

The 2014

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Survey

Scotland Bulletin 6  
Eating and health

The 2014

# Scotland Bulletin 6 Eating and health

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# Official Statistics

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

Further information on Official Statistics can be found on the UK Statistics Authority website<sup>2</sup>.

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

<sup>2</sup> <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 Scotland, 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 475 interviews in Scotland on which this report is based. Wave 3 builds on and extends the previous findings.

The key findings for Scotland 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 Scotland from across the entire survey.

This bulletin provides a descriptive overview of the key findings for Scotland from Wave 3 in relation to eating and health.

## Background and objectives

### Role of the FSA and FSAS

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. The FSA in Scotland 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 Standards Agency in Scotland is also tasked with the provision of diet and nutrition advice to encourage healthier eating. The FSA in Scotland will become a devolved public food body for Scotland on 1 April 2015, and will be renamed Food Standards Scotland. Its remit will remain broadly the same but with a particular focus on the needs of the Scottish nation.

## 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 website<sup>3</sup>. Specific examples of use of the findings include results from Wave 1 being used to determine the theme of the 2012 FSA Food Safety Week<sup>4</sup> 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 practices<sup>5</sup> and the relationships between nutrition and food safety<sup>6</sup>. 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, included a question module on healthy eating for respondents in Scotland and Northern Ireland, 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.
- Assess differences between, and areas for increased focus, across the national agencies in Scotland, Wales, Northern Ireland and England.

## 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

<sup>3</sup> The Wave 1 report can be found at: [http://www.foodbase.org.uk/admintools/reportdocuments/641-1-1079\\_Food\\_and\\_You\\_Report\\_Main\\_Report\\_FINAL.pdf](http://www.foodbase.org.uk/admintools/reportdocuments/641-1-1079_Food_and_You_Report_Main_Report_FINAL.pdf) and the Wave 2 report can be found at: [http://www.foodbase.org.uk/admintools/reportdocuments/805-1-1460\\_Wave\\_2\\_Main\\_Report.pdf](http://www.foodbase.org.uk/admintools/reportdocuments/805-1-1460_Wave_2_Main_Report.pdf)

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

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

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

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 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 Report<sup>7</sup> 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, and the Scottish Index of Multiple Deprivation (SIMD).<sup>8</sup> Variation by age and gender has been

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

<sup>8</sup> The Scottish Index of Multiple Deprivation (SIMD) is the official measure of area deprivation in Scotland which considers deprivation across income, employment, health, education, skills and training, housing, geographic access and crime. Areas are grouped into quintiles based on their 2012 SIMD score, with quintile 1 the most deprived areas across Scotland and quintile 5 the least deprived areas.



considered across all three waves, while only Wave 3 data was examined for variation by SIMD. Full data are available in the UK Data Archive<sup>9</sup> and at data.gov.uk<sup>10</sup> for further analysis.

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<sup>9</sup> <http://www.data-archive.ac.uk/>

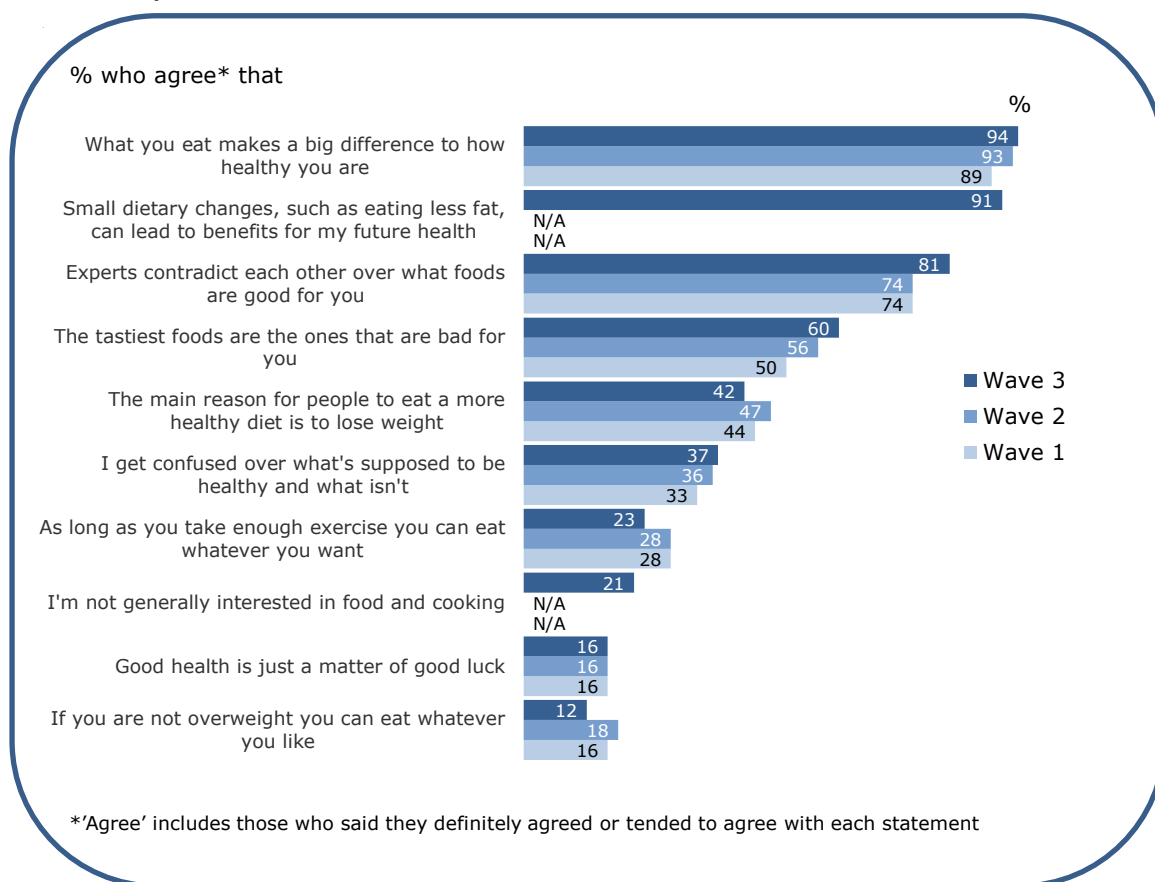
<sup>10</sup> <http://data.gov.uk/>

## Key Findings

- Most respondents agreed that what you eat makes a big difference to how healthy you are (94%) and that small dietary changes can lead to benefits for future health (91%).
- Men were more likely than women to agree that if you are not overweight you can eat whatever you like (17% of men agreed compared with eight per cent of women).
- The types of food that respondents most frequently reported eating at least once a day were milk and dairy foods (77%), starchy foods (73%) and fruit and vegetables (65%), and around two-fifths (41%) reported eating five or more portions of fruit and vegetables on the day before they were interviewed. Three in ten respondents (30%) reported eating biscuits, pastries and cakes at least once a day and around half (55%) said they ate these foods three or four times a week or more often.
- When asked about changes they may have made to the food they ate over the past six months, 28% of respondents said that they were eating more fruit and vegetables and a fifth said that they were eating smaller portions (20%). Around one in seven said that they were eating less salt (16%), eating less food high in fat in general (16%), eating less food high in saturated fat (14%), eating fewer calories (15%) or eating less starchy foods (14%).
- The most common difficulty mentioned by respondents which could prevent them from eating more healthily was the cost of food (18%). Forty-three per cent said that they would not have any difficulties in trying to eat more healthily (compared with 23% at Wave 1).
- Around half of respondents (55%) said that the food they ate outside of the home was less healthy than the food they ate when at home and 65% named at least one type of food establishment where they would like to see more information about healthy options.
- Women were more likely than men to say that they considered the food they ate out to be less healthy compared with food eaten at home (61% compared with 48%).
- Respondents living in the most deprived areas were more likely to say that the food they ate out was healthier than what they ate at home (11% of those in quintile one reported this, compared with two per cent of respondents in quintiles four and five).

# 1. Attitudes towards healthy eating

**Figure 1.1 Agreement with attitudinal statements about healthy eating (Waves 1, 2 and 3)**



Source: Q2\_16 & H2\_16 Please tell me how much you agree or disagree with the following statements.

Base: All Scotland respondents - Wave 1 (511); Wave 2 (507); Wave 3 (475) (N/A statements not included at Waves 1 and 2)

- Respondents were asked to say, on a five-point scale from 'definitely agree' to 'definitely disagree', how much they agreed or disagreed with a range of statements about healthy eating.
- Almost all respondents agreed<sup>11</sup> that what you eat makes a big difference to how healthy you are (94%, compared with 89% at Wave 1). A similar proportion agreed that small dietary changes, such as eating less fat, can lead to benefits for future health (91%).
- Around four-fifths of respondents (81%) agreed that experts contradict each other over what foods are good for you, compared with 74% at Waves 1 and 2. Thirty-seven per cent agreed that they get confused over what is supposed to be healthy and what is not.

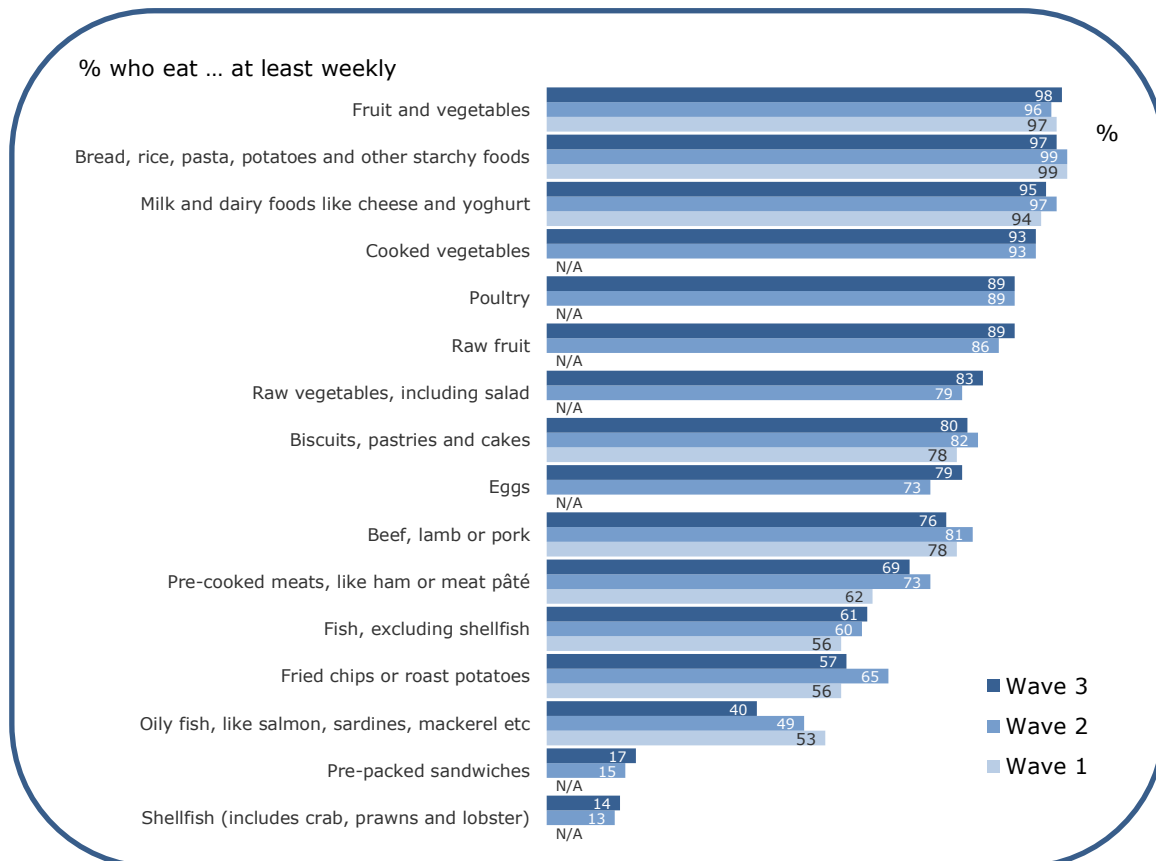
<sup>11</sup> 'Agree' includes those who responded either 'Definitely agree' or 'Tend to agree'. 'Disagree' includes those who responded either 'Definitely disagree' or 'Tend to disagree'. This definition applies throughout this bulletin.

- Three-fifths of respondents agreed that the tastiest foods are the ones that are bad for you (60%) compared with half of respondents at Wave 1 (50%).
- Sixteen per cent of respondents agreed with the statement that good health is just a matter of good luck, and 12% agreed that if you are not overweight you can eat whatever you like (compared with 18% at Wave 2).

## 2. Consumption of different types of food

### 2.1 Frequency of eating different types of food

**Figure 2.1 Percentage of respondents eating different types of food weekly or more often (Waves 1, 2 and 3)**



Source: Q2\_14 & H2\_14 At the moment, how often do you eat...

Base: All Scotland respondents – Wave 1 (511); Wave 2 (507); Wave 3 (475) (N/A foods not included at Wave 1)

- The types of food respondents reported eating most often (at least once a day) were milk and dairy foods (77%), starchy foods (73%) and fruit and vegetables (65%).
- Thirty per cent of respondents reported that they ate biscuits, pastries and cakes at least once a day and 55% of respondents said they ate these foods three or four times a week or more often. Fifty-seven per cent reported eating chips or roast potatoes at least once a week.
- Almost four-fifths (79%) of respondents said they ate eggs at least once a week, with 41% saying that they ate them once or twice a week.
- Two-fifths of respondents (40%) reported eating oily fish at least once a week. Around half (51%) said that they never ate shellfish, 14% stated that they ate it at least once a week and 36% less often than this.

- At Wave 3, a smaller proportion of respondents reported that they ate oily fish at least once a week (40%) compared with Wave 2 (49%) and Wave 1 (53%). The proportion of Wave 3 respondents reporting eating fried chips or roast potatoes at least weekly was lower than at Wave 2 (57% compared with 65%), but similar to the proportion at Wave 1 (56%). In comparison with Wave 2, a greater proportion of respondents said that they never eat beef, lamb or pork (eight per cent at Wave 3, four per cent at Wave 2).
- Respondents were asked three separate questions about their consumption of fruit and vegetables in the previous day – one on vegetables, one on fruit, and one on fruit juice<sup>12</sup>. Combining the answers to these three questions, around two fifths (41%) of respondents reported that they had eaten at least five portions of fruit and vegetables in the previous day. This is similar to the proportion at Waves 1 and 2 (43%).

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<sup>12</sup> Separate questions were asked about fruit and vegetables in order to aid respondents' recall. Fruit juice was asked about separately as only one portion of this can count per day towards the recommended fruit and vegetable consumption.

## 2.2 Variation in attitudes towards healthy eating and consumption of different foods by different groups in the population<sup>13</sup>

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

- At Wave 3, as at Wave 2, there was little variation by **gender** in attitudes towards healthy eating, however some differences were observed.
- Men were more likely than women to agree that if you are not overweight you can eat whatever you like (17% of men agreed compared with eight per cent of women).
- There were a small number of differences by gender in consumption of different foods, with men more likely than women to report eating pre-cooked meats on at least a weekly basis (76% of men compared with 63% of women). Women were more likely than men to report eating fruit at least once per day (55% compared with 43%) and raw vegetables at least five times a week (41% compared with 21%).
- There was more variation by **age**. For example, respondents aged 45-54 were less likely to say that they get confused over what's supposed to be healthy and what isn't (26% agreed) compared with those aged 60 and over (43% agreed).
- Older respondents were the most likely to agree that if you are not overweight you can eat whatever you like (35% of those aged 75 and over agreed compared with 10% of those aged 16-74). Older respondents were also more likely to agree that good health is just a matter of good luck, with 23% of those aged 60 and over in agreement, compared with six per cent of those aged 16-24.
- Younger respondents were less likely than older age groups to say they ate oily fish at least once a week. Thirteen per cent of those aged 16-24 reported eating oily fish at least once a week, compared with 47% of those aged 60 and over.
- Respondents aged 25-34 were the least likely to say they ate fruit and vegetables at least once a day; 42% did so, compared with 73% of those aged 35 and over. At Wave 2, those aged 16-24 were the least likely to report eating fruit and vegetables daily.
- The youngest respondents (those aged 16-24) were more likely to report eating poultry at least once a week (99%) compared with those aged 60 and over (83%). The oldest respondents (those aged 75 and over) were the least likely to say they ate pre-cooked meats on at least a weekly basis (47% compared with 71% of those aged under 75).

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<sup>13</sup> The following variables were analysed to identify statistically significant differences: age, gender and Scottish Index of Multiple Deprivation.

- Those aged 16-24 were more likely to report never eating a number of foods compared with respondents aged 25 and over, including eggs (20% compared with six per cent), fish (28% compared with 10%) and shellfish (80% compared with 46%).
- As at Wave 2, respondents aged 45 and over were more likely than younger respondents to report that they ate cooked vegetables at least weekly (97%, compared with 86% of those aged 16-44).

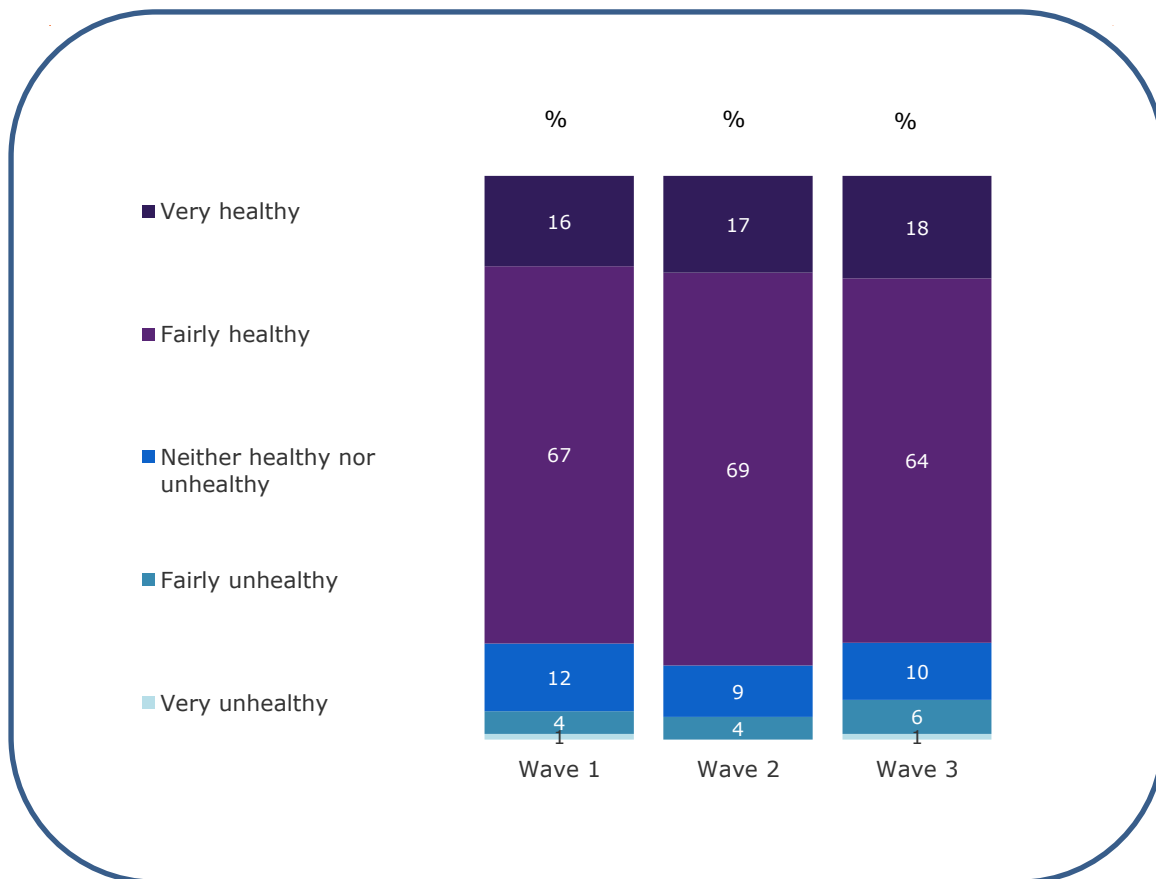
### **Other variation at Wave 3**

- Some differences were observed by **Scottish Index of Multiple Deprivation**. Respondents living in less deprived areas were more likely to strongly agree that what you eat makes a big difference to how healthy you are than those in more deprived areas (83% in quintile five compared with 64% of those in quintiles one to four).
- No respondents in the least deprived areas agreed with the statement 'if you're not overweight you can eat what you like', compared with 14% of those in more deprived areas (quintiles one to four).
- Respondents in the most deprived areas were more likely to say that they never ate beef, lamb or pork (16% in quintile one, compared with six per cent in quintiles two to five), or fish (23% compared with nine per cent). They were also less likely to report eating shellfish on a weekly basis (three per cent of those in quintile one did so, compared with 17% of those in quintiles two to five) and oily fish (28% in quintile one, compared with 47% in quintiles three to five).
- Those in the most deprived areas were less likely to report eating raw fruit on a daily basis (31% in quintile one, compared with 55% in quintiles two to five). Eighty-two per cent of those in the most deprived areas (quintile one) reported eating cooked vegetables at least weekly, compared with 96% of those in quintiles two to five. Eighty-six per cent of those in the least deprived areas (quintile five) reported eating fruit and vegetables at least daily, compared with 46% of those in quintile one and 68% of those in quintiles two to four.
- Respondents in less deprived areas were more likely to report eating biscuits, cakes and pastries at least once a day (26% in quintiles one to three, compared with 39% in quintiles four and five), but less likely to report eating chips or roast potatoes at least weekly (63% in quintiles one to three, compared with 46% in quintiles four and five).



### 3. Perceptions of diet

Figure 3.1 Perceived healthiness of food eaten (Waves 1, 2 and 3)



Source: H2\_1 Overall, in your opinion, would you say that what you usually eat is...

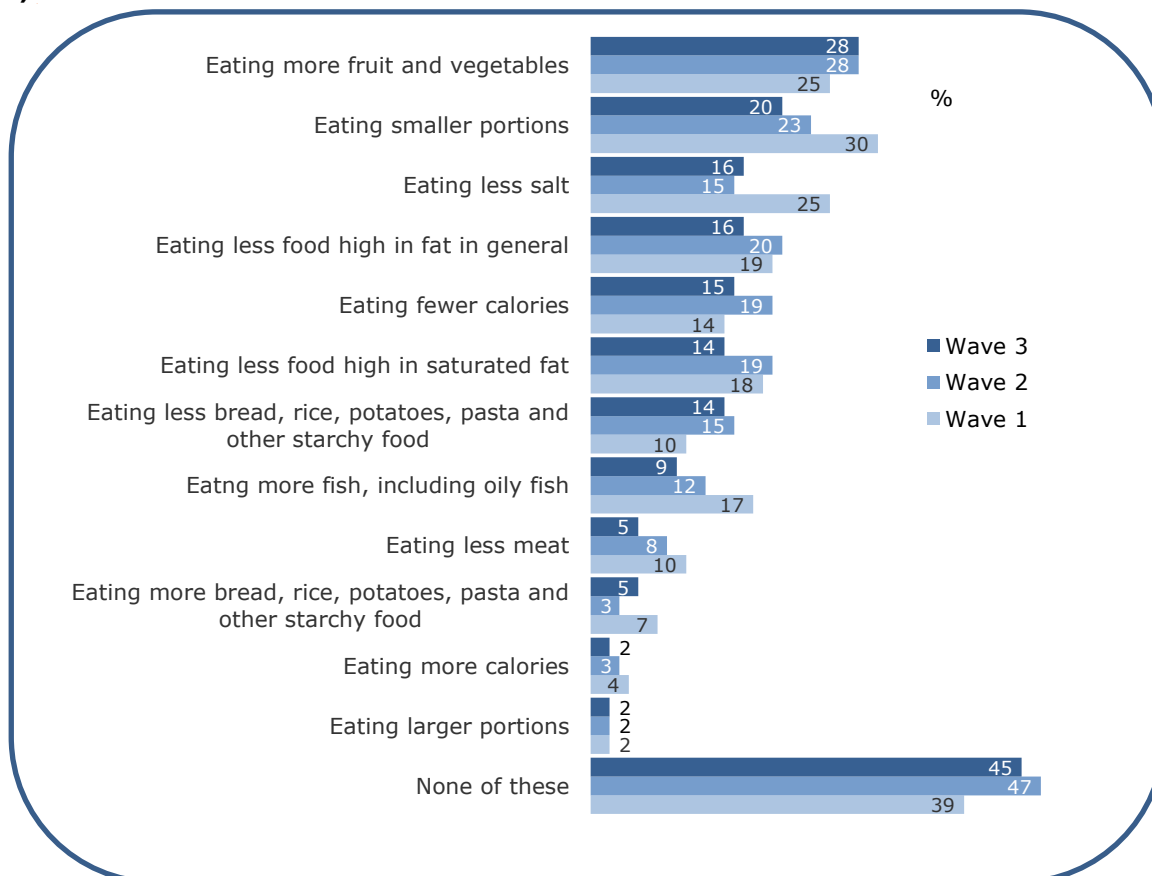
Base: All Scotland respondents - Wave 1 (511); Wave 2 (507); Wave 3 (475)

- The majority of respondents (82%) reported that the food they usually ate was very or fairly healthy, which was in line with the results from the previous waves (83% at Wave 1, and 86% at Wave 2).
- Eight per cent of respondents said that the food they usually ate was fairly or very unhealthy.

## 4. Dietary change

### 4.1 Changes to food eaten

**Figure 4.1 Changes made to food eaten in the last six months (Waves 1, 2 and 3)**



Source: H2\_19 Thinking about the last six months, what changes, if any, have you personally made to the food you eat?

Note: respondents were able to give multiple answers

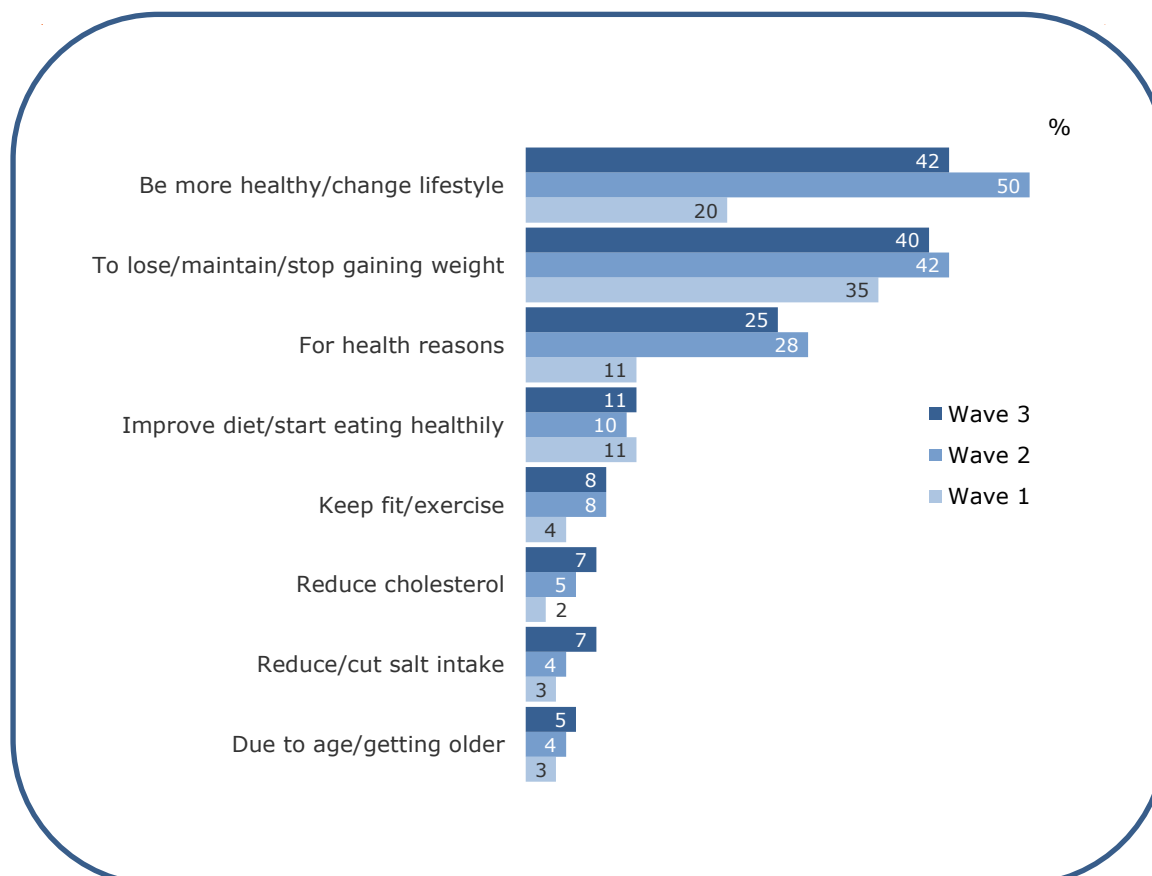
Base: All Scotland respondents - Wave 1 (511); Wave 2 (507); Wave 3 (475)

- Respondents were asked how much they agreed or disagreed with the statement 'I do not need to make any changes to the food I eat, as it is already healthy enough'. Fifty-six per cent of respondents agreed and a third (33%) disagreed; this was similar to the findings at Waves 1 and 2.

- Respondents were also asked whether they had made any changes to the food they ate over the past six months. Twenty-eight per cent of respondents said that they were eating more fruit and vegetables and a fifth said that they were eating smaller portions (20%). This was lower than the proportion reporting eating smaller portions at Wave 1 (30%).
- Sixteen per cent of respondents reported eating less salt in the last six months, and similar proportions reported eating less food that was high in saturated fat (14%), high in fat in general (16%) and eating fewer calories (15%).
- Respondents at Wave 3 were less likely than those at Wave 1 to say they had eaten less salt in the last six months (16% compared with 25%), but this was similar to Wave 2 (15%).
- The proportion of respondents who reported eating more fish (including oily fish) was lower at Wave 3 than at Wave 1 (nine per cent compared with 17%), and five per cent of respondents reported eating less meat, compared with 10% at Wave 1.
- Forty-five per cent of respondents said that they had not made any of these changes to their diet, which was consistent with previous waves.

## 4.2 Barriers and motivation to change

**Figure 4.2 Reasons for changes made to food eaten in the last six months (Waves 1, 2 and 3)**



Source: H2\_21 Why have you made these changes to the food you eat in the last six months?

Note: responses were given spontaneously, with no prompted response list shown to respondents<sup>14</sup>

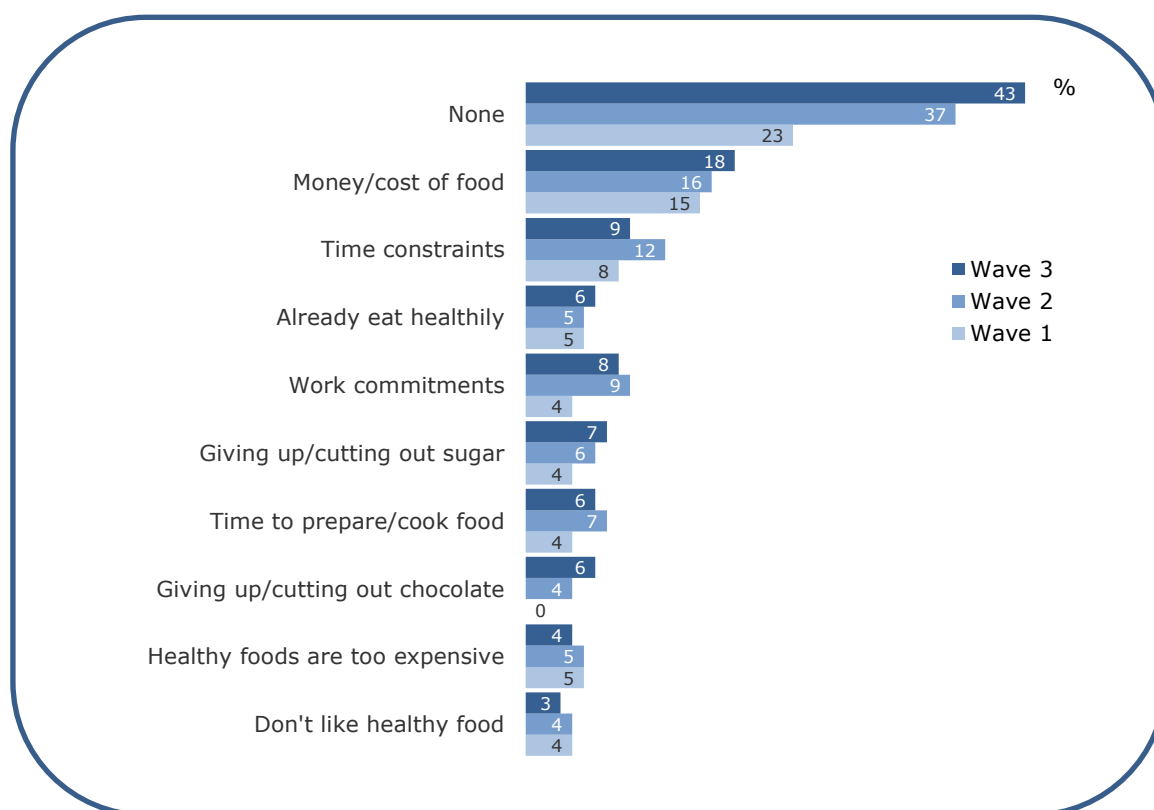
Note: respondents were able to give multiple answers

Base: All Scotland respondents who have made changes to the food they eat in the last six months - Wave 1 (292); Wave 2 (275); Wave 3 (247)

- Of those respondents who reported that they had made changes to their diet in the past six months, around two-fifths (42%) reported that they had done so to be healthier or have a healthier lifestyle. A similar proportion (40%) mentioned making changes to lose, maintain, or stop gaining weight and a quarter (25%) said that they had made changes for health reasons.
- At Wave 3 a greater proportion of respondents reported making changes to reduce their cholesterol levels or salt intake (both seven per cent) than at Wave 1 (two per cent and three per cent respectively).

<sup>14</sup> At Wave 1 this question was asked as a fully open question and the most popular answers were used as the basis for the code list at Waves 2 and 3, which may explain the large differences seen in some results between Wave 1 and Waves 2 and 3.

**Figure 4.3 Difficulties in trying to eat more healthily (Waves 1, 2 and 3)**



Source: H2\_22 Some people may find it difficult to eat more healthily. Can you tell me please, what do you think would be the difficulties, if any, for you in trying to eat more healthily? Responses given by three per cent or more of respondents at Wave 3 are shown

Note: responses were given spontaneously, with no prompted response list shown to respondents<sup>15</sup>

Note: respondents were able to give multiple answers

Base: All Scotland respondents - Wave 1 (511); Wave 2 (507); Wave 3 (475)

- When asked what, if any, difficulties they would have in trying to eat more healthily, around two-fifths (43%) of respondents said they would not have any difficulties.
- Difficulties that were cited included the cost of food (18% of respondents), time constraints (nine per cent), work commitments (eight per cent) and giving up sugar (seven per cent).
- A small percentage of respondents reported that healthy foods were too expensive (four per cent) and that they did not like healthy foods (three per cent).
- Compared with results at Wave 1, a higher proportion of Wave 3 respondents mentioned that they would not have any difficulties in trying to eat more healthily (43% compared with 23% at Wave 1), and that work commitments would make it difficult for them to make such a change (eight per cent compared with four per cent at Wave 1).

<sup>15</sup> Again, this was administered as an open question at Wave 1 and a spontaneous closed question at Waves 2 and 3.

### 4.3 Variation in perception of diet and dietary changes made by different groups in the population<sup>16</sup>

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

- **Women** were more likely than men to report that they considered their diet to be healthy (87% compared with 78%). This difference was also observed at Wave 1, but there was no statistically significant difference at Wave 2.
- Women were also more likely than men to report having made changes to their diet in the last six months; 61% of women said they had, compared with 47% of men. Of these changes, women were more likely than men to report eating smaller portions (25% compared with 14%), eating fewer calories (20% compared with 11%) and eating less starchy food (19% compared with 10%). As at Wave 1 women were also more likely than men to say that they had made changes in order to lose weight (48% compared with 29%). These differences were not observed at Wave 2.
- As at Wave 2, **older respondents** were more likely to say that they thought that their diet was healthy compared with younger respondents; 94% of those aged 60 and over said their diet was either very healthy or fairly healthy, compared with 77% of those aged 16-44. Respondents aged 25-34 were less likely to report that their diet was healthy at Wave 3 (70%) compared with Wave 2 (91%).
- Respondents aged 75 and over were the least likely to report having made changes to their diet in the last six months (23% reported doing so compared with 57% of those aged 16-75).
- Those aged 16-24 were the most likely to report that they had included more fruit and vegetables in their diet in the past six months (45% compared with 25% of those aged 25 and over). Respondents aged 45-54 were more likely than those aged 60 and over to say that they had been eating fewer calories (26% compared with eight per cent).
- There was little variation by age in the reasons why respondents had made changes to their diet, however those aged 60-74 were more likely than those aged 35-54 to say that they had made changes in order to reduce their cholesterol levels (24% compared with six per cent).
- When asked what the difficulties would be in trying to eat healthily, respondents aged 60 and over were more likely than younger respondents to say that they would have no difficulty (61% compared with 34% of those aged 16-54), similar to Wave 2.

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<sup>16</sup> The following variables were analysed to identify statistically significant differences: age, gender and Scottish Index of Multiple Deprivation.

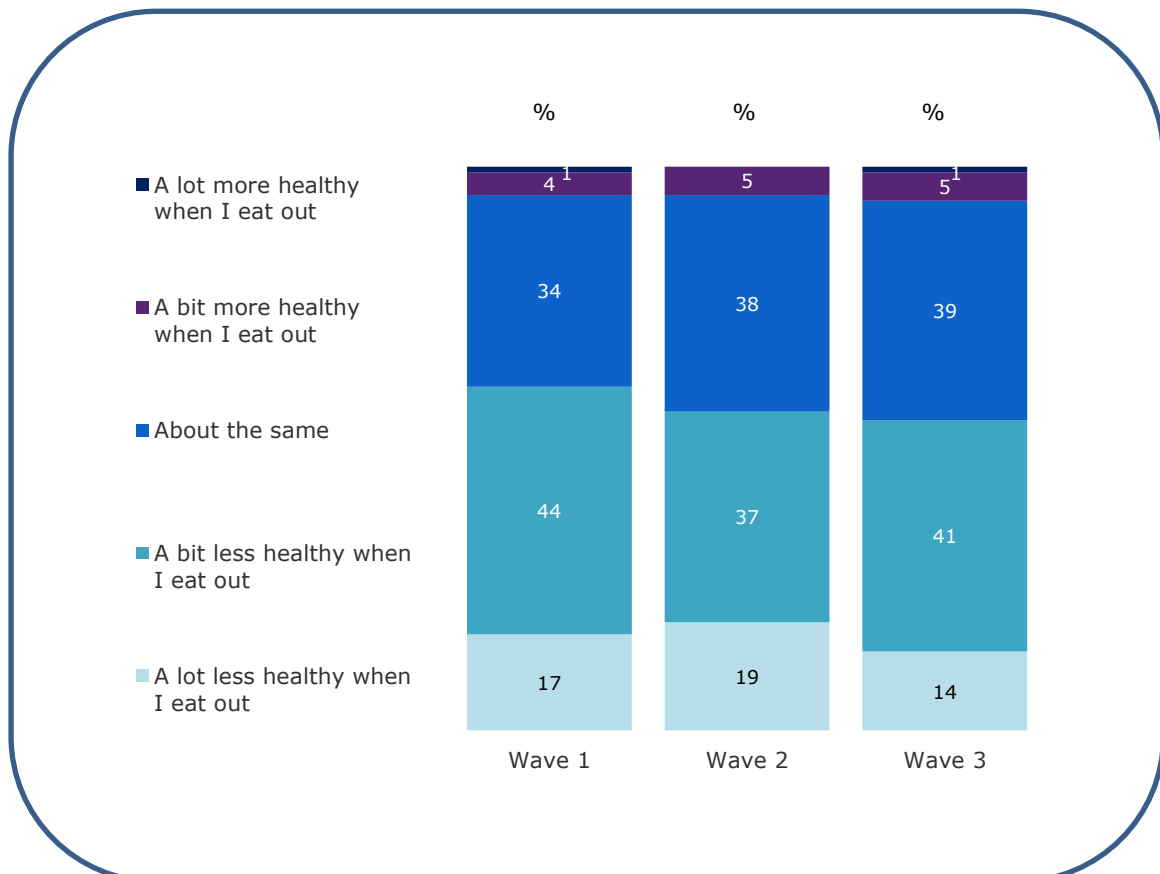
### Other variation at Wave 3

- Some differences were observed by **Scottish Index of Multiple Deprivation**. Respondents from the least deprived areas were more likely to say that they thought their diet was very healthy (26% in quintile five), compared with those from the most deprived areas (nine per cent in quintile one). Those in the least deprived areas were also more likely to say that they had changed their diet in the last six months to eat fewer calories (35% of those in quintile five compared with 12% in quintiles one to four).
- Respondents in quintile three were more likely to report that they had made changes to their diet for health reasons (50%) than those in more deprived areas (23% in quintiles one and two) and in less deprived areas (11% in quintiles four and five).

## 5. Eating out and eating healthily

### 5.1 Healthiness of food when eating outside of the home

**Figure 5.1 Perceived healthiness of food when eating outside of the home, compared with eating at home (Waves 1, 2 and 3)**



Source: H2\_39 In your opinion, when you eat out, how healthy would you say the food that you eat is, compared to when you eat at home?

Base: All Scotland respondents who eat out - Wave 1 (a third of the sample - 146); All Scotland respondents - Wave 2 (507); Wave 3 (475)

- Just over half of respondents (55%) said that the food they ate outside of the home was less healthy<sup>17</sup> than the food they ate when at home.
- Around two-fifths of respondents (41%) said the food they ate outside the home was about the same in terms of healthiness, and a minority (six per cent) said that the food that they ate outside the home was healthier<sup>18</sup> than that which they ate at home.
- These findings were similar to those reported at Waves 1 and 2.

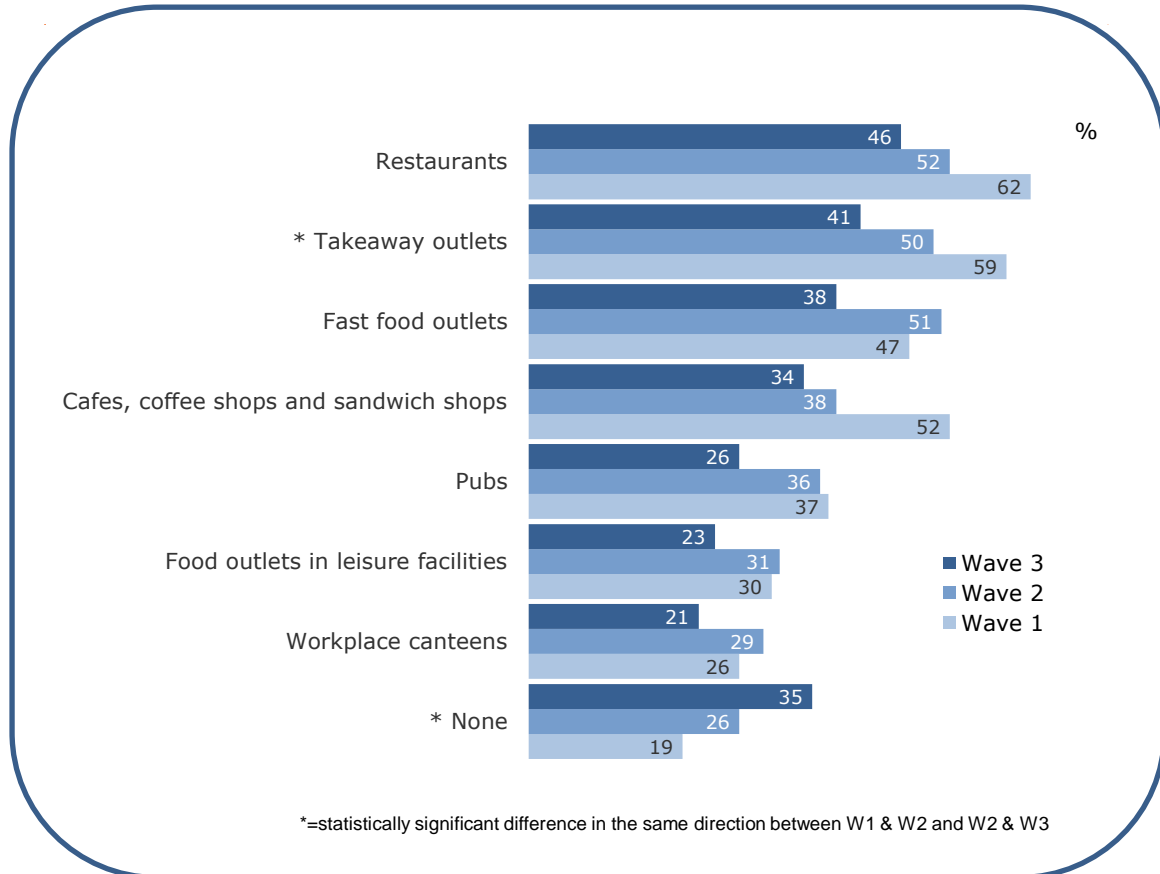
<sup>17</sup> 'Less healthy' includes those who responded either 'A bit less healthy' or 'A lot less healthy'. This definition applies throughout this bulletin.

<sup>18</sup> 'Healthier' includes those who responded either 'A bit more healthy' or 'A lot more healthy'. This definition applies throughout this bulletin.



## 5.2 Information about healthy options

**Figure 5.2 Places where respondents would like to see more information displayed about healthy options (Waves 1, 2 and 3)**



Source: H2\_40 In which, if any, of these places would you like to see more information displayed about how healthy different options are?

Note: respondents were able to give multiple answers

Base: All Scotland respondents who eat out - Wave 1 (a third of the sample - 146); All Scotland respondents - Wave 2 (507); Wave 3 (475)

- When specifically asked where, if at all, they would like to see more information displayed about how healthy different food options are, around two-thirds of respondents (65%) stated that they would like to see further nutritional information in at least one of the food establishments asked about. Thirty-five per cent said that they would not like to see this information in any of the places mentioned. This proportion was greater than at both Wave 1 (19%) and Wave 2 (26%).
- Respondents were most likely to mention restaurants (46%), takeaway outlets (41%), and fast food outlets (38%) as places where they would like to see more information about healthy eating options.

- The proportion of respondents who reported that they wanted to see more information about healthy options displayed in takeaway outlets was lower at Wave 3 (41%) than at Wave 2 (50%) or Wave 1 (59%). Similarly, respondents at Wave 3 were less like than those at Wave 1 to report wanting information in restaurants (46% compared with 62%), fast food outlets (38% compared with 47%), cafes (34% compared with 52%) and pubs (26% compared with 37%).

### 5.3 Variation in perceived healthiness of food when eating out and where respondents want to see more information about healthy options, by different groups in the population<sup>19</sup>

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

- **Women** were more likely than men to say that they considered the food they ate out to be less healthy compared with food eaten at home (61% compared with 48%). This difference was not observed at Waves 1 and 2.
- When asked about where respondents would want to see more information displayed about healthy options, women were, as at Wave 2, more likely than men to say that they wanted to see this information in cafes, coffee shops and sandwich shops (41% compared with 26%). Men were more likely to say that they didn't want more information in any of the establishments suggested (41% of men compared with 29% of women), which differed from Waves 1 and 2, where no statistically significant gender difference was found.
- A smaller proportion of respondents **aged 60 and over** said that food eaten outside the home was less healthy than food eaten at home (49%), compared with those aged 35-44 (69%). At Wave 2, those aged 16-64 were more likely than those aged 65 and over to say that food they ate out was less healthy (60% compared with 38%), but no statistically significant difference was observed at Wave 3 (56% compared with 47%).
- As at Wave 2, Wave 3 respondents aged 16-54 were more likely to report wanting to see more information displayed relating to healthy options for a number of establishments, compared with respondents aged 55 and over. These were takeaway outlets (45% compared with 33%), fast food restaurants (42% compared with 31%) and food outlets at leisure facilities (27% compared with 16%).
- The oldest respondents (those aged 75 and over) were more likely to say that they didn't want more information displayed at any of the listed outlets (51% compared with 22% of those aged 16-24), similar to findings at Waves 1 and 2. The greatest variation between Wave 1 and Wave 3 in the proportion who said they did not want to see more information relating to healthy options was observed for those aged 16-34 (five per cent at Wave 1 compared with 33% at Wave 3).

#### Other variation at Wave 3

- There was little variation by **Scottish Index of Multiple Deprivation**, however respondents living in the most deprived areas were more likely to say that the food they ate out was healthier than what they ate at home (11% of those in quintile one reported this, compared with two per cent of respondents in quintiles four and five).

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<sup>19</sup> The following variables were analysed to identify statistically significant differences: age, gender and Scottish Index of Multiple Deprivation.

## 6. Comparisons between Scotland and Northern Ireland

**Table 6.1 How frequently different foods were eaten at least daily, by country (Wave 3)**

% eat at least once a day	Scotland	Northern Ireland
Milk and dairy foods	77%	73%
Starchy foods	73%	73%
Fruit and vegetables	65%	66%
Raw fruit	50%	57%
Cooked vegetables	33%	43% <sup>S</sup>
Biscuits, pastries and cakes	30%	40% <sup>S</sup>
Raw vegetables including salad	25%	27%
Pre-cooked meats	10%	9%
Eggs	5%	6%
Poultry	3%	5%
Beef, lamb or pork	1%	4% <sup>S</sup>
Fried chips or roast potatoes	1%	2%
Oily fish	1%	1%
Pre-packed sandwiches	*	*
Fish, excluding shellfish	1%	*
Shellfish	0	0
Base	(475)	(524)

Source: Q2\_14 & H2\_14 How often do you eat...

Base: All respondents

NB. S / NI indicates that the result is statistically significantly higher than the result for the country indicated by the initial / \* indicates a percentage of less than 0.5%

**Table 6.2 How frequently different foods were eaten at least weekly, by country (Wave 3)**

% eat at least weekly	Scotland	Northern Ireland
Fruit and vegetables	98%	99%
Starchy foods	97%	99%
Dairy foods	95%	98%
Cooked vegetables	93%	95%
Poultry	89%	93%
Raw fruit	89%	90%
Biscuits, pastries and cakes	80%	89% <sup>S</sup>
Raw vegetables including salad	83%	88%
Eggs	79%	78%
Beef, lamb or pork	76%	87% <sup>S</sup>
Pre-cooked meats	69%	78% <sup>S</sup>
Fish, excluding shellfish	61%	59%
Fried chips or roast potatoes	57%	74% <sup>S</sup>
Oily fish	40%	52% <sup>S</sup>
Pre-packed sandwiches	17%	14%
Shellfish	14%	15%
Base	(475)	(524)

Source: Q2\_14 & H2\_14 How often do you eat...

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 Scotland and Northern Ireland.
- The proportion of respondents who thought that what they usually ate was healthy did not vary by country: 82% said this in Scotland and 80% in Northern Ireland.
- Tables 6.1 and 6.2 shows respondents' reported frequency of eating different foods.

- Respondents in Scotland were less likely than respondents in Northern Ireland to say they ate biscuits, pastries and cakes on a daily basis (30% compared with 40%) and at least once a week (80% compared with 89%).

- Those in Scotland were less likely than respondents in Northern Ireland to say they ate beef, lamb or pork on a daily basis (one per cent compared with four per cent) and at least once a week (76% compared with 87%). They were also less likely to report eating pre-cooked meats at least once a week (69% compared with 78% of respondents in Northern Ireland).
- Respondents in Scotland were less likely to say they ate cooked vegetables daily (33%) compared with respondents in Northern Ireland (43%). They were also less likely to report eating oily fish at least once a week (40% compared with 52% of respondents in Northern Ireland).
- Those in Scotland were less likely to say they ate fried chips or roast potatoes at least once a week (57%) compared with respondents in Northern Ireland (74%).

**Table 6.3 Attitudinal statements relating to healthy eating – percentage of respondents who agreed, by country (Wave 3)**

% who agreed that ...	Scotland	Northern Ireland
What you eat makes a big difference to how healthy you are	94%	95%
Small dietary changes, such as eating less fat, can lead to benefits for my future health	91%	95%
The experts contradict each other over what foods are good or bad for you	81%	80%
The tastiest foods are the ones that are bad for you	60%	67%
The main reason for people to eat a more healthy diet is to lose weight	42%	52% <sup>S</sup>
I get confused over what's supposed to be healthy and what isn't	37%	42%
As long as you take enough exercise you can eat whatever you want	23%	23%
I'm not generally interested in food and cooking	21%	29% <sup>S</sup>
Good health is just a matter of good luck	16%	16%
If you are not overweight you can eat whatever you like	12%	17%
Base	(475)	(524)

Source: Q2\_16 & H2\_16 Please tell me how much you agree or disagree with the following statements.

Base: All respondents

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

- Respondents living in Scotland were less likely to agree that the main reason for people to eat a more healthy diet is to lose weight (42% compared with 52% of those in Northern Ireland) and to agree that they are not generally interested in food and cooking (21% compared with 29% of those in Northern Ireland).
- Respondents in Scotland were no less likely to report having eaten five or more portions of fruit and vegetables the previous day (41%) than those in Northern Ireland (48%), or two to four portions (38% and 43% respectively) but they were more likely to have eaten one or no portions (21% compared with eight per cent of those in Northern Ireland).
- Respondents in Scotland (six per cent) were more likely than those living in Northern Ireland (two per cent) to report that the food they ate out was a bit, or a lot, more healthy than what they ate at home.



- When considering where, if anywhere, respondents would like to see more information about healthy food options displayed, 65% of respondents in Scotland said that there was somewhere they would like to see more information about healthy food displayed compared with 85% of respondents in Northern Ireland.
- Respondents living in Scotland were less likely than those living in Northern Ireland to say that they would like to see more information displayed in each type of eating establishment, with the greatest reported difference being for information displayed at takeaway outlets (41% of respondents in Scotland would like to see more information at these locations compared with 63% of respondents in Northern Ireland) and fast food restaurants (38% compared with 58%).