2007 SURVEY OF AUSTRALIAN CONSUMER AWARENESS AND PRACTICES RELATING TO SALT

REPORT

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BACKGROUND

The Australian Division of World Action on Salt and Health (AWASH) seeks to improve the health of the Australian population by achieving a gradual reduction in dietary salt that will reduce cardiovascular diseases and other salt-related health problems. AWASH seeks to achieve this mission by promoting the benefits of salt reduction throughout all sectors of the Australian community, including industry, consumers, scientists, healthcare workers, government, regulatory bodies and professional organisations.

As part of this effort, AWASH is planning to conduct a series of surveys about issues relating to salt amongst the Australian population. The surveys will seek to collect information about the level of knowledge relating to salt and health, to identify opportunities to reduce salt intake levels, to better understand food labelling issues and to monitor the impact of the AWASH 'Drop the Salt!' campaign.

This first survey in the series was conducted in March 2007 to provide a baseline from which the 5-year AWASH Action Plan can be judged. The survey was sponsored by The George Institute for International Health.

SURVEY DESIGN AND METHODS

The primary aim of the survey was to quantify awareness of key issues related to salt amongst Australian consumers. The survey was done by 'ACA Research' using an established consumer panel. Survey participants were recruited via email and the questionnaire was completed online by the respondents. The sampling process did not seek to recruit a representative sample of all consumers in Australia but rather to include a broad range of older and younger, men and women throughout the States and Territories of Australia. By including a large sample and a wide range of individuals it was possible to explore the constancy of the main findings across different sections of the population and to infer the extent to which the results are likely to be representative of Australia as a whole.

MAIN FINDINGS

There were 1084 participants. 52% were female and 54% were educated beyond secondary level. Key findings are summarised below with the full results in the Appendix.

Salt and health Nearly three quarters of survey participants were concerned about salt in their diet, making salt the third leading concern about food content after saturated fat and sugar. Two thirds of people knew that salt was bad for health. While most knew that it caused high blood pressure, about a quarter did not understand that salt increased risks of heart attack or stroke. Less than a half knew of the harmful effects of salt on the kidney.

Recommended daily intake More than a half thought that they were probably eating either less than or about the amount of salt recommended by the National Heart Foundation of Australia. However, only a small minority of those surveyed actually knew the recommended maximum daily intake.

Salt in the Australian diet Almost three quarters of people correctly identified the main source of salt in the Australian diet as processed foods. Participants were also able to correctly place about two thirds of a list of commonly eaten foods into high, medium or low salt categories. However, knowledge of the salt content of some foods making major contributions to salt in the Australian diet (for example white bread and breakfast cereals) was not good.

Food labelling The quantity of salt in processed food is labelled in the form of sodium in Australia and less than half of survey participants understood the relationship between salt and sodium. Furthermore, only a quarter reported regularly checking food labels for salt content.

Responsibility for reducing salt About half the group thought that they themselves should be responsible for reducing their salt intake. One third thought that the responsibility was mainly with industry.

Actions to reduce salt One-third reported that they regularly tried to buy 'low salt' or 'no added salt' foods. Only a fifth of people reported regularly acting on the information they found about salt on food labels. There were still about one-fifth who reported that they often added salt during cooking and the same number who reported often adding salt at the table.

Comparability of findings amongst people of different age, sex and education level There was rather little variation in the main findings across these different population groups. Older people seemed somewhat more likely to know about the adverse effects of salt on health, to be more concerned about it and to be more likely to check food labels. Women knew less of the relationship between salt and sodium but were more likely to check food labels as were people educated to a higher level. However, while women were somewhat more likely to try and buy low salt foods this was not true for older people or the more educated.

INTERPRETATION

The serious adverse effects of salt on health are well established. Likewise the enormous health gains that could be achieved through reduced salt intake. This survey highlights some key issues relating to salt in Australia that will be used to guide the development of the AWASH 'Drop the Salt!' campaign.

The survey shows that there is reasonable knowledge of the adverse effects of salt on health in the Australian community. However, only a minority of those people that know the risks are taking regular action to reduce their salt intakes. Significant improvements therefore need to be made. A health promotion campaign addressing the knowledge gaps will be a key driver of change and AWASH will work with a broad range of stakeholders to develop and implement a consumer communication campaign. Specific goals will include increasing awareness of the recommended daily salt intake levels, the main sources of salt in the diet and stimulating behaviour change.

Effective food labelling will have a central role. Consumers need a clear front-of-pack labelling system that can be understood at a glance. The 'Tick' program of the National Heart Foundation and the 'Daily Intake' format adopted by a number of companies are starting points. However, more work is needed to understand what would be most effective in this area. The goal must be the implementation of an evidence-based, universal labelling system that has real impact on the majority of consumer choices. AWASH will work with national and international partners to identify the best labelling solution and advocate for its implementation.

The issue of who is responsible for salt reduction clearly needs addressing. While consumers can be informed and clearly feel significant responsibility already, they can only act if the environment is supportive. As most salt in the Australian diet comes from processed foods, industry has a lead role to play. Some companies have already reduced salt in some products, but with most Australians still eating much more salt than is recommended, much more must be done. AWASH will work with the Australian food ingredient, processing, retail and catering industries to encourage further reductions.

Overall, while this survey identifies some important gaps in knowledge it also provides significant hope for the future. There is a clear mandate for action and a firm base upon which achievements can be realised. A national salt reduction campaign has recently been recommended to all member states by the World Health Organisation. There is clear evidence to show that such a campaign would be more cost-effective than almost any other new strategy for the prevention of stroke and heart attack in Australia.

APPENDIX—QUESTIONNAIRE (with main results in brackets)

Note – percentage figures may not always add to 100% due to rounding, correct answers marked in bold with an 'X' where applicable

1 How often do you check food content labels when you are shopping?
Please tick one only

- ☐ Often (49%)
- ☐ Sometimes (40%)
- ☐ Never (7%)
- ☐ I never do grocery shopping therefore this question is irrelevant (3%)

2 Does what is on the food content label affect whether or not you purchase a food item?
Please tick one only

- ☐ Often (38%)
- ☐ Sometimes (52%)
- ☐ Never (7%)
- ☐ I don't do grocery shopping therefore this question is irrelevant (3%)

3 Are you concerned about these aspects of the food you eat?
Please tick 'yes' or 'no' for each option

Yes	*No*	*(Yes%)*
☐	☐	Artificial flavours (68%)
☐	☐	Artificial colours (66%)
☐	☐	Salt/sodium (71%)
☐	☐	Sugar (79%)
☐	☐	Energy (calories) (62%)
☐	☐	Saturated fat (88%)

4. Which of these best describes what you think is the effect of the salt/sodium in your diet?
Please tick one box only

- ☐ Improves your health (8%)
- ☐ Has no effect on health (13%)
- **X Worsens your health (66%)**
- ☐ Don't know (13%)

5. Do you think these health problems can be caused or aggravated by salty foods?
For each problem please select yes, no or don't know

Yes	*No*	*Don't Know*	*(Yes%)*
X	☐	☐	High Blood Pressure (86%)
X	☐	☐	Stroke (75%)
X	☐	☐	Osteoporosis (14%)
X	☐	☐	Fluid Retention (68%)

X	□	□	Heart attacks (74%)
X	□	□	Stomach Cancer (18%)
X	□	□	Kidney Disease (43%)
X	□	□	Meniere's Disease (10%)
X	□	□	Memory/concentration problems (13%)
X	□	□	Asthma (9%)
X	□	□	Headaches (31%)

6. What is the maximum daily amount of salt recommended for adults by the National Heart Foundation of Australia?

Please tick one only

- □ 3 grams (½ teaspoonful) (27%)
- **X 6 grams (1 teaspoonful) (14%)**
- □ 9 grams (1 ½ teaspoons) (4%)
- □ 12 grams (2 teaspoons) (2%)
- □ 15 grams (2 ½ teaspoons) (<1%)
- □ Don't know (53%)

7. How do you think your daily salt intake compares to the National Heart Foundation of Australia's recommendations?

Please tick one only

- □ More than the maximum recommended (23%)
- □ About the maximum recommended (31%)
- □ Less than the maximum recommended (24%)
- □ Don't know (23%)

8. Which of the following statements best describes the relationship between salt and sodium?

Please tick one only

- □ They are exactly the same (36%)
- **X Salt contains sodium (40%)**
- □ Sodium contains salt (3%)
- □ Don't know (21%)

9. Below is a list of everyday foods. For each please indicate whether you think they are high, medium or low in terms of salt/sodium content.

Please tick one box for each food

High	Medium	Low	Don't Know	(% correct)
☐	**X**	☐	☐	White sandwich bread (45%)
☐	☐	**X**	☐	Full cream milk (69%)
X	☐	☐	☐	Premium bacon (68%)
X	☐	☐	☐	Pizza (67%)
☐	☐	**X**	☐	Fresh carrot (87%)
☐	☐	**X**	☐	White rice (70%)
X	☐	☐	☐	Peanut butter (42%)
X	☐	☐	☐	Corn flakes (18%)
X	☐	☐	☐	Tomato ketchup (55%)
☐	**X**	☐	☐	Margarine (44%)
X	☐	☐	☐	Vegemite (63%)

10. Which of the following do you think is the main source of salt in the diet of Australian people?

Please tick one box only

- ☐ Salt added during cooking or at the table (24%)
- **X Salt in processed foods such as breads, breakfast cereals, tinned foods and takeaway (71%)**
- ☐ Salt from natural sources such as vegetables and fruits (2%)
- ☐ Don't Know (3%)

11. Do you do any of the following?

Please tick one box for every question

Often	*Sometimes*	*Never*	*Not applicable*	*(% often)*
☐	☐	☐	☐	Add salt during cooking (21%)
☐	☐	☐	☐	Add salt at the table (21%)
☐	☐	☐	☐	Try to buy 'low salt' foods (33%)
☐	☐	☐	☐	Try to buy 'no added salt' foods (30%)

12. How often do you look at the salt/sodium content on food labels when you are shopping?

Please tick one box only

- ☐ Often (26%)
- ☐ Sometimes (50%)
- ☐ Never (21%)
- ☐ I never do grocery shopping therefore this question is irrelevant (4%)

13. How often does the salt/sodium content shown on the food label affect whether you purchase a product?

Please tick one box only

- Often (21%)
- Sometimes (51%)
- Never (23%)
- I never do grocery shopping therefore this question is irrelevant (4%)

14. If excess salt/sodium in the diet were known to cause a serious disease who do you think should be MOST responsible for helping you reduce the salt/sodium you eat?

Please tick one box only

- The government (6%)
- Companies that make or sell foods with salt in them (34%)
- Your doctor (3%)
- Yourself (56%)

15. How often do you look for the Heart Foundation 'tick' when shopping?

Please tick one box only

- Often (33%)
- Sometimes (47%)
- Never (17%)
- I never do grocery shopping therefore this question is irrelevant (4%)

16. How often does the Heart Foundation 'tick' on a food label affect whether you purchase a product?

Please tick one box only

- Often (26%)
- Sometimes (52%)
- Never (18%)
- I never do grocery shopping therefore this question is irrelevant (4%)

17. Are you?
Please tick one box only

- Male (48%)
- Female (52%)

18. Which of the following best describes your highest level of education?
Please tick one box only

- Secondary education or below (school) (46%)
- Tertiary education (University or TAFE) (45%)
- Postgraduate or higher (9%)

19. What is your age?
Please write in years

|_____| *years (see age bands below)*

'14-21' = 21%
'22-40' = 35%
'41-60' = 26%
'61 plus' = 19%

21. Where do you live?
Please tick one box only

- Canberra/ACT (6%)
- Sydney (12%)
- Other NSW (8%)
- Melbourne (12%)
- Other VIC (6%)
- Brisbane (12%)
- Other Queensland (10%)
- Adelaide (7%)
- Other SA (4%)
- Perth (8%)
- Other WA (6%)
- Hobart (3%)
- Other TAS (4%)
- Darwin (1%)
- Other NT (<1%)

22. What is your usual yearly household income before tax, from all sources (please include benefits, pensions, superannuation, investment return, etc)?

Please tick one box only

- ☐ Less than $30,000 per year (23%)
- ☐ $30,000-$49,999 per year (17%)
- ☐ $50,000-$69,999 per year (15%)
- ☐ $70,000-$99,999 per year 19%)
- ☐ $100,000-$149,999 per year 12%)
- ☐ $150,000 or over per year (4%)
- ☐ I would rather not answer this question or unknown (11%)