 14 allergens\*, when used as ingredients in the food they serve. Are you aware of this requirement?**

(\*The top 14 allergens are: eggs, milk, peanuts, tree nuts, fish, crustaceans, molluscs, celery, mustard, lupin, cereals containing gluten, sulphur dioxide / sulphites, soya, and sesame)

- Yes
- No
- Not sure

**Q11b. How confident are you that food businesses, such as restaurants and takeaways, are able to provide correct information regarding allergens in food they serve? (Including on menus, staff knowledge etc.)**

Please choose the appropriate response:

- Not at all confident
- A little confident
- Quite confident
- Very confident
- Extremely confident

**Q11c. How confident do you feel to ask for allergen information when eating out or ordering a takeaway / food online?**

- Not at all confident
- A little confident
- Quite confident
- Very confident
- Extremely confident

**Q12. When you eat out or order a takeaway / food online how worried are you about any of the following, if at all?**



Please select the appropriate response: (Scale: 1 = not at all worried – 5 = very worried, not applicable)

- Not having someone who supports you in the management of your food allergy/intolerance around
- Having to tell people you are with about your food allergy/intolerance
- Inconveniencing people because they have to accommodate your food allergy/intolerance
- Having to monitor what you eat
- Having a reaction to something you have eaten
- Having a reaction even though your dietary needs had been previously discussed
- Not receiving sufficient help if you start to have a reaction to something you have eaten
- Allergen information not being easy to find
- Having to ask for allergen information

**Q13. Again, when eating out or ordering a takeaway / food online, would any of the following help in the management of your condition?**

please select those that apply:

- Separate menus for people with food allergies/intolerances
- Allergen information listed next to dishes on the menu
- Symbols representing allergens listed next to dishes on the menu
- Signs encouraging people with food allergies/intolerances to ask for allergen information
- Waiting staff pro-actively asking if anyone on the table has a food allergy or intolerance needs when taking your reservation or your food order
- None of the above
- Other (please specify)

**Q14. Is there anything else that needs to be improved when eating out or ordering takeaway / online?**

We'd now like to ask a few questions about yourself.

**Q15a. Thinking about your main residence (i.e. where you spend most your time), where do you currently live? Please select one option.**

Please select **only** one option:

- East Midlands



- East of England
- London
- North East
- North West
- Northern Ireland
- Scotland
- South East
- South West
- Wales
- West Midlands
- Yorkshire & Humber

**Q15b. Again, thinking about your main residence, i.e. where you spend most of your time, who do you live with?**

- Add HH grid
- Other (please specify)

**Q16. Which best describes your current status?**

Please select **only** one option:

- Self-employed full time (+30 hours per week)
- Self-employed part-time (less than 30 hours per week)
- In paid full-time employment (30+ hours per week)
- In paid part-time employment (less than 30 hours per week)
- Unemployed
- Looking after family or home
- Full-time student / at school
- Long term sick or disabled
- Unable to work because of short-term illness or injury
- On a government training scheme
- Doing something else (please give details)

**Q17. Would you like to be entered into a prize draw to be in with a chance of winning a £20 voucher?**

- Yes
- No

Please send us your name, telephone number and email address to be entered into our prize draw. Email us at: [allergyresearch@food.gov.uk](mailto:allergyresearch@food.gov.uk)