

Tracking Nutrition Trends VI

August 2006

An Initiative of the Canadian Council of Food and Nutrition



The Canadian Council of Food and Nutrition (CCFN) is a national, non-profit organization established in 2004 through the union of the mandates of the National Institute of Nutrition and the Canadian Food Information Council.

The vision of CCFN is to be the multi-sectoral trusted voice for science-based food and nutrition policy and information in Canada.

To successfully achieve its vision, CCFN acts as a catalyst in advancing the nutritional health and well-being of all Canadians by:

- Championing evidence-based solutions to key nutrition issues affecting the nutritional health of Canadians
- Advocating for evidence-based nutrition policy in Canada
- Promoting public understanding of food and nutrition issues

Canadian Council of Food and Nutrition
3800 Steeles Avenue West, Suite 301A
Woodbridge, Ontario
L4L 4G9
Telephone: 905-265-9124
Fax: 905-265-9372
Email: info@ccfn.ca

Acknowledgements

The Canadian Council of Food and Nutrition would like to thank the following individuals and organizations:

- ▶ The sponsors for their valuable support and commitment, without which this project would not have been possible:
 - Dairy Farmers of Canada
 - GCI Group
 - Health Canada
 - Kellogg Canada
 - Unilever Canada

- ▶ The advisory committee members for giving their time, providing their valuable insights and sharing their expertise in developing this Tracking Nutrition Trends VI survey:
 - Dr. Loretta DiFrancesco, Ph.D., RD, MBA, Consultant, Source! Nutrition
 - Lydia Dumais, RD, Head, Nutrition Labelling & Claims, Health Canada Food Directorate
 - Dr. Susan Evers, Ph.D., RD, Professor, Applied Human Nutrition, University of Guelph
 - Johanne Trudeau, RD, Director, Nutrition & Consumer Affairs, Kellogg Canada Inc.

- ▶ Sheryl Conrad, RD, for her expertise in providing a final review and edit of the report.

- ▶ The research company, and in particular the lead researcher, for their expertise in developing the survey tool, collecting and analyzing the data, and reporting the results as presented in this TNT VI report.
 - TNS Canadian Facts
 - Richard Jenkins, Ph.D., Vice President & Corporate Director of Public Opinion Research, TNS Canadian Facts

Contents

Acknowledgements	i
Executive Summary	5
<hr/>	
Introduction	5
Key Findings	6
<i>Knowledge and Understanding of Nutrition</i>	6
<i>Food Safety Concerns</i>	6
<i>Information about Food and Nutrition</i>	7
<i>Food Product Labelling</i>	7
<i>Food Choices</i>	8
<i>Changes in Eating Habits</i>	9
Résumé	10
<hr/>	
Introduction	10
Résultats clés	11
<i>Connaissance et compréhension de la nutrition</i>	11
<i>Inquiétudes quant à l'inocuité des aliments</i>	12
<i>Information sur l'alimentation et la nutrition</i>	12
<i>Étiquetage nutritionnel</i>	13
<i>Choix d'aliments</i>	13
<i>Changements dans les habitudes alimentaires</i>	15
Methodology	16
<hr/>	
Detailed Findings	18
<hr/>	
Overall Approach	18
Attitudes about Food and Nutrition	19
<i>Self-rated Knowledge</i>	19
<i>Food Safety Concerns</i>	21
Public Understanding of Nutrition	23
<i>Dietary Fibre</i>	23

<i>Carbohydrates and the Glycemic Index</i>	28
<i>Cholesterol</i>	28
<i>Fat Content of Margarine and Butter</i>	31
<i>Trans Fatty Acids</i>	32
<i>Omega-3 Fatty Acids</i>	32
Sources of Information about Food and Nutrition	33
<i>Source of Food and Nutrition Information</i>	33
<i>Recall of Specific Health Claims or Statements (Past Year)</i>	36
<i>Specific Claim Recalled</i>	37
Food Product Labels	39
<i>Frequency of Reading Labels</i>	39
<i>Ability to Find Information on Labels</i>	41
<i>Use of Information on Labels</i>	42
<i>Perceived Importance of Specific Label Information</i>	44
Factors Affecting Food Choices	46
<i>Self-rated Eating Habits and Health</i>	46
<i>Taste, Nutrition, Cost and Convenience</i>	48
<i>Perceptions of What Makes a Food Healthy</i>	50
<i>Factors Affecting Food Choice</i>	51
<i>Selection of Food Based on Nutrient Content</i>	55
<i>Importance of Added Vitamins and Minerals on Food Selection</i>	56
<i>Awareness of Functional Foods</i>	57
Lifestyle-Related Choices	58
<i>Eating Meals Prepared at Home versus Out</i>	58
<i>Availability of Nutrition Information When Eating Out</i>	60
<i>Personal Changes to Eating Habits</i>	62
<i>Type of Change or Improvement</i>	63
<i>Popular Diets</i>	65

Appendix 1: Questionnaire	68
English	68
French	92
Appendix 2: Additional Methodological Information	116
Record of Call	116
Actual and Weighted Completions	117

Executive Summary

Introduction

This report presents the results of the 2006 Tracking Nutrition Trends (TNT VI) survey. The former National Institute of Nutrition (NIN) launched the Tracking Nutrition Trends series in 1989 to investigate the self-reported knowledge, attitudes and behaviours of the adult Canadian population with respect to food and nutrition. The Canadian Council of Food and Nutrition is continuing this legacy. Each wave of the series (I through VI) has built on the previous findings and tracked changes in attitudes, self-reported knowledge and behaviours of adult Canadians. Previous surveys are:

- TNT I (1989)
- TNT II (1994)
- TNT III (1997)
- TNT IV (2002)
- TNT V (2004)

In addition to tracking questions on nutrition knowledge, attitudes and behaviour, the 2006 survey (TNT VI) was designed to obtain additional information on the importance of emerging factors in Canadians' eating choices. In addition, the section on nutrition labelling was expanded and modified to address the new labelling formats.

The intent of the TNT series has always been to provide policy makers, health professionals, academics, and the food industry with insight into Canadians' perspectives on the importance of nutrition and their self-reported knowledge and behaviours. TNT VI is presented in the same spirit – to give insight in formulating policies, in developing communications on the role of food and nutrition in health, in directing further nutrition research projects, and in making decisions on the development and marketing of food products.

Key Findings

Knowledge and Understanding of Nutrition

Knowledge is critical in the modern world and a distinction between information and knowledge must be made. The amount of information and the speed and variety of the channels by which it is communicated have increased and continue to do so. Information is provided by a number of sources to a number of different ends and what may matter the most is the knowledge Canadians bring to the store when they make food choices.

Eighty-seven per cent of Canadians believe they have some knowledge of nutrition, with a relatively core group of 26 per cent who think they are very knowledgeable (the *informed*). This is virtually unchanged from the TNT V survey. There is room to increase the proportion that is informed and clear deficiencies exist with respect to knowledge. Younger Canadians, men and those with less formal education are less confident about their knowledge. Wider knowledge deficiencies also exist on relatively new topics, such as the glycemic index and trans fatty acids.

Knowledgeable people are better positioned to make informed food choices and the self-evaluations provide a very good predictor of their knowledge and how they behave. Those in the *informed core* think and act differently when it comes to food and nutrition.

- Self-rated knowledge is a good predictor of knowledge about specific nutrition issues in the survey and a strong driver of nutrition-related decisions and lifestyle choices. For example, people who think they are very knowledgeable about nutrition are more likely to agree that some types of dietary fibre can reduce the blood cholesterol level.
- Those who see themselves as informed are much more likely to eat breakfast every day than those who are less knowledgeable.

How people use the knowledge they have and whether they seek to improve their stock of knowledge will reflect what they care about when it comes to eating well.

Food Safety Concerns

There is no single dominant food safety issue or category of issues that concerns Canadians. Key concerns are the handling, preparation or storage of food (23%), the content of specific nutrients in food (12%), the additives and other chemicals in food (13%) and the use of pesticides (13%). Interestingly, concern with the use of pesticides emerged as a much bigger food safety issue this year (13%) than in TNT V (6%).

Information about Food and Nutrition

Access to information about nutrition is key to being informed and being in a position to make relevant choices. Some people may make healthier choices instinctively but we can speculate that with easier access to credible information comes a greater ability to make food choices that meet individual needs, all else being equal.

- The sources from which Canadians received nutrition information in the last year are quite varied. At the top of the list are those that are relatively easy to access such as product labels (77%), print media (76%), friends, relatives and colleagues (66%) and electronic media (65%). Few people received information directly from a dietitian (23%) and just over half received information from a family physician or other health professional (51%).
- Previous TNT studies show that the primary sources of information about nutrition, except product labels, are not widely viewed as credible providers of nutrition information. This finding is especially true when compared with the high credibility ratings for health professionals (dietitians, physicians and others) who are seen as very credible by more than three quarters of Canadians.

It appears that many Canadians do not recall health claims or statements made by food companies regarding the health benefits of their food. Only 32 per cent can recall a claim. For those who do recall something, the focus of these claims tends to be on the fat content of a food (38%), followed by general health claims (16%) and specific references to fibre or whole grains (14%).

Food Product Labelling

Most Canadians (77%) continue to get nutrition information from product labels. In general, most Canadians consult labels at least sometimes and there is a small proportion of active label users. This finding has not changed since TNT V.

- A larger proportion now indicates being able to find what they were looking for on the label (67% often can find this information, versus 56% in TNT V).
- The purpose of reading labels is primarily to find information about ingredients and nutrition. That said, almost half of those who look at labels say they look for health claims or look for a healthy, better choice slogan, symbol or label. There is clearly a constituency for these elements on labels.
- Half of those who read labels often look to find foods that claim to be good for their health. Only a small proportion of label readers (one in four) are actively looking to see

Executive Summary

whether a food is produced by genetic modification or grown organically, and this finding has not changed over time.

Food Choices

While few people see their health or eating habits as poor, there is some variation between good and excellent ratings. Relatively small groups of Canadians view their health (15%) or their eating habits (10%) as excellent. Those who rate their eating habits as excellent tend to place a higher emphasis on nutrition.

Given the variation in self-perceived eating habits, it is interesting to note that although the healthfulness of food is associated with a diverse set of factors, the typical response is that a food contains a desired ingredient (30%), followed by the perception that a food contains a lesser amount of an ingredient not desired (21%). Following these two general categories is the belief that a food is “healthy” if it has a fresh format (21%) or contains vegetables (16%).

When selecting food to eat, many people are motivated by health-based considerations. They care about the relationship between their health and their food choices. In general terms, aspects about their own health motivate them to make certain choices.

- The desire to maintain good health is the most important motivator. This is interesting because it is the least specific and depends on one’s definition of good health. At present, a large majority indicates thinking they are in at least good health.
- After maintaining good health is the desire to have food that provides energy and stamina, followed by weight management and the need to follow a prescribed diet.

The motivation to eat well raises the question of what Canadians care about when it comes to nutrition and food choices. In this survey, what people care about is determined by asking how important a characteristic is for them in making food choices.

- Nutrition is almost as important for Canadians as taste, and much more important than cost or convenience, when selecting foods. As is to be expected, cost is relatively much more important for those with lower levels of household income as these households need to care about prices.

Canadians also care about food-based considerations. The results here show that they care about certain food attributes (e.g. whole grains) more than others (e.g. a low glycemic index).

- The fact that a food is made of whole grains is very influential in the choices of 50 per cent of Canadians. Thus the presence of whole grains in a food makes it more likely to be chosen (whole grains is influential) because people care about this attribute.
- After the presence of whole grains, the next important of the tested attributes are the presence of omega-3 fatty acids, the presence of added nutrients and being organic. A low glycemic index is important to some people but there also is low awareness of its meaning, as indicated by the high percentage (20%) of people who do not know if it is influential for them.

Food choices are also affected by the tendency for people to select food based on the amount of a particular nutrient, such as fibre or saturated fat. When selecting foods based on specific nutrients, people are most often choosing food based on its composition of fibre, protein and vitamins. Since the TNT V survey there has been a modest increase in the frequency of selecting food based on all of the nutrients. The largest increase occurred with respect to the presence of trans fatty acids, with 68 per cent indicating they sometimes or often select a food based on this nutrient (versus 41% in TNT IV).

Many Canadians care about nutrition and it is clear that people care more about certain types of content and less about others. People tend to care most about the fibre, protein, vitamin, total fat and saturated fat content of their food and care the least about the iron, salt, cholesterol, carbohydrate and trans fat content.

Changes in Eating Habits

The majority of Canadians report making changes to improve or change their eating habits in the past year. While the changes are varied, they tend to fit into two broad categories: those who define their changed eating habits in terms of increasing their intake of nutritious foods such as fruits and vegetables; and those who define the change in terms of reducing the quantity of certain nutrients (particularly various types of fat).

Résumé

Introduction

Ce rapport présente les résultats du Sondage 2006 sur les Tendances de consommation (Nutrition : évolution et tendances VI). L'ancien Institut national de la nutrition (L'INN) a lancé en 1989 une série d'enquêtes intitulée «Nutrition : évolution et tendances» (NÉT) pour obtenir de l'information relative aux connaissances, aux attitudes et aux comportements déclarés de la population adulte canadienne en matière de nutrition et d'alimentation. Le Conseil canadien des aliments et de la nutrition poursuit cette tradition. Chaque vague de la série (I à VI) s'est inspirée des résultats précédents et a suivi l'évolution des changements dans les attitudes, connaissances et comportements déclarés des adultes canadiens. La présente étude fait suite aux études précédentes, soit :

- NÉT I (1989)
- NÉT II (1994)
- NÉT III (1997)
- NÉT IV (2002)
- NÉT V (2004)

En plus de faire le suivi de nombreuses questions sur les connaissances, attitudes et comportements en matière de nutrition, le sondage de 2006 (NÉT VI) visait à obtenir des informations additionnelles sur l'importance des facteurs qui émergent quant aux choix alimentaires des Canadiens. De plus, la section sur l'étiquetage nutritionnel a été étendue et modifiée afin de répondre aux nouveaux formats d'étiquetage.

Le but de la série d'enquêtes NÉT a toujours été d'éclairer les décideurs, professionnels de la santé, académiciens et l'industrie de l'alimentation sur les perspectives des Canadiens quant à l'importance de la nutrition et leurs connaissances et comportements déclarés. L'enquête NÉT VI est présentée dans le même esprit, c'est-à-dire qu'elle vise à donner un aperçu qui permet de formuler des politiques, développer les communications sur le rôle des aliments et de la nutrition dans la santé, servir de guide pour les projets de recherche futurs sur la nutrition et prendre des décisions quant au développement et marketing de produits alimentaires.

Résultats clés

Connaissance et compréhension de la nutrition

La connaissance est essentielle dans le monde où nous vivons et il faut faire la distinction entre l'information et la connaissance. La somme d'information et la rapidité et la variété des réseaux par lesquels cette information est communiquée ont augmenté et continuent d'augmenter. L'information provient de toutes sortes de sources qui servent à différentes fins et les connaissances que les Canadiens apportent au magasin lorsqu'ils font leurs choix alimentaires est l'aspect le plus important.

Quatre-vingt-sept pour cent des Canadiens croient qu'ils ont certaines connaissances en matière de nutrition, avec un groupe central de 26 pour cent qui se disent très bien renseignés (les *informés*). Les résultats demeurent pratiquement inchangés par rapport à l'enquête NÉT V. Il y aurait lieu d'augmenter la proportion des consommateurs informés et il y a un manque évident de connaissances. Les Canadiens un peu plus jeunes, les hommes et les personnes qui ont moins d'instruction doutent plus de leurs connaissances. Il y a aussi un plus grand manque de connaissances sur des sujets relativement nouveaux comme l'indice glycémique et les acides gras trans.

Les gens renseignés sont dans une meilleure position pour faire des choix alimentaires informés et les auto-évaluations fournissent un très bon indicateur prévisionnel de leurs connaissances et de leurs comportements. Ceux qui sont dans le groupe central des *informés* pensent et agissent différemment lorsqu'il s'agit d'alimentation et de nutrition.

- Les connaissances auto-évaluées sont un bon indicateur prévisionnel des connaissances relatives aux questions spécifiques de nutrition dans le sondage et un très bon motivateur quant aux décisions relatives à la nutrition et les choix de style de vie. Par exemple, les gens qui se disent très bien renseignés en matière de nutrition sont plus susceptibles d'être d'accord que certains types de fibres alimentaires peuvent faire baisser le taux de cholestérol dans le sang.
- Ceux qui se disent informés sont beaucoup plus susceptibles de prendre leur petit-déjeuner chaque matin que ceux qui sont moins bien renseignés.

La façon dont les gens utilisent leurs connaissances et les efforts qu'ils mettent à améliorer leur somme de connaissances reflète ce qui est important pour eux lorsqu'il s'agit de bien s'alimenter.

Inquiétudes quant à l'inocuité des aliments

Il n'y a pas une question dominante ou une catégorie de questions sur l'inocuité des aliments qui préoccupe les Canadiens. Les Canadiens sont avant tout préoccupés par la manipulation, la préparation ou la conservation d'aliments (23 %), le contenu de nutriments spécifiques dans les aliments (12 %), les additifs ou autres produits chimiques dans les aliments (13 %) et l'utilisation de pesticides (13 %). Fait intéressant, les inquiétudes quant à l'utilisation de pesticides se sont avérées beaucoup plus grandes cette année (13%) que dans l'enquête NÉT V (6 %).

Information sur l'alimentation et la nutrition

L'accès à l'information sur la nutrition est essentiel si on veut être bien informé et dans une position où l'on peut faire des choix pertinents. Il se peut que certaines personnes fassent de meilleurs choix santé instinctivement, mais il y a lieu de croire qu'avec un accès plus facile à de l'information crédible il y a de plus grandes possibilités de faire des choix alimentaires qui répondent aux besoins individuels, toutes autres choses étant égales.

- Les sources auprès desquelles les Canadiens ont reçu de l'information nutritionnelle au cours de la dernière année sont plutôt variées. En tête de liste, il y a celles qui sont relativement faciles d'accès comme les étiquettes sur les produits (77 %), les médias imprimés (76 %), les amis, parents et collègues (66 %) et les médias électroniques (65 %). Peu de gens ont reçu de l'information directement d'un(e) diététiste (23 %) et seulement un peu plus de la moitié ont reçu de l'information par l'entremise de leur médecin de famille ou d'un autre professionnel de la santé (51 %).
- Les enquêtes NÉT précédentes révèlent que les principales sources d'information nutritionnelle, à l'exception des étiquettes sur les produits, ne sont pas considérées d'emblée comme étant des sources crédibles d'information nutritionnelle. Cette information est particulièrement évidente à la lumière des très hautes notes accordées à la crédibilité des professionnels de la santé (diététistes, médecins et autres) qui sont considérés comme étant très crédibles par plus des trois quarts des Canadiens.

Il semble que bon nombre de Canadiens ne se souviennent pas des allégations ou affirmations faites par les compagnies de produits alimentaires relativement aux bienfaits de leurs aliments pour la santé. Seulement 32 pour cent se souviennent d'une affirmation. Ceux qui se souviennent de quelque chose ont tendance à mettre l'accent sur le contenu en matières grasses (38 %), suivi d'allégations générales sur la santé (16 %) et de références spécifiques aux fibres ou grains entiers (14 %).

Étiquetage nutritionnel

La plupart des Canadiens (77 %) continuent d'obtenir l'information nutritionnelle sur les étiquettes de produits. En général, la plupart des Canadiens consultent les étiquettes au moins à l'occasion, et il y a une faible proportion d'utilisateurs actifs d'étiquettes. Ce résultat demeure inchangé depuis l'enquête NÉT V.

- Une plus grande proportion de gens indiquent maintenant qu'ils sont capables de trouver ce qu'ils cherchent sur l'étiquette (67 % peuvent souvent trouver cette information versus 56 % dans l'enquête NÉT V).
- On lit les étiquettes principalement pour trouver de l'information sur les ingrédients et la nutrition. Cela étant dit, près de la moitié de ceux qui lisent les étiquettes disent qu'ils cherchent des allégations relatives à la santé ou cherchent un slogan, symbole ou logo «choix santé» ou «meilleur choix». On recherche clairement ces éléments précis sur les étiquettes.
- La moitié de ceux qui lisent les étiquettes cherchent souvent des aliments qui se réclament bons pour leur santé. Seulement une faible proportion de gens qui lisent les étiquettes (une personne sur quatre) cherchent activement à savoir si un aliment est biologique ou s'il a été génétiquement modifié, et ce résultat n'a pas changé au fil des ans.

Choix d'aliments

Bien que peu de gens qualifient leurs habitudes en matière de santé ou d'alimentation comme étant mauvaises, il y a un certain écart dans les évaluations de «bonnes» à «excellentes». De petits groupes de Canadiens considèrent leurs habitudes santé (15 %) ou habitudes alimentaires (10 %) comme étant excellentes. Ceux qui trouvent que leurs habitudes alimentaires sont excellentes ont tendance à mettre plus d'accent sur la nutrition.

Étant donné l'écart entre les habitudes alimentaires perçues, il est intéressant de noter que bien que l'aspect santé des aliments est associé à une série de facteurs variés, la réponse type est qu'un aliment contient un ingrédient désiré (30 %), suivi par la perception qu'un aliment contient une quantité moindre d'un ingrédient non désiré (21 %). Ces deux catégories générales sont suivies par la croyance qu'un aliment est «sain» s'il est frais, c'est-à-dire non transformé (21 %) ou s'il contient des légumes (16 %).

Lorsqu'elles choisissent des aliments, bon nombre de personnes sont motivées par des considérations de santé. Elles se préoccupent de la relation entre leur santé et leurs choix d'aliments. En général, les aspects qui ont trait à leur propre santé les motivent à faire certains choix.

Résumé

- Le désir de maintenir une bonne santé est le motivateur le plus important. Ce fait est intéressant puisqu'il est le moins spécifique et qu'il dépend largement de la définition que chaque personne a de ce qu'est une bonne santé. Présentement, une vaste majorité semblent penser qu'ils sont au moins en bonne santé.
- Après le maintien d'une bonne santé vient le désir d'avoir des aliments qui fournissent de l'énergie et de la résistance par le contrôle du poids et le besoin de suivre un régime prescrit.

La motivation de manger sainement soulève la question à savoir ce qui préoccupe les Canadiens lorsqu'il s'agit de nutrition et de choix d'aliments. Dans cette enquête, les préoccupations des gens ont été déterminées en leur demandant dans quelle mesure une caractéristique était importante pour eux lorsqu'ils faisaient des choix alimentaires.

- Les Canadiens accordent presque autant d'importance à la nutrition qu'au goût, et la nutrition est nettement plus importante que le coût ou l'aspect pratique lorsqu'ils choisissent leurs aliments. Comme prévu, le coût est relativement beaucoup plus important pour ceux dont le revenu familial est plus bas puisque ces gens doivent se préoccuper des prix.

Les Canadiens se préoccupent aussi de considérations relatives à l'aliment. Les résultats ici démontrent qu'ils se préoccupent de certaines caractéristiques de l'aliment (p. ex. les grains entiers) plus que de certaines autres (p. ex. un faible indice glycémique).

- Le fait qu'un aliment soit fait de grains entiers influence beaucoup les choix de 50 pour cent des Canadiens. Par conséquent, la présence de grains entiers dans un aliment le rend plus susceptible d'être choisi (les grains entiers constituent un facteur influent) parce que les gens accordent une importance à cette caractéristique.
- Après la présence de grains entiers, les caractéristiques les plus importantes, parmi celles qu'on a évaluées, semblent être la présence d'acides gras oméga-3, la présence de nutriment additionnels et le fait que l'aliment soit biologique. Un faible indice glycémique est important pour certaines personnes, mais on note aussi le peu de connaissances qu'on a de sa signification, tel qu'indiqué par le haut pourcentage (20 %) des gens qui ne savent pas si ce facteur influence leurs choix.

Les choix alimentaires sont aussi affectés par la tendance qu'ont les gens de sélectionner des aliments en fonction d'un nutriment en particulier, comme les fibres ou les gras saturés. Lorsqu'ils choisissent des aliments en fonction de nutriments spécifiques, les gens choisissent le plus souvent des aliments selon leur composition en fibres, protéines et vitamines. Depuis l'enquête NÉT V, on note une faible augmentation quant au nombre de fois qu'on sélectionne des aliments en fonction de tous les nutriments. L'augmentation la plus forte

concerne la présence d'acides gras trans, 68 pour cent des gens indiquant qu'ils choisissent parfois ou souvent un aliment en fonction de ce nutriment (versus 41 % dans l'enquête NÉT IV).

Bon nombre de Canadiens se préoccupent de la nutrition et il est évident que les gens se préoccupent davantage de certains types d'ingrédients et moins de certains autres. Les gens ont tendance à se préoccuper le plus du contenu en fibres, protéines, vitamines, matières grasses et gras saturés de leurs aliments et se préoccupent le moins du contenu en fer, sel, cholestérol, glucides et gras trans.

Changements dans les habitudes alimentaires

Les majorité des Canadiens indiquent qu'ils ont fait des efforts pour améliorer ou changer leurs habitudes alimentaires au cours de la dernière année. Bien que les changements soient variés, ils ont tendance à s'inscrire dans deux grandes catégories : ceux qui définissent leurs nouvelles habitudes alimentaires en termes d'avoir augmenté leur consommation d'aliments nutritifs comme des fruits et des légumes, et ceux qui définissent le changement en termes d'avoir réduit la quantité de certains nutriments (particulièrement divers types de gras).

Methodology

The Tracking Nutrition Trends (TNT) survey was first established in 1989 to examine Canadians' perceptions of fat and fibre. The 2006 survey (TNT VI) is the sixth national survey of Canadians conducted since its establishment. The surveys have traditionally focused on the self-reported knowledge, attitudes and behaviour of adult Canadians toward food and nutrition, because the interplay between these three is key to understanding changes in how Canadian consumers view nutrition and health.

Historically, the TNT surveys attempted to examine Canadians' perceptions of fat and fibre. Although the interest in the perception and understanding of these issues remains high, key events over the past years since the first TNT survey have necessitated expanding the focus of the TNT surveys. Most recent examples of these events are:

- The introduction of mandatory nutrition labelling;
- The identified concern about increased rates of obesity among children and adults;
- The popularity of diets and/or products such as low carbohydrate diets; and,
- The increase in availability of specialized products (which have become mainstream) such as organic foods or soy-based products.

Since the baseline study conducted in 1989, the TNT survey has continued to track key attitudes about fat and fibre, while incorporating emerging nutrition-related health issues.

The methodology for TNT VI involved a telephone survey of 2014 Canadians between May 24 and June 12, 2006. The first three iterations of the TNT survey (TNT I, TNT II and TNT III) involved personal interviews and this methodology was changed to a telephone survey with the TNT IV study (Appendix 2).

The data are weighted to be nationally representative of the Canadian population 18 years of age and older on the basis of age, gender and region (based on the 2001 Canadian Census). With a national sample of 2014, one can say with certainty that the overall results are within plus or minus 2.0 points of the actual adult population in Canada (Appendix 3). The original sample was drawn using a Plus Digit, Random Digit Dialing process to select the household. In this method, telephone numbers are randomly generated using an Advanced Plus Digit sampling procedure that ensures the inclusion of newly listed and unlisted numbers. Interviews lasted on average 20 minutes.

All fieldwork, data processing and analysis were conducted in-house by TNS Canadian Facts. The company's roots go back to 1932 when Canadian Facts was established as the

country's first survey research organization. TNS Canadian Facts, one of Canada's largest marketing and social research firms, is a full-service research company facilitating business decisions.

The survey instrument, which was designed to build on and expand previous efforts, was developed in consultation with the Canadian Council of Food and Nutrition and its advisory team.

This report presents the key findings of the survey in text and summary charts. Some of the percentages may not add to 100 because of rounding or because “don't know” and “refused” responses are not shown. All of the comparisons between groups discussed in this study are statistically significant at the 95% confidence level using a t-test of the difference between two percentages.

Detailed Findings

Overall Approach

The following sections provide a more detailed analysis of the survey findings within the context of the historical trends in self-reported knowledge, attitudes and behaviours toward food and nutrition. The report is divided into six thematic sections:

- Attitudes about Food and Nutrition
- Public Understanding of Nutrition
- Sources of Information about Food and Nutrition
- Food Product Labels
- Factors Affecting Food Choices (including Self-rated Eating Habits and Health)
- Lifestyle-Related Choices

The overall results for the public as a whole are provided in figures (exhibits) and tables throughout the report along with a narrative discussion of the main points. Where possible, results from previous surveys are described to identify patterns of change or stability.

To better understand the findings, differences between sub-groups of the population where they are statistically and substantively interesting are reported. Throughout the report a focus on differences in the responses to the questions is provided based on the following demographic and attitudinal groups:

- Age
- Gender
- Education
- Income
- Region and language
- Knowledge about nutrition (self-rated)
- Eating habits (self-rated)

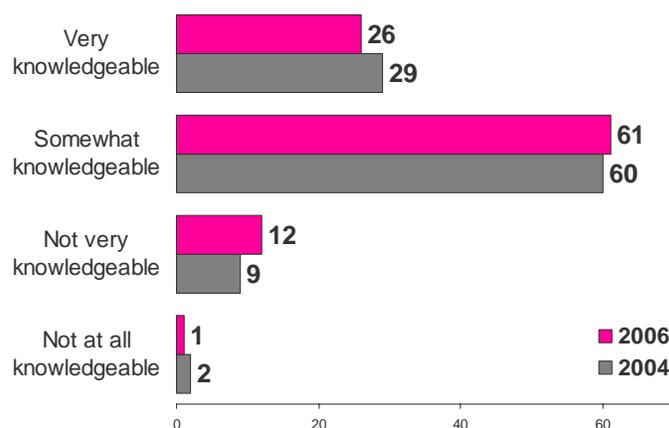
Attitudes about Food and Nutrition

Self-rated Knowledge

Canadians in general rate their knowledge of nutrition as quite high. Three in five Canadians believe they are somewhat knowledgeable about nutrition (61%) and one in four (26%) thinks they are very knowledgeable. Starting in 1997 with TNT III, the TNT surveys have asked Canadians to rate their knowledge of nutrition; over the past three surveys about three in ten Canadians say they are very knowledgeable about nutrition. Few people feel they lack, or are willing to say they lack, knowledge about nutrition (Exhibit 1).

As one would expect, the self-expressed rating of knowledge corresponds quite well with actual answers to questions: those who say they are very knowledgeable are more likely to answer questions about nutrition correctly. In addition, the stability across the last three survey waves suggests that the constant stream of new information being provided about nutrition to Canadians is not changing the fundamental divide of the population into the three core groups – very/somewhat knowledgeable, not very knowledgeable or not at all knowledgeable.

Exhibit 1
Self-rated Knowledge of Nutrition



Q.10 How knowledgeable would you say you are about nutrition? Would you say you are...?

Base: Total Canadians, n=2014

Detailed Findings

Self-rated knowledge of nutrition is related to a number of demographic characteristics, reflecting both the confidence of these people and their overall knowledge. In particular, women, older Canadians and those with higher levels of education state that they have a higher level of nutrition knowledge (Table 1).

- Older Canadians are more confident about their nutrition knowledge than younger Canadians, particularly those under 25 years.
- Level of education is also strongly related to personal confidence in nutrition knowledge. Almost four in ten (38%) of those with a post-graduate university degree indicate being very knowledgeable, compared with 21 per cent of those who completed some high school.
- Women are more likely to rate their knowledge highly (31% compared with 20% of men say very knowledgeable). As is also evident elsewhere in the report, nutrition appears to be more relevant to women than men.
- Knowledge is also rated higher among those who report having very good eating habits and are involved in planning meals in the household. For example, 27 per cent of meal planners and 39 per cent of those who believe they are eating an excellent or very good diet consider themselves to be very knowledgeable.

Table 1: Nutrition Knowledge by Gender, Age and Education

	Total (2014)	Gender		Age			
		Men (656)	Women (1358)	18-24 (204)	25-44 (767)	45-64 (701)	65+ (342)
Very knowledgeable	26	20	31	18	22	32	28
Somewhat knowledgeable	61	62	60	67	65	57	56
Not very/not at all knowledgeable	13	18	9	16	12	12	16

	Total (2014)	Education					
		Some High School (257)	Grad. High School (454)	Some Post Sec. (201)	Grad. College (435)	Grad. Univ. (366)	Post Grad. (251)
Very knowledgeable	26	21	15	28	25	32	38
Somewhat knowledgeable	61	55	65	63	63	61	56
Not very/not at all knowledgeable	13	23	20	9	12	6	6

Note: value is percentage; number of cases in parentheses

Q.10 How knowledgeable would you say you are about nutrition? Would you say you are...?

Food Safety Concerns

Food safety concerns have not changed much over the past several years. Consistent with TNT V, there is no single dominant food safety issue or category of issues that concerns Canadians. The one area of heightened concern is the use of pesticides, which has more than doubled in terms of the number of mentions (6% in TNT V to 13% in this survey). Respondents were asked to name food safety issues that concern them personally and up to three open-ended responses were taken for coding (Table 2).

The largest category of responses remains the handling, preparation or storage of food (23%), remaining consistent with the TNT V results (22%). This category includes handling and preparation (6%), temperature and refrigeration (5%), cleanliness (4%), expiry date/shelf life (4%) and hygiene (2%).

More than one in ten Canadians has reservations about the additives and other chemicals in foods (13%), and an equal proportion mentions pesticides.

- Almost one quarter (24%) of Canadians do not have a food safety issue of concern, which is lower than in TNT V (31%) and about the same as in TNT IV. The “nothing concerns me” response was less prevalent among women, those with higher levels of education and those who rate their knowledge of nutrition as high. Those who say they are not very or not at all knowledgeable about nutrition are twice as likely as very knowledgeable Canadians to have no food safety concerns (38% versus 16%, respectively).
- Twelve per cent of Canadians are concerned about food content, having mentioned particular nutrients, such as fat content (5%), trans fats (2%), cholesterol (2%), sugar (4%), salt (2%) and excess carbohydrates and starches (1%).
- Few people mention genetically modified foods (5%). Food poisoning as a safety issue (8%), particularly salmonella (4%) and bacteria (2%), remains a concern for some Canadians.

Detailed Findings

Table 2: Food Safety Concerns

	Total
	(2014)
Handling/Preparation/Storage of food	23
Additives and other chemicals in food	13
Pesticides and other chemicals	13
Food content (sugars, carbohydrates, etc)	12
Food poisoning/E coli/Salmonella	8
Freshness quality	6
Chemicals in food (general)	6
Food preparation	5
Meat/Chicken (general)	4
Animal diseases	3
Food allergies/Diabetes/Other health concerns	3
Knowledge of source/Country of origin	3
Restaurant/Fast food concerns	2
Preference for organic/Natural foods	2
Eating fruit/Vegetables/Other healthy foods	1
Ways in which the animals are raised/Fed/Slaughtered	1
Miscellaneous and other mentions	8
Nothing	24
Don't Know	11

Note: value is percentage; number of cases in parentheses

Q.11 Could you name food safety issues that concern you personally?

Public Understanding of Nutrition

As noted earlier, 26 per cent of Canadians consider themselves to be very knowledgeable about nutrition. However, self-reported knowledge is reliant on a good self-assessment, which is fairly closely related to how a person understands nutrition. People who think they are more knowledgeable appear to be able to understand nutrition more completely.

To better gauge Canadians' knowledge of nutrition, we asked people to agree or disagree with nine nutrition-related statements. The statements cover a range of areas including some that have recently received fairly high levels of media attention, such as trans fatty acids. While in some cases trend information is available from the earlier surveys, many of the questions have been changed to address these emerging topics or to make the questions more relevant to current nutrition issues.

This section is divided into six nutrition-related themes, ordered as follows: dietary fibre; carbohydrates and the glycemic index; cholesterol; fat content of margarine and butter; trans fatty acids; and omega-3 fatty acids.

Dietary Fibre

Two of the statements used to gauge the knowledge of Canadians about nutrition relate to the role of dietary fibre in the body; both have been tracked since TNT I. Canadians were asked if "Some types of dietary fibre can help reduce cholesterol in your blood" and if "A high fibre diet may help prevent colon cancer". It is apparent that there is a clear understanding of dietary fibre that has not shifted substantively over the years.

Canadians believe that a high fibre diet helps to prevent colon cancer. One in two Canadians strongly agree and one in four somewhat agree that a high fibre diet plays this role compared with only a small number who disagree (Exhibit 2). This is virtually unchanged over the past 17 years (Table 3).

- Younger Canadians (Table 4) are less likely to agree (76% of those under 25 agree), especially compared with the middle age groups, 25 to 44 (84%) and 45 to 64 (86%). The age-related difference is associated with a higher percentage of "don't know" or neutral responses among younger people.
- Although a majority of those in all education groups agree with the statement, agreement is higher among those with higher education. For example, Canadians with no more than a high school education are less likely to agree (74%) compared with those with an undergraduate education (81%).

Detailed Findings

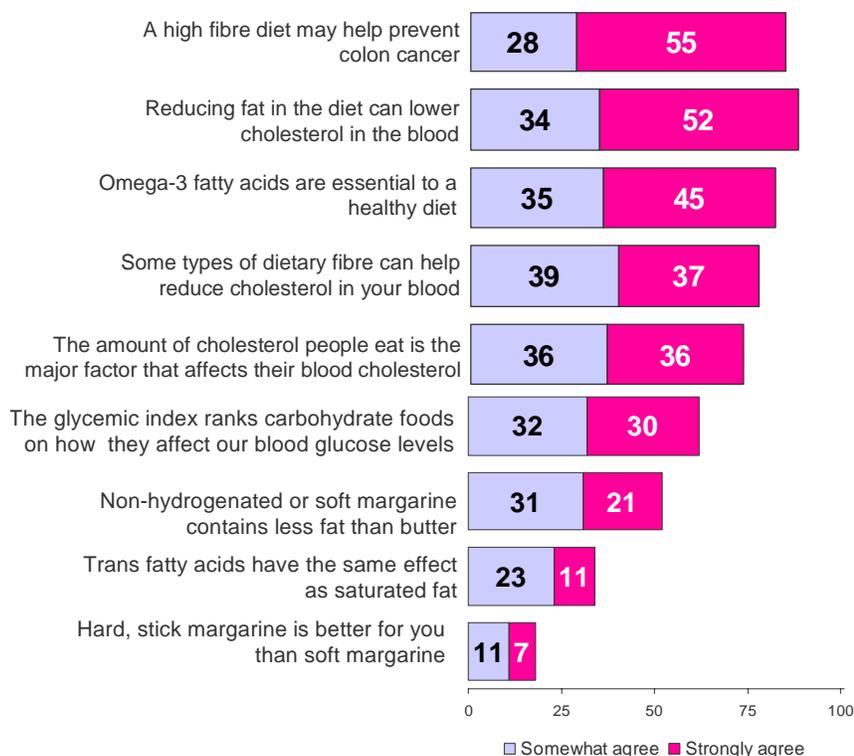
- Women are more inclined than men to see the beneficial effects of fibre on reducing the risk of colon cancer (62% of women strongly agree compared with 49% of men).

The majority of Canadians agree that some types of dietary fibre can help reduce the cholesterol level in the blood; almost an equal proportion agrees with the statement strongly (37%) and somewhat (39%).

- Understanding the role that fibre plays in reducing the blood cholesterol level is also higher among the same groups – the higher educated and older – who understand the role of fibre in reducing the risk of colon cancer.
- Those who say that they are knowledgeable about nutrition are much more likely to think that dietary fibre plays a role in reducing cholesterol (Table 5).

Exhibit 2

Public Opinion on Nutrition Statements



Q.15 I will read you some statements. Please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree or strongly disagree with each of the following statements.

Base: Total Canadians, n=2014

Table 3: Level of Agreement with Nutrition Statements
(Strongly and Somewhat)

	Year of Survey			
	1989	1994	2004	2006
A high fibre diet may help prevent colon cancer	75	80	80	83
Reducing fat in the diet can lower cholesterol in the blood	86	91	81	86
Some types of dietary fibre can help reduce cholesterol in your blood	74	76	76	76
The amount of cholesterol people eat is the major factor that affects their blood cholesterol	73	69	70	72
Non-hydrogenated or soft margarine contains less fat than butter	-	-	-	52
Hard, stick margarine is better for you than soft margarine	-	-	-	19
The glycemic index ranks carbohydrate foods on how they affect our blood glucose levels	-	-	-	62
Trans fatty acids have the same effect as saturated fat	-	-	-	34
Omega-3 fatty acids are essential to a healthy diet	-	-	-	80

Note: value is percentage based on Canadians who strongly and somewhat agree

Q.15 I will read you some statements. Please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree or strongly disagree with each of the following statements.

Detailed Findings

Table 4: Opinions about Nutrition Statements by Age

	Total	Age			
		18-24	25-44	45-64	65+
	(2014)	(204)	(767)	(701)	(342)
A high fibre diet may help prevent colon cancer					
% agree	83	76	84	86	81
% disagree	5	6	3	5	6
Some types of dietary fibre can help reduce cholesterol in your blood					
% agree	76	74	75	81	72
% disagree	5	7	4	6	7
The glycemic index ranks carbohydrate foods on how they affect our blood glucose levels					
% agree	62	57	60	67	58
% disagree	6	7	5	5	9
Omega-3 fatty acids are essential to a healthy diet					
% agree	80	73	83	84	72
% disagree	6	10	5	5	9
Reducing fat in the diet can lower cholesterol in the blood					
% agree	86	82	85	90	85
% disagree	6	8	5	5	9
The amount of cholesterol people eat is the major factor that affects their blood cholesterol					
% agree	72	80	71	70	73
% disagree	19	9	18	24	17
Non-hydrogenated or soft margarine contains less fat than butter					
% agree	52	57	56	47	51
% disagree	25	21	21	30	28
Hard, stick margarine is better for you than soft margarine					
% agree	19	20	17	19	20
% disagree	36	31	32	37	43
Trans fatty acids have the same effect as saturated fat					
% agree	34	26	34	38	34
% disagree	33	40	34	32	30

Note: value is percentage based on Canadians who strongly and somewhat agree; number of cases in parentheses

Q.15 I will read you some statements. Please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree or strongly disagree with each of the following statements.

Table 5: Opinions about Nutrition Statements by Knowledge of Nutrition

	Total	Knowledge of Nutrition		
		Not at all/ not very	Somewhat	Very
	(2014)	(234)	(1226)	(548)
A high fibre diet may help prevent colon cancer				
% agree	83	68	84	89
% disagree	5	8	4	5
Some types of dietary fibre can help reduce cholesterol in your blood				
% agree	76	65	76	82
% disagree	5	7	5	6
The glycemic index ranks carbohydrate foods on how they affect our blood glucose levels				
% agree	62	44	60	76
% disagree	6	9	6	6
Omega-3 fatty acids are essential to a healthy diet				
% agree	80	62	81	88
% disagree	6	9	5	7
Reducing fat in the diet can lower cholesterol in the blood				
% agree	86	82	87	86
% disagree	6	5	6	7
The amount of cholesterol people eat is the major factor that affects their blood cholesterol				
% agree	72	75	74	67
% disagree	19	12	18	25
Non-hydrogenated or soft margarine contains less fat than butter				
% agree	52	53	53	49
% disagree	25	21	23	33
Hard, stick margarine is better for you than soft margarine				
% agree	19	21	18	18
% disagree	36	32	33	42
Trans fatty acids have the same effect as saturated fat				
% agree	34	26	33	40
% disagree	33	25	33	39

Note: value is percentage based on Canadians who somewhat and strongly agree added together; number of cases in parentheses

Q.15 I will read you some statements. Please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree or strongly disagree with each of the following statements.

Detailed Findings

Carbohydrates and the Glycemic Index

New to the TNT survey, Canadians were asked if “The Glycemic Index ranks carbohydrate foods on how they affect our blood glucose levels”. Most Canadians (62%) seem to have some knowledge of the glycemic index and understand its purpose (Exhibit 2). Thirty-eight per cent do not think it ranks carbohydrates (17%) or say they do not know (21%). These results suggest that a substantive proportion of the population has low awareness of the glycemic index or its function.

- Those aged 45 to 64 years tend to be the most likely age group (Table 4) to know the role of the glycemic index (67% agree with the statement).
- Similar to the results for the role of dietary fibre, there is a modest relationship between knowledge and education; people with higher levels of education are more likely to know the role of the glycemic index. For example, Canadians with a university education are more likely to strongly agree (38%) compared with those with high school or less education (27%).
- Those who are confident about their own nutrition knowledge are more likely to identify the role of the glycemic index (Table 5). In contrast, those who identify themselves as having limited knowledge of nutrition are almost three times as likely (30%) as Canadians who are knowledgeable about nutrition (12%) to not know about the glycemic index or its function.

Cholesterol

As noted earlier, a majority of Canadians agree that some types of dietary fibre can reduce cholesterol in the blood. While previous TNT surveys have shown that Canadians understand the role that dietary fat plays in one’s blood cholesterol level, when asked if “Reducing fat in the diet can lower cholesterol in the blood” there is less knowledge about the role of diet versus lifestyle and other factors affecting a person’s blood cholesterol level.

Eighty-six per cent think that reducing fat in the diet can lower cholesterol in the blood. Among those who agree, one in two strongly agrees (52%). Although the proportion of respondents who agree rose in TNT VI after faltering slightly in TNT V, the overall trend is flat.

- In general, the better one’s self-reported eating habits the more one understands the relationship between blood cholesterol level and dietary fat (Table 6).
- Self-reported knowledge of nutrition is also related to understanding the relationship between blood cholesterol and dietary fat.

Seven in ten people believe that the amount of cholesterol that people eat is the major factor that affects their blood cholesterol; this has not changed since earlier surveys (Table 3).

- Though a majority of all groups agree with this statement, people with higher levels of education are slightly more likely to disagree (25% of post-graduates versus 13% with high school or less).
- Almost one in four people (25%) who consider themselves very knowledgeable about nutrition do not think that the amount of cholesterol people eat is the major factor, compared with 12 per cent of those who consider themselves not at all or not very knowledgeable about nutrition (Table 5).

Detailed Findings

Table 6: Opinions about Nutrition Statements by Eating Habits

	Total	Eating Habits		
		Net: Fair/Poor	Good	Net: Excellent/ Very Good
	(2014)	(326)	(788)	(898)
A high fibre diet may help prevent colon cancer				
% agree	83	79	83	85
% disagree	5	7	3	5
Some types of dietary fibre can help reduce cholesterol in your blood				
% agree	76	73	76	78
% disagree	5	5	6	5
The glycemic index ranks carbohydrate foods on how they affect our blood glucose levels				
% agree	62	55	60	67
% disagree	6	8	6	5
Omega-3 fatty acids are essential to a healthy diet				
% agree	80	72	80	84
% disagree	6	7	6	6
Reducing fat in the diet can lower cholesterol in the blood				
% agree	86	87	85	87
% disagree	6	6	6	6
The amount of cholesterol people eat is the major factor that affects their blood cholesterol				
% agree	72	72	73	72
% disagree	19	18	17	20
Non-hydrogenated or soft margarine contains less fat than butter				
% agree	52	57	53	50
% disagree	25	24	25	26
Hard, stick margarine is better for you than soft margarine				
% agree	19	21	18	18
% disagree	36	37	34	37
Trans fatty acids have the same effect as saturated fat				
% agree	34	31	35	35
% disagree	33	32	31	36

Note: value is percentage based on Canadians who somewhat and strongly agree added together; number of cases in parentheses

Q.15 I will read you some statements. Please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree or strongly disagree with each of the following statements.

Fat Content of Margarine and Butter

Previous TNT studies (TNT IV and TNT V) have shown a large difference of opinion among Canadians about the difference in the amount of fat in margarine versus in butter. In TNT II, one in two (50%) believed margarine contains the same amount of fat as butter does.

Given the significant changes to margarine in the past decade, two new agreement questions were added to the survey for 2006:¹

- “Non-hydrogenated or soft margarine contains less fat than butter”, and
- “Hard, stick margarine is better for you than soft margarine”.

Half of Canadians (52%) think that non-hydrogenated or soft margarine contains less fat than butter while few Canadians (19%) think that hard, stick margarine is better for you than soft margarine (Exhibit 2). However, a greater percentage (26%) is uncertain about whether soft margarine is better than hard, stick margarine as reflected in their “don’t know” response to the question. These results indicate that many Canadians are uncertain or uninformed about the distinctions between the various types of margarine and butter, and the fat content of these products.

- Those with some high school or less education (30%) are more likely to think that non-hydrogenated or soft margarine contains less fat than butter compared with Canadians with at least post-secondary education (ranges between 20% and 14%).
- As one might suspect, those who rate their nutrition knowledge highly, more strongly disagree with the statement that hard, stick margarine is better for you than soft margarine (42%) compared with those who claim to have limited knowledge (32%).
- Residents of the Atlantic region are most likely to disagree (42%) with hard, stick margarine being better for you than soft margarine, while those from Quebec are least likely to disagree (30%).

¹ One of the reasons for these two new agreement questions is that margarine has clearly become a more complex food over the past few years and to treat it monolithically may not be a useful approach going forward.

Detailed Findings

Trans Fatty Acids

Trans fat was introduced in foods as a replacement for saturated fat. Its health effects have since been found to be similar to those of saturated fat in that its consumption can increase the risk of heart disease. One in five respondents (21%) does not know whether trans fatty acids have the same role as saturated fat, and an additional one in ten (11%) neither agrees nor disagrees. In TNT V a slightly different question wording was used: “Trans fatty acids have about the same role in the diet as do saturated fats” compared with the current “Trans fatty acids have the same effect as saturated fat“. Although the changed question wording means that we need to treat any comparison with caution, the results from 2004 (36% agree and 21% do not know), suggest that awareness has not increased over the past two years.

- Education is associated with a higher level of disagreement with the TNT VI statement and a lower level of uncertainty (fewer “don’t know” responses). For example, four in ten of those with a graduate degree disagree, compared with three in ten of those with a high school or less education.
- Interestingly, those who claim to be very knowledgeable about nutrition are equally likely to agree (Table 5) as they are to disagree with the statement (40% and 39%, respectively).

Omega-3 Fatty Acids

Omega-3 fatty acids recently have received exposure in the media. Consumption of this specific type of fatty acids is essential for good health because the body cannot synthesize it naturally. Although the TNT VI statement “Omega-3 fatty acids are essential to a healthy diet“ is general in approach, it is the overall consensus among the population that omega-3 fatty acids are essential to a healthy diet (80%). Less than one respondent in ten is not familiar with the essentiality of omega-3 in a healthy diet (9%).

- Those between the ages of 45 and 64 years (52%) are most likely to understand that omega-3 fatty acids are essential in a healthy diet, compared with Canadians in the 18 to 24 year age group (32%).
- A high socioeconomic status – education and household income – is also associated with the strong belief that omega-3 fatty acids are essential to a healthy diet.

Sources of Information about Food and Nutrition

Source of Food and Nutrition Information

Today, consumers have a wide range of potential sources of food and nutrition information. Canadians were asked whether they personally got information from eleven sources during the past year, which represented a slightly reduced list than used in previous surveys.² Most Canadians continue to obtain their food and nutrition information from sources that are accessible and timely, such as food product labels, as compared with other methods (e.g. family physician/health professional and government materials).

Exhibit 3 ranks the information sources by the proportion of Canadians who indicated receiving health and nutrition information from them in the previous year.

The sources that most people use (used by more than two in three) include product labels (77%), people in one's social sphere (66%), print media (magazines, newspapers and books; 76%) and electronic media (radio/television programs; 65%). These rankings have remained relatively constant over the years.

- Many Canadians also receive information from health personnel, such as a health association (50%), or a family physician or another health professional (51%). Older Canadians (52% of seniors versus 40% of those under 25 years) and women (54%) are more likely to get information from a family physician.
- Related to, but clearly different than labels, 52 per cent receive information from food company materials or advertisements. This is similar to the results for “food advertisements” (52%) in TNT V but not for the more general “food company materials” (36%).
- The least likely sources of information are specialty type sources such as dietitians (23%) and fitness programs (27%).
- A number of other sources are used by a significant proportion of Canadians. Forty-six per cent use the Internet and 41 per cent use government materials; both of these are modest upward shifts (3 points higher than in TNT V).

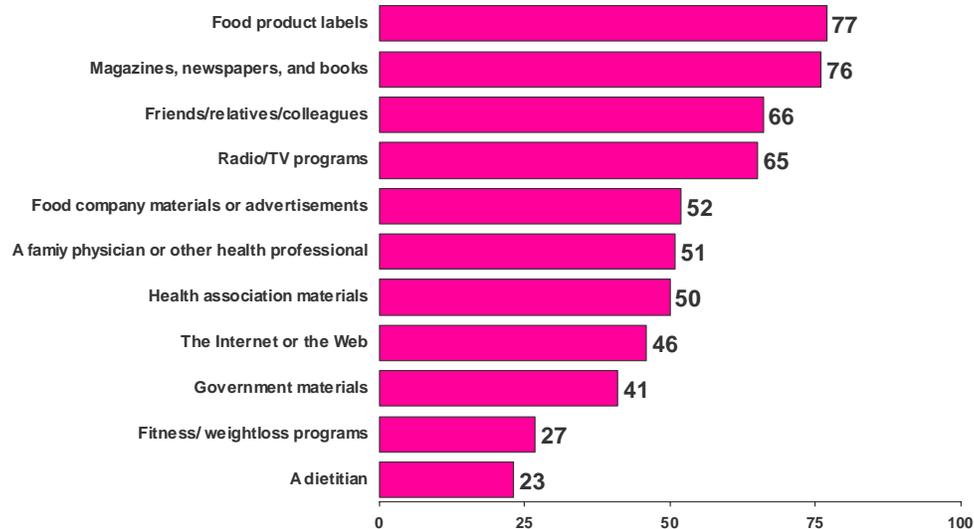
² Changes in TNT VI include: books are merged with magazines and newspapers; family physician is merged with other health professionals; food company materials is merged with advertisements; and nutritionist is no longer included with dietitian.

Detailed Findings

Socioeconomic factors are also associated with the range of food sources accessed. Those with higher levels of income and education have a greater tendency to use a wider selection of information such as government materials and magazines, newspapers and books.

Exhibit 3

Food and Nutrition Information Sources



Q.16 People can get information about food and nutrition from a number of different sources. Please tell me from which of the following sources you personally got information on food and nutrition in the past year.

Base: Total Canadians, n=2014

Age is a key demographic characteristic related to differences in sources of information. Table 7 shows the percentage of Canadians receiving information from each of the sources by age group. Overall, people between the age of 35 and 44 years tend to access information from most sources, suggesting that health and nutrition become more important for people as they age.

- Young people are much more reliant on friends, relatives and colleagues for nutrition information (it is the second most used source of information for those under 25 years, but is ranked 6 of 11 for seniors). On the other hand, youth are much less likely to receive information from family physicians or from health associations.
- Reflecting the generational nature of Internet use, six in ten of those under 25 years of age obtained information from the Internet compared with few seniors (12%). This is up dramatically from TNT III when only a small percentage (6%) got information from this source (8% of young adults and 1% of seniors) but has not changed since TNT V.

Table 7: Sources of Nutrition Information by Age

	Age				
	Total (2014)	18-24 (247)	25-44 (760)	45-64 (673)	65+ (334)
Food product labels	77	78	82	76	63
Magazines, newspapers, and books	76	64	81	77	69
Friends, relatives, colleagues	66	77	76	61	49
Radio and television programs	65	56	69	67	57
Health associations (Cancer/Heart/Diabetes)	50	40	43	56	59
Family physician/ Other health professional	51	41	48	58	53
Internet or the web	46	63	57	43	12
Government materials	41	30	41	46	40
Food company materials or advertisements	52	47	58	51	45
Fitness and weight loss programs	27	32	26	27	24
Dietitian	23	18	20	28	28

Note: value is percentage; number of cases in parentheses

Q.16 People can get information about food and nutrition from a number of different sources. Please tell me from which of the following sources you personally got information on food and nutrition in the past year.

Detailed Findings

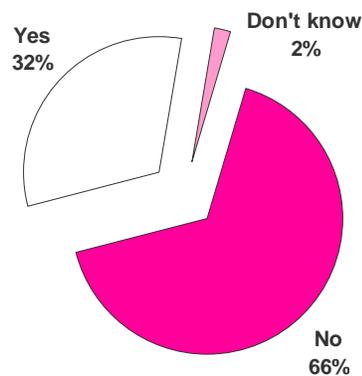
Recall of Specific Health Claims or Statements (Past Year)

A majority of Canadians (66%) cannot recall a nutrition or health claim made by food companies in the previous year (Exhibit 4).³

- People living in Quebec are most likely to recall food company claims or statements (39%) while those in the Atlantic region are least likely (25%).
- Elderly Canadians are least likely to recall a health claim (19%) while the remaining age groups range between 29 and 36 per cent.
- Those who have incorporated changes to their eating habits or have been on a popular diet during the past year are more inclined to recall claims and statements; this may stem from an interest in sustaining a specific regimen.

Exhibit 4

Recall of Nutrition/Health Benefit Claims or Statements



Q.21a Are there any particular claims or statements made by food companies regarding the nutritional or health benefits of their food that attracted your attention over the past 12 months?

Base: Total Canadians, n=2014

³ The results are based on a new question added to the TNT VI survey.

Specific Claim Recalled

Among those who recall food claims (Exhibit 5), references to fats are most remembered (38%). This category includes specific mentions of claims related to omega-3 or omega-6 fatty acids (13%), zero trans fats (11%), reduced and lower fat (9%), no fat (4%) and reduced trans fats (2%).

Sixteen per cent recall statements that suggest direct links to healthy benefits as a result of consumption of a food; for example, a product label that carries health claims such as, part of a “healthy” diet (6%), to help reduce the risk of heart disease (3%) and to help reduce the risk of cancer (3%). The next specific claims recalled are related to fibre and whole grains (14%), and to carbohydrates and sugars (8%), such as reduced sugar (3%), sugar free (2%) and lower/reduced carbohydrates (1%).

Other categories of mentions include: organic-specific claims (8%); store, third party, and logo endorsements (7%); vitamin, mineral or calcium content (6%); nutrition and energy statements (6%); cholesterol (6%); salt/sodium (5%); and calories (3%).

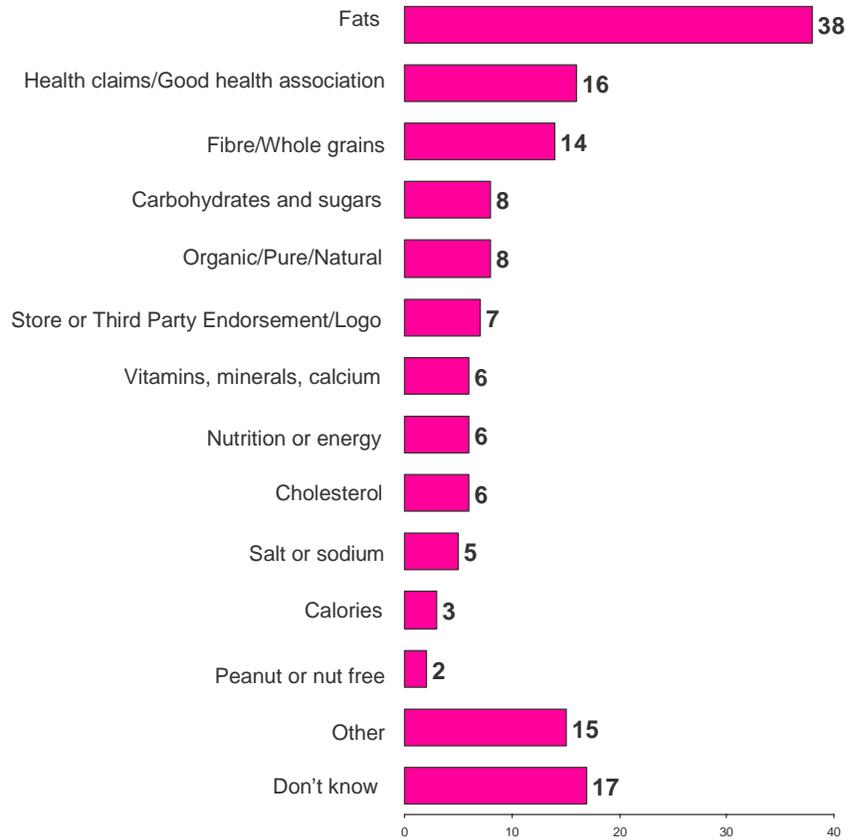
There is, however, a small yet significant proportion (17%) who cannot recall the type of nutrition or health benefit that attracted their attention.

- Consistent with other findings, those with a high school education or less (29%) are almost three times as likely as those with an undergraduate degree (11%) not to recall the type of claim that attracted their attention.
- Those who earn less than \$35,000 are more likely than those with a household income of \$50,000 or more not to recall the claim that attracted their attention (35% and 10%, respectively, “don’t know”).

Detailed Findings

Exhibit 5

Nature of Nutrition/Health Benefit Claims Recalled



Q.21b What was the food claim or statement that attracted your attention?

Base: Health benefit claims or statement that attracted attention, n=668

Food Product Labels

As the results in the previous section showed, most Canadians (77%) report getting nutrition information from product labels at least once in the previous year. In addition, TNT V showed that people tend to attach credibility to product labels. Labels are considered more credible on average than mass media outlets, interpersonal relationships or other types of food company materials.

In general, most Canadians consult labels at least sometimes (75%), with one third of those being active label consulters (24%). The purpose of reading labels is primarily to find information about ingredients and about nutrition. To the extent labels are read, they also appear to provide the information Canadians need.

Frequency of Reading Labels

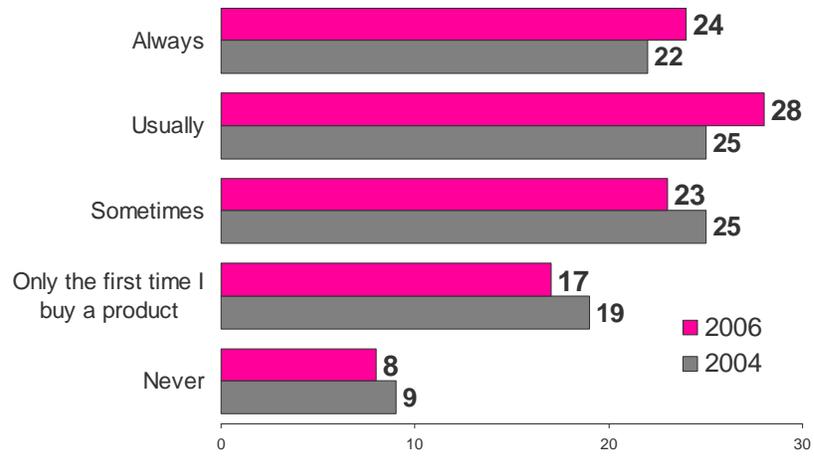
Consistent with the sources of information used, slightly more than half of Canadians read labels at least usually (52%), which is up slightly from the TNT V survey (47%). An additional 17 per cent read labels only the first time they buy a product or brand (Exhibit 6). There is a fairly even distribution among those who sometimes read the label on food products (23%), usually read the label (28%) and always consult the label (24%).

- Women (58%) are more likely than men (45%) to read labels at least usually, as are older Canadians. For example, those between the ages of 45 and 64 years are more likely to read labels at least usually (55%) compared with younger Canadians between the ages of 18 and 24 years (41%).
- Canadians who believe they have excellent or very good eating habits are more likely to always check labels (31%) than those who rate their eating habits as fair or poor (17%). Similarly, people who claim to be very knowledgeable about nutrition tend to always check product labels (42%) compared with those who profess limited nutrition knowledge (7%). While people with higher levels of education are less likely to “never” check labels, they are not particularly likely to “always” check them.

Detailed Findings

Exhibit 6

Frequency of Reading the Label on Food Products



Q.17 Thinking specifically about labels on the various food products you buy (other than brand name or flavour), how often do you read the labels? Would you say that you always, usually, sometimes, only the first time you buy a product, or never read the labels?

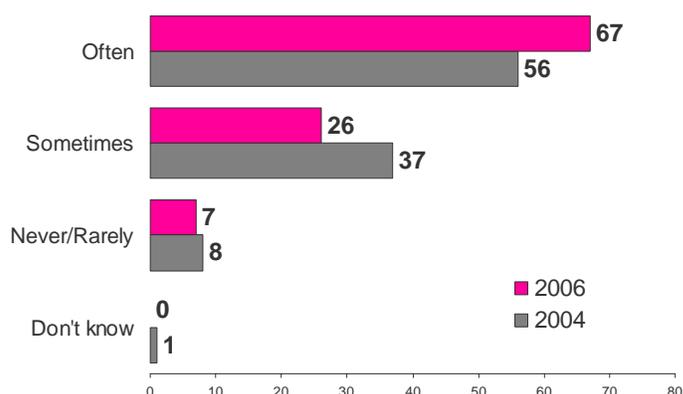
Base: Total Canadians, n=2014

Ability to Find Information on Labels

Of those who read product labels, more than two in three (67%) often find the information they are looking for (Exhibit 7). This is up significantly from TNT V when 56 per cent said they could often find the information they were seeking.

Exhibit 7

Ability to Find Information on Label



Q.20 When you look for nutrition related information on the label, how often can you generally find the information you need?

Base: Have read labels on food products at least once in the past year, n=1871

As one might anticipate, those who are the most knowledgeable about nutrition remain more likely to say they often can find the information they need (Table 8). Similarly, frequent readers of product labels also continue to be more likely to find the information they need.

Table 8: Ability to Find Information on Labels by Knowledge about Nutrition

	Total (2014)	Knowledge about Nutrition		
		Not at all/ Not very (174)	Somewhat (1161)	Very (532)
Often	67	57	66	73
Sometimes	26	26	29	21
Rarely/Never	6	15	5	6
Don't know	1	3	1	0

Note: value is percentage; number of cases in parentheses

Q.20 When you look for nutrition related information on the label, how often can you generally find the information you need?

Detailed Findings

Use of Information on Labels

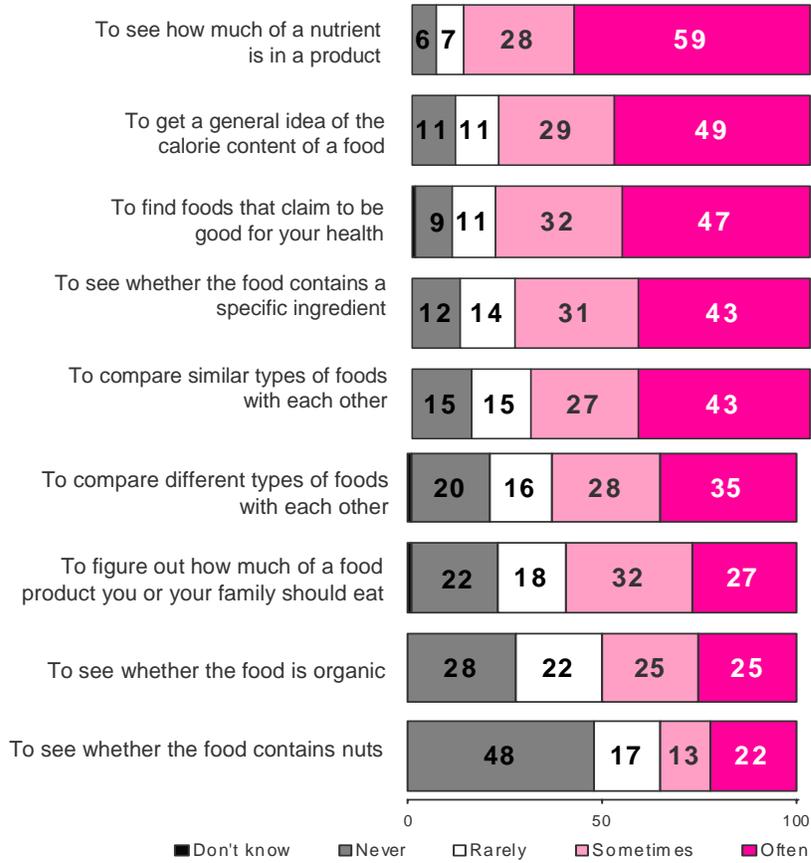
Given that one of the primary reasons for reading labels is to get nutrition information, it is important to understand the ways in which people are using the nutrition information on food packages. The information people are seeking can be general (for example, Is this food good for me? How much should I, or my family, eat?); it can be the basis of comparison (either between different kinds of food such as granola bars and cookies, or between similar kinds of food such as two different brands of crackers); or it can be specific, reflecting health or food concerns (for example, whether a food is kosher, contains nuts, or is organic).

Most Canadians who have read labels (Exhibit 8) use the information to see the amount of specific nutrients a product contains (87% at least sometimes; 59% often) and to find foods that claim to be good for your health (79% sometimes or often). This is consistent with the TNT V survey, which found that 86 per cent looked at the amount of nutrients and 83 per cent found foods that claim to be good for your health, sometimes or more frequently. These label readers also utilize the information for calorie content (78% at least sometimes), to search for a specific ingredient (74% at least sometimes) and to compare similar types of foods with each other (70%) or to compare different types of foods (63%).

Many individuals indicate that they use label information for comparison or serving size purposes. Fifty-nine per cent at least sometimes use the information to determine how much (the serving size) of the product should be eaten. Fewer people use the label to find information about whether a food is organically produced. In fact, more people never check the label for this specific type of information (28%) than check for it often (22%).

Exhibit 8

Use of Information on Food Packages



Q.19 When you look at the information on food packages, either in the store or at home, how often, if at all, do you use the information provided in the following ways. Would you say often, sometimes, rarely, or never?

Base: Have read labels on food products at least once in the past year, n=1871

Detailed Findings

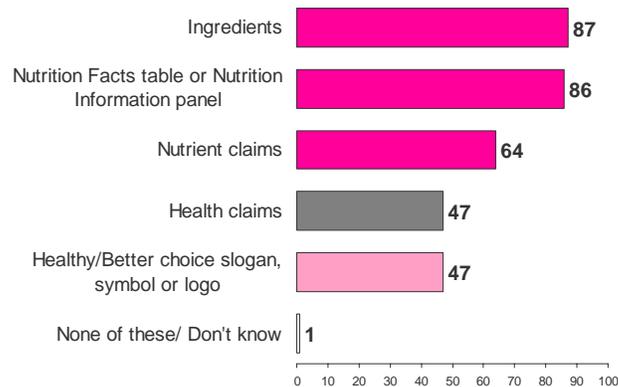
Perceived Importance of Specific Label Information

Canadians who read product labels find information that is factual and nutrition-oriented to be more important, as reflected by what they read, than statements that reinforce specific health claims (Exhibit 9). Approximately nine in ten look at the ingredients (87%), an increase from the TNT V survey (74%), and 86 per cent look at the Nutrition Facts table or Nutrition Information panel. In addition, two in three Canadians (64%) look at nutrition claims; this marks little variation from the TNT V survey.⁴

- Health claims and a healthy, better choice slogan, symbol or logo are read by slightly less than half of the population (47% and 47%, respectively).
- Young Canadians aged 18 to 24 years who read labels are most likely to find the Nutrition Facts table or Nutrition Information panel important (92%), compared with older Canadians. For example, 77 per cent of those 65 years or older read this information (Table 9).

Exhibit 9

Nutrition Information Sought on Label



Q.18 When you are looking at the labels, which of the following do you look for?

Base: Have read labels on food products at least once in the past year, n=1871

⁴ The TNT V survey referred to “nutrient or health claims”.

Table 9: Nutrition Information Sought on Labels by Age

	Total	Age			
		18-24	25-44	45-64	65+
	(1871)	(183)	(725)	(662)	(301)
Ingredients	87	80	85	89	92
Nutrition Facts table or Nutrition Information panel	86	92	88	86	77
Nutrient claims	64	52	61	71	64
Health claims	47	48	45	48	50
Healthy/better choice slogan, symbol or logo	47	45	48	48	43

Note: value is percentage; number of cases in parentheses

Q18 When you are looking at the labels, which of the following do you look for?

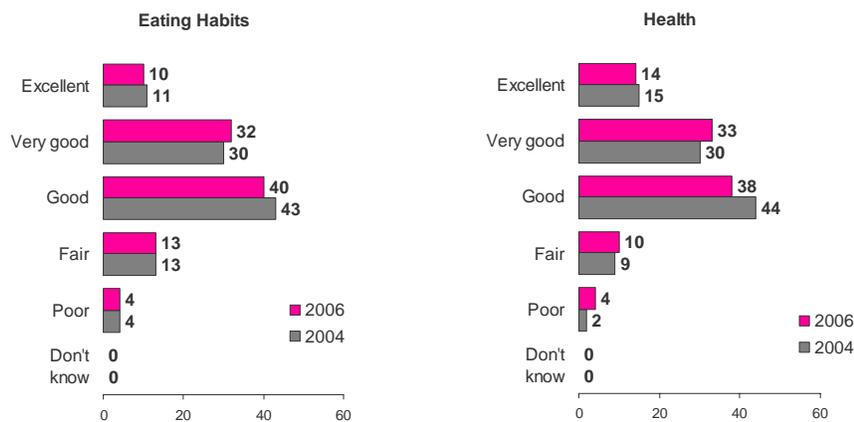
Factors Affecting Food Choices

A question of interest is whether Canadians are looking for particular elements in the food they select. How important, for example, is nutrition or taste? What do they care about when it comes to making food choices? To answer these questions we first consider how people see themselves in terms of overall health and eating habits. While few people see their health or eating habits as poor, there is some variation between good and excellent ratings.

Self-rated Eating Habits and Health

Most Canadians (Exhibit 10) perceive their eating habits and health as being at least good (82% and 85%, respectively). Approximately one in three says their eating habits and health are very good (32% and 33%, respectively) and a smaller proportion of the population perceives their eating habits and health as excellent (10% and 14%, respectively).

Exhibit 10
Self-rated Eating Habits and Health



Q.4 In general, would you say that your eating habits are excellent, very good, fair or poor?

Q.5 How would you assess your overall health?

Base: Total Canadians, n=2014

One would expect good eating habits to be related to good health. Consider that 72 per cent of those indicating they have excellent or very good eating habits think of themselves as being in excellent or very good health. However, these two variables are not necessarily aligned as good eating habits may be adopted because of poor health, and eating habits may improve as one ages while the likelihood of being in poor health increases.

- Women are slightly more likely than men to say that their eating habits are excellent or very good (46% compared with 40% of men), but are equally likely to think that they are in extremely or very good health (48% compared with 47% of men).
- Those who say they are knowledgeable about nutrition are much more likely to say they eat well (Table 10). Twenty-one per cent of Canadians who indicate being very knowledgeable about nutrition claim to have excellent eating habits, compared with less than one in ten (7%) of those who say they are not very or not at all knowledgeable.
- Canadians with higher levels of education and household income are more likely (55% and 46%, respectively) than those with lower levels (31% and 34%, respectively) to indicate having excellent or very good eating habits. This result also holds for overall health.

Table 10: Self-Rated Eating Habits by Knowledge about Nutrition

	Knowledge about Nutrition			
	Total (2014)	Not at all/Not very (234)	Somewhat (1226)	Very (548)
Excellent	10	7	6	21
Very Good	32	20	30	43
Good	40	36	46	26
Fair	13	24	14	6
Poor	4	12	3	3

Note: value is percentage; number of cases in parentheses

Q.4 In general would you say that your eating habits are excellent, very good, good, fair or poor?

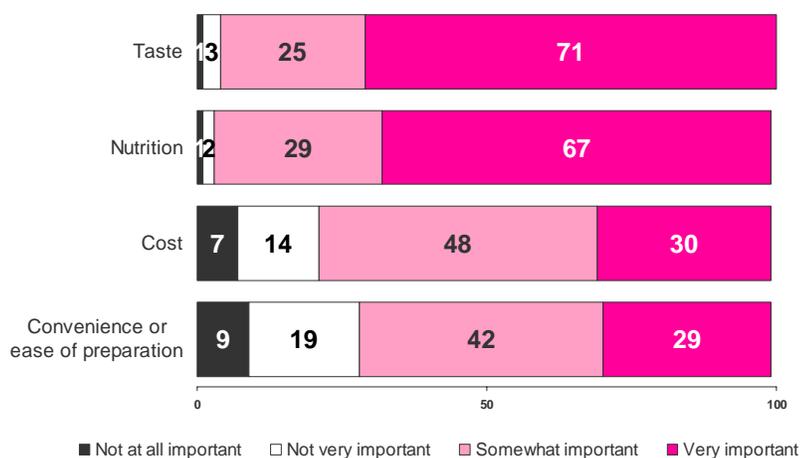
Detailed Findings

Taste, Nutrition, Cost and Convenience

When selecting food, taste is the most important consideration for most Canadians (71%), followed by nutrition (67%). This pattern of importance is markedly similar to the previous TNT V survey (72% and 65%, respectively). When it comes to cost and the convenience or ease of preparation, most are inclined to find these factors somewhat important (48% and 42%, respectively), a modest change from TNT V (46% and 45%, respectively).

Exhibit 11

Importance of Factors on Food Choice



Q.9 Please tell me how important each of the following factors is to you when choosing the food you eat.
Would you say that it is very important, somewhat important, not very important, or not at all important?

Base: Total Canadians, n=2014

Although a large proportion of people say nutrition is important to them when making food choices, considerable variation exists in the emphasis that different demographic groups in society place on nutrition versus other considerations.

- The lower the level of education and household income, the greater the emphasis is on cost and the ease of preparation (Table 11). As is to be expected, those with lower incomes must by necessity take cost into consideration. The reverse is apparent for nutrition, and to a lesser degree, taste. The findings suggest that households with lower levels of education and income are more likely not to respond to communications that focus on nutrition only.
- Canadians claiming to have fair or poor eating habits are most likely (41%) to identify cost as important compared with those professing excellent or very good eating habits (24%). Nutrition is very important for people who believe they already have good eating habits compared with those whose eating habits are poor (80% and 47%, respectively).

- Women are more likely to emphasize nutrition than men; seventy-five per cent of women say nutrition is very important, compared with fifty-nine per cent of men.
- Nutrition is much more important for older Canadians. More than seven in ten of those over the age of 45 years say nutrition is very important, compared with only half (52%) of those under 25 years who indicate the same.

Table 11: Importance of Factors on Food Choice by Education and Income
(Very Important)

	Education						
	Total	Some High School	Grad. High School	Some Post Sec.	Grad. College	Grad. Univ.	Post Grad.
	(2014)	(257)	(454)	(201)	(435)	(366)	(251)
Taste	71	69	71	68	71	71	76
Nutrition	67	64	61	61	69	72	74
Cost	30	48	36	31	32	17	17
Convenience or ease of preparation	29	39	31	37	26	27	21

	Income			
	Total	Under \$35K	\$35K-\$49K	\$50K or more
	(2014)	(408)	(283)	(923)
Taste	71	68	74	71
Nutrition	67	63	66	67
Cost	30	50	37	21
Convenience or ease of preparation	29	35	35	25

Note: value is percentage based on Canadians who indicate the factor is very important ; number of cases in parentheses

Q.9 Please tell me how important each of the following factors is to you when choosing the food you eat. Would you say that it is very important, somewhat important, not very important, or not at all important?

Detailed Findings

Perceptions of What Makes a Food Healthy

Canadians associate the healthfulness of food with a number of diverse factors as reflected in a new question added in 2006. One in three mentions the presence of healthful ingredients such as whole grains, fibre, omega-3 fats and vitamins (Exhibit 12). To a lesser degree, 21 per cent mention low amounts or the absence of negative nutrients, including trans fats, salt and sugar, as factors that make a food healthy. Some Canadians also are likely to perceive fresh food formats and unprocessed food as healthy (21%).

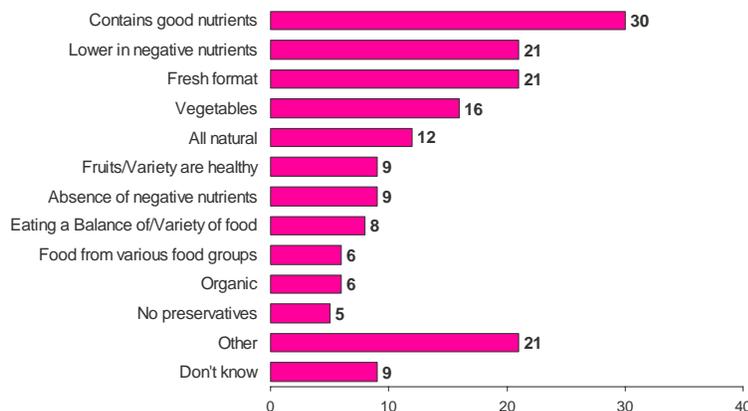
Vegetables are seen as healthy foods, and incorporating a variety of vegetables in the diet resonates as a healthy diet pattern among Canadians (16%). As we note later, when it comes to changing one's food choices, eating more fruits and vegetables is key from the public's perspective.

Other factors include natural food (12%) and fruit or a variety of fruit (9%). Nine per cent mention content such as the absence of trans fats, saturated fat and salt as being "healthy". Mentions also include a balance and variety of food (8%), food from various food groups (6%), organic produce (6%) and no preservatives (5%) as factors that make food healthy. Finally, a large group of *Other mentions* (21%) includes a variety of factors such as: meat, particularly lean meats, chicken without the skin, consuming smaller portions and little or no meat (5%); homemade and homegrown food (2%); and low(er) calorie foods (1%). A small percentage of the population (9%) has no opinion on what makes a food healthy.

Canadians who are more mindful of their eating habits and who read labels are most inclined to think of health in terms of nutrients. For example, those who usually read labels are most likely to mention fresh format (27%) as a factor that makes a food healthy compared with those who read labels "only the first time" or "never" (16%).

Exhibit 12

Factors Making Food “Healthy”



Q.7 What makes a food “healthy”? (open-ended)

Base: Total Canadians, n=2014

Factors Affecting Food Choice

A choice of food can reflect both health considerations and food considerations. Whereas food considerations relate to the presence or absence of a particular attribute of a food, health considerations start with the individual person’s goal in choosing food to eat. In general, health considerations, especially the notion of maintaining good health, are more influential than those relating to food attributes.

Health Considerations

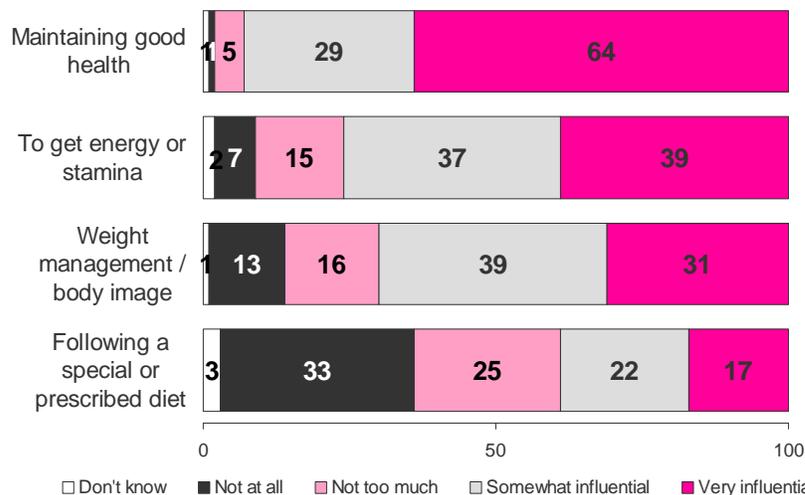
According to Canadians, the primary factor influencing their choice of food is maintaining good health (Exhibit 13). Almost two in three (64%) say that this is very influential, and more than one in four (29%) say it is somewhat influential. Few do not consider maintaining good health as being influential (6%).

When asked about other factors, the results are more varied. Overall the next most influential factor is whether a food provides energy and stamina (39% very influential), followed by weight loss or body image (31% very influential) and following a prescribed diet (17% very influential). Good health is what Canadians care about as an overarching motivator but significant groups of Canadians care about getting energy from their food and having their food choices help in weight management.

Detailed Findings

Exhibit 13

Influences on Food Choice (Health-Related)



Q.8A When you are selecting food to eat, to what degree, if any, does each of the following influence your food choice? **Base:** Total Canadians, n=2014

Food Considerations

Six of the factors tested involved a food attribute (Exhibit 14). Whether a food contains whole grains is the most influential (50% find this attribute very influential). The next most influential factor is omega-3 fatty acids (27%), followed by food that has added healthful ingredients such as calcium or soy (21%).

Results for the remaining three food-related factors show that more people are not influenced at all than are influenced a lot (very influential). Whether a food is organically grown (21%), has a low glycemic index (17%) or is produced using biotechnology (10%) are factors that are very influential for a minority but not influential at all for a large proportion of Canadians.

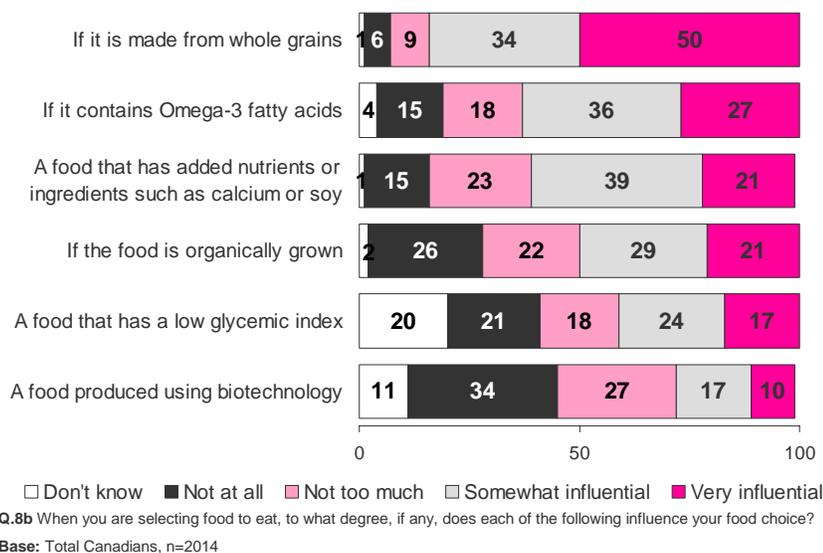
In addition, the results suggest that people who see themselves as more health- and nutrition-oriented are more influenced by these factors. For example:

- The fact that a food is organically grown is slightly more influential for women compared with men (54% and 47%, respectively); people who always check labels versus those who almost never do (61% and 41%, respectively); and those who think that their eating habits are excellent or very good compared with those who report poor eating habits (56% and 41%, respectively). In other words, people who emphasize nutrition in their life choices say that they are influenced by whether a food is organic.

- Whether a food is produced using biotechnology is more influential for those who check labels frequently compared with those who rarely do (34% and 21%, respectively); those who have a higher level of perceived nutrition knowledge versus a low level (37% and 19%, respectively); and those who see themselves as having excellent eating habits compared with poor habits (29% and 23%, respectively).

Exhibit 14

Influences on Food Choice (Food-Related)



Interestingly, one in five does not know whether a food having a low glycemic index influences their choice of food. Although the size of the “don’t know” group is lower than in TNT V (20% versus 23%, respectively), it continues to reflect the low level of public awareness of the glycemic index at this time. A lack of awareness of the glycemic index is related to other indicators of knowledge generally and about nutrition specifically.

- While almost 30 per cent of those who did not complete high school do not know if a low glycemic index influences their food choice (down from 40% in TNT V), only about one in six of those with university education does not know. Among those with higher levels of formal education, the glycemic index is therefore more influential (45% of those with at least a university degree say the index is at least somewhat influential).
- The index also is more widely known and more influential among those who claim to be very knowledgeable about nutrition compared with those who say they are not (56% and 20%, respectively).

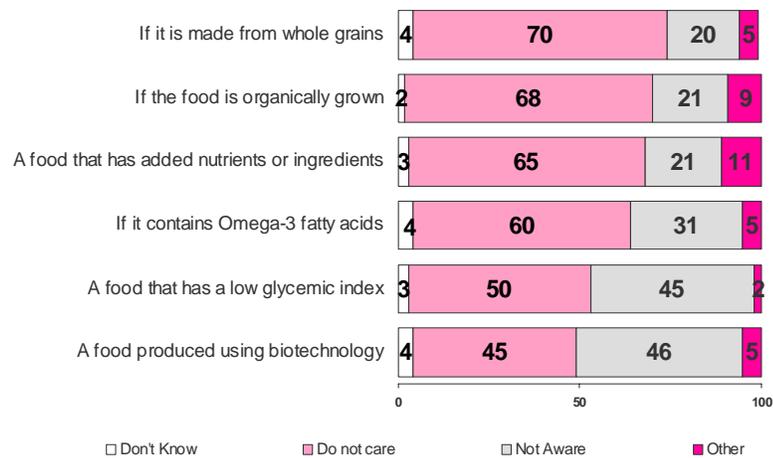
Detailed Findings

Reason Why Some Food Characteristics are Not Influential

Although a lack of awareness of the health benefits is a logical reason for not being influenced by a food characteristic, among those who are not influenced (Exhibit 15), most say that they do not care about the health considerations (60% to 70% do not care, depending on the characteristic). The only factors for which lack of awareness seems to be related to a lack of influence are whether a food is produced using biotechnology (46% not aware), or whether it is a food that has a low glycemic index (45% not aware).

Exhibit 15

Food Characteristics Not Perceived as Influential



Q.8c I am going to list a series of food characteristics that you do not find influential. Please tell me if they do not influence your food choice because you are not aware of the health benefits or you do not care about the health benefits.

Base: Not too much/Not at all influenced by food characteristics, n=939

Selection of Food Based on Nutrient Content

While Canadians are able to make judgments about the relevant importance or influence of different food and nutrition factors on their food choices, many decisions reflect more specific nutrition information, such as the amount of fibre or the amount of calories in a food. This section shows the frequency with which the Canadians who think nutrition is important select food based on fourteen different nutrients. The results indicate that the various nutrients often are used in selecting foods and that among Canadians who think nutrition is important, people care more about fibre, protein, vitamins, total fat and saturated fat than they do about iron, salt, cholesterol, carbohydrates and trans fat.

In general, the TNT VI results show that, for each nutrient, those who consider nutrition important to them are more likely than in previous years to think their food choice is at least sometimes based on the amount of the nutrient (Table 12). The ranking of nutrients is very similar to the past results, with one major exception to the pattern, trans fatty acids.

Food choices based on trans fatty acids continue to significantly increase in relation to the other listed food contents. The findings show that Canadians are twelve percentage points more likely than in TNT V, and 22 percentage points higher than in TNT IV, to often or sometimes consider the presence or absence of this nutrient. Those with higher levels of education and household income are more likely to choose a food based on this factor.

Table 12: Choice of Foods based on Various Nutrients

	Percentage Often		Percentage Often and Sometimes		
	2006 (1954)	2004 (2304)	2006 (1954)	2004 (2304)	Difference
Fibre	54	50	82	76	+6
Protein	48	48	79	75	+4
Vitamins	45	46	77	73	+4
Total fat	47	45	74	70	+4
Saturated fat	45	45	71	67	+4
Sugar	45	43	74	70	+4
Calcium	38	41	71	70	+1
Cholesterol	40	40	67	64	+3
Calories and energy	40	39	76	71	+5
Salt and sodium	34	35	63	60	+3
Carbohydrate	31	35	66	64	+2
Trans fatty acids	42	34	68	56	+12
Iron	27	27	59	55	+4

Note: value is percentage based on Canadians who think that nutrition is at least somewhat important; number of cases in parentheses

Q.12 How often, if ever, do you select the foods that you eat based on the amount of a specific nutrient that the food contains? As I read you each item, please tell me whether you select the foods based on the content of this nutrient often, sometimes, rarely or never.

Detailed Findings

Importance of Added Vitamins and Minerals on Food Selection

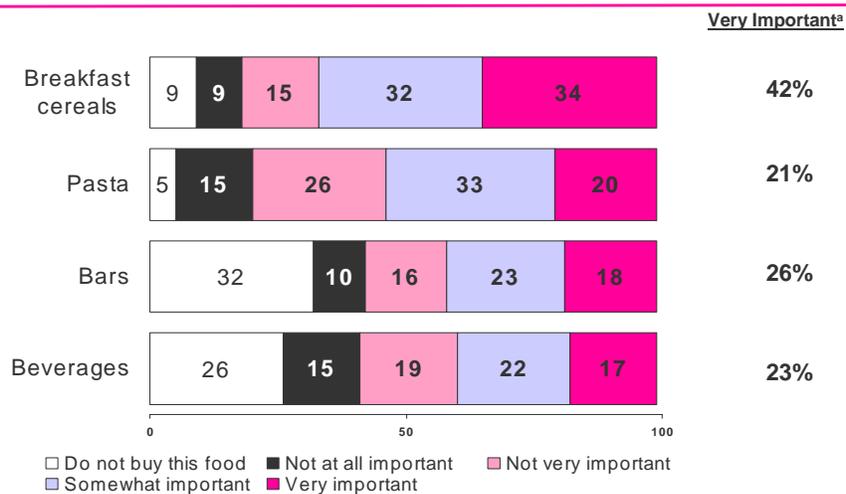
For a majority of Canadians, it is important to know if a food contains added vitamins and minerals.⁵ Some differences exist in how important this information is by product type. When selecting breakfast cereals, 66 per cent consider this content, followed by pasta (52%) and bars (41%). Many people stated not buying these products; thus Exhibit 16 also shows the percentage eating each of these foods who rank vitamins and minerals as very important.

There are some demographic differences among those who consider added vitamins and minerals very important:

- Younger Canadians (18 to 24 years) are most likely to find vitamins and minerals very important when selecting bars and beverages and less important for breakfast cereals and pasta; this observation is largely a function of their relative consumption of these products.
- Canadians who always read labels are more likely than those who read them rarely to think it is very important for a food to have added vitamins and minerals. Thus 45 per cent of those who always read labels consider the presence of added vitamins and minerals in breakfast cereals to be very important compared with 27 per cent of those who rarely read labels.

Exhibit 16

Importance of Vitamins and Minerals in Food



Q.13 Some foods contain added vitamins and minerals. How important is it for you to know if the following foods contain added vitamins and minerals? Would you say that it is very important, somewhat important, not very important, not at all important, or do you not buy these types of foods.

^a Re-percentage to remove people who do not buy the product.

Base: Total Canadians, n=2014

⁵ This is a new question added to TNT VI.

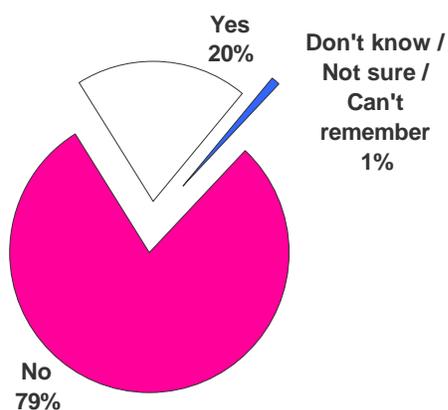
Awareness of Functional Foods

Functional foods are a relatively new area of nutrition and the TNT VI survey added a question to examine awareness. Although some Canadians are becoming more familiar with functional foods for various reasons, such as a greater understanding of diet/disease links and how functional foods can be beneficial, four in five Canadians state that they have not heard of functional foods (Exhibit 17).

- Although awareness is low for all groups, higher education is associated with a higher likelihood of being aware. For example, 25 per cent of those with at least some post-graduate education are aware of functional foods.
- Those who rate themselves as having very good or excellent overall health, eating habits and nutrition knowledge are also more likely to be aware of functional foods.

Exhibit 17

Awareness of Functional Food



Q.14 Some foods that are part of our usual diet are called functional foods because they have additional benefits and reduce the risk of chronic disease beyond providing nutrients. Have you ever heard about functional foods before this survey?

Base: Total Canadians, n=2014

Lifestyle-Related Choices

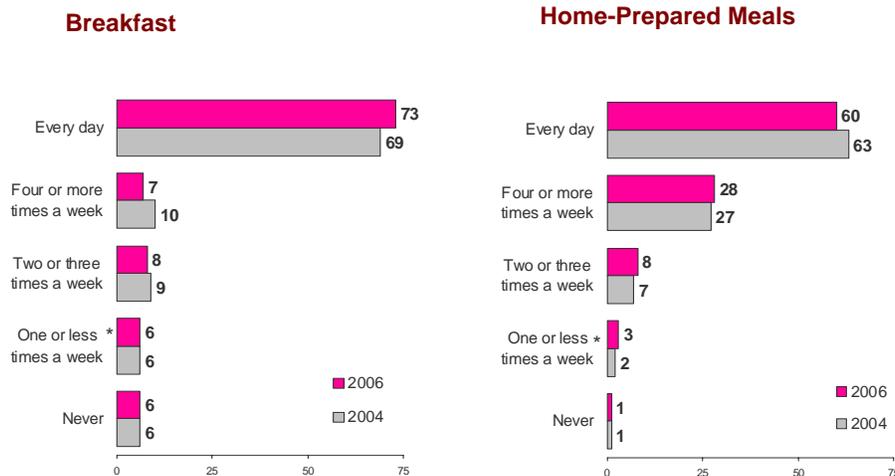
The previous sections have provided a sense of how Canadians currently understand nutrition, make choices about food and rate their own health. This final section goes beyond specific food choices to examine how Canadians are making lifestyle choices.

Eating Meals Prepared at Home versus Out

To get a better understanding of eating patterns, the TNT V and TNT VI surveys asked how often Canadians eat breakfast, eat meals prepared at home, go out to eat or order take-out or home-delivered meals.⁶ Home-prepared meals provide meal planners with the opportunity for greater flexibility in making nutrition-related food choices, including how to prepare the food and the size of portions to serve. However, it is possible to obtain nutritious meals outside of the home just as it is possible to prepare meals with less nutritious content in the home.

Exhibit 18a

Frequency of Meal Types



Q.26 Please tell me how often in a typical week you do the following.

*Original answer list given to respondents included: less than once a week and once per week. This has been reduced in the reporting.

Base: Total Canadians, n=2014

Three in four Canadians eat breakfast every day (73%), a minimal increase since TNT V (69%). Six in ten eat home-prepared meals daily (63% in 2004) and three in ten (28%) eat home-prepared meals at least four times per week (Exhibit 18a).

⁶ The TNT V item “eat take-out food” has been changed to “order take-out or home-delivered meals”.

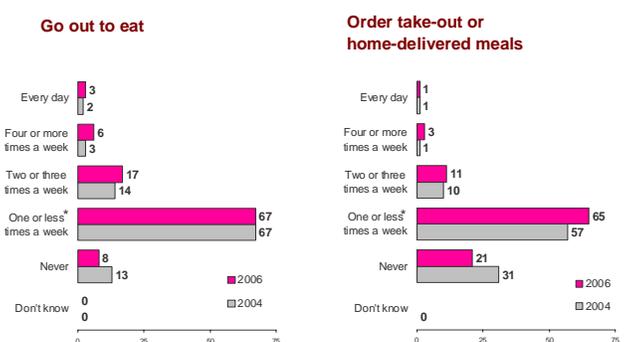
- Eating breakfast every day and eating home-based meals are more prevalent among those who claim to have good eating habits and to be very knowledgeable about nutrition. For example, almost 79 per cent of those who say they are in at least very good health eat breakfast every day. In comparison, only 63 per cent of those who feel they are in fair or poor health have a daily breakfast.
- French-speaking Canadians are more likely than English-speaking Canadians to eat breakfast every day (83% versus 69%, respectively).
- Women are more likely to eat both breakfast and home-prepared meals daily (77% and 63%, respectively) compared with men (68% and 57%, respectively). Canadians over the age of 65 years (Table 13) are also more likely to eat breakfast and home-prepared meals every day (89% and 71%, respectively) than are those under 25 years of age (58% and 47%, respectively).

With respect to eating out,⁷ few Canadians (Exhibit 18b) indicate eating out four or more times a week/every day at a restaurant (9%) or eating take-out food (4%). More significant numbers eat out two or three times a week at restaurants (17%) or eat take-out food (11%). The majority, however, eats at restaurants (67%) or eats take-out (65%) once or less per week.

- Eating out and eating take-out food are both related to household income. Low income households are more likely never to eat out at restaurants (13%) and never to eat take-out food (29%).
- Eating out or eating take-out food is also less likely among older Canadians (Table 13). Forty-eight per cent of this group never eats take-out food.

Exhibit 18b

Frequency of Meal Types



Q.26 Please tell me how often in a typical week you do the following.
 *Original answer list given to respondents included: less than once a week and once per week. This has been reduced in the reporting.
 Base: Total Canadians, n=2014

⁷ To account for Canadians who might classify a restaurant differently from a fast food outlet or cafeteria, the TNT VI survey has replaced “go out to restaurants” with “go out to eat”.

Detailed Findings

Table 13: Frequency of Meal Types by Age

	Total (2014)	Age			
		18-24 (204)	25-44 (767)	45-64 (701)	65+ (342)
Eat breakfast					
Daily	73	58	68	75	89
Four or more times a week	7	14	8	6	3
Two or three times a week	8	12	9	7	4
Eat home-prepared meals					
Daily	60	47	60	61	71
Four or more times a week	27	36	27	29	21
Two or three times a week	8	14	8	7	7
Go out to eat					
One or less times a week*	67	60	65	70	69
Two or more times a week	26	34	28	22	21
Order take-out or home-delivered meals					
One or less times a week*	65	66	71	67	45
Two or more times a week	14	22	18	11	7

Note: value is percentage; number of cases in parentheses

*Original answer list given to respondents included: less than once a week and once per week. This has been reduced in the reporting.

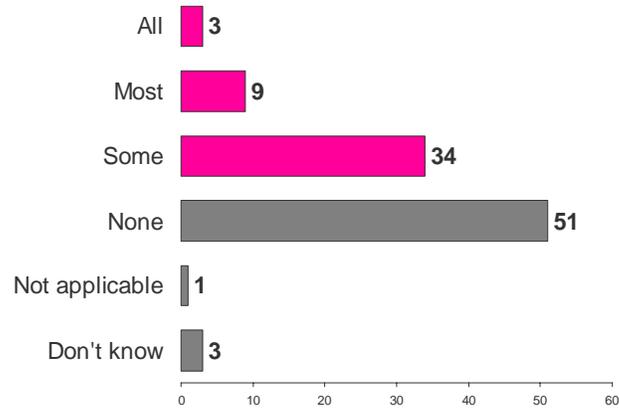
Q26 Please tell me how often in a typical week you do the following.

Availability of Nutrition Information When Eating Out

For those who eat out at least once per week, slightly more than half (51%) claim that nutrition information is unavailable when eating out, while 34 per cent perceive the information as being available at some of the places.

Exhibit 19

Nutrition Information When Eating Out



Q.27 When eating out, nutritional information of the food served can be found in a number of places: on the menu, on poster boards or other signs, on brochures and on the tray liner. Thinking about the places that you go out to eat, would you say that all, most, some or none of them have nutritional information about their food available?

Base: Eat out at least once per week, n=929

Detailed Findings

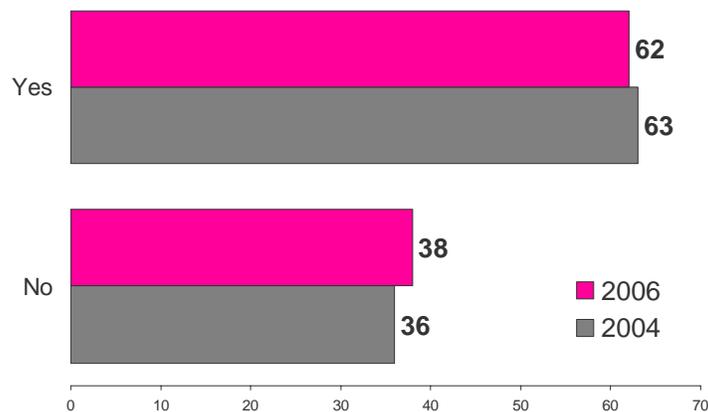
Personal Changes to Eating Habits

The majority (62%) of Canadians have made changes to their eating habits in the past year (Exhibit 20). This mirrors the results obtained in the TNT V (63%) and TNT IV (62%) surveys; at the same time there now is a heightened tendency for certain groups to change their eating habits:

- Women are slightly more likely to have changed their eating habits than men (66% compared with 57%).
- Seniors are less likely than youth to have changed their eating habits (48% compared with 70% of those under the age of 25 years).
- Socioeconomic status is only weakly tied to changes in eating habits. There is no significant difference due to household income. The greater the level of education, however, the more likely the person is to have incorporated a change in eating habits.

Exhibit 20

Changed Eating Habits in Past Year



Q.22 Have you made any changes over the past year to improve or change your eating habits?

Base: Total Canadians, n=2014

Type of Change or Improvement

Among those who have changed their eating habits in the past year, no single type of change has occurred. Rather, changes and improvements are varied and diverse, a finding that is consistent with the results from the previous surveys. There is, however, a notable pattern and the occasional change from last year in eating habits.

Thirty-five per cent of Canadians think of their diet changes in terms of increasing the amount of fruits and vegetables they consume (Exhibit 21). This mention has modestly increased from the TNT V study where fruits and vegetables accounted for 32 per cent of the mentions.

Trying to consume less fat is also important for many Canadians (20%). Almost one in five (19%) tried to reduce sugar intake and 15 per cent to eat more fibre, whole grain or roughage. Some tried to reduce calorie intake (12%); eat more natural food, food with less chemicals, less processed food or less fast food (10%); consume less trans fat (8%); reduce salt intake (8%); restrict carbohydrates (8%) and eat well-balanced healthy meals (6%).

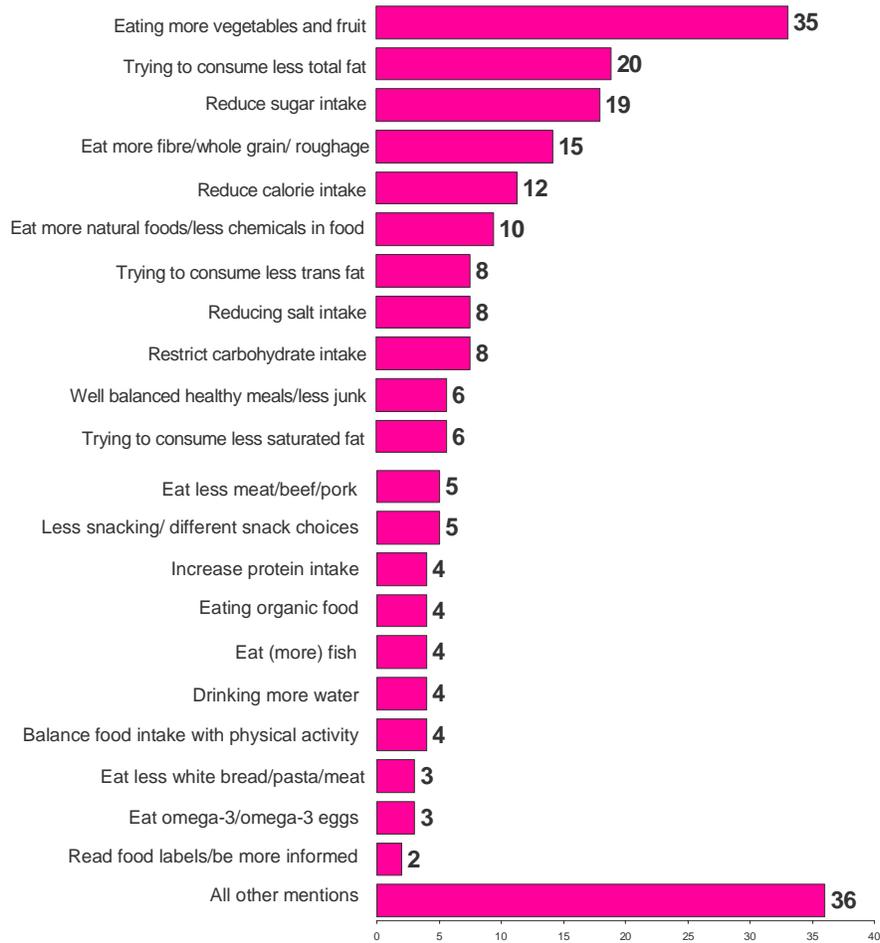
The various changes and improvements demonstrate a wide array of general knowledge Canadians who changed their eating habits have on the value of nutrition and healthful eating. Over the past three iterations of TNT surveys, there have been more and more mentions of increasing intake of fruits and vegetables. The proportion of people who say they are reducing their carbohydrate intake more than doubled between TNT IV and TNT V (from 7% to 16%) but it has fallen now to 8 per cent. Though Canadians who have changed their habits are preoccupied with fat (20%), fewer have made an attempt to eat less trans fatty acids (8%), the same as in TNT V.

Meanwhile, other mentions remain virtually unchanged from the TNT V survey results, including trying to eat less meat (4% in TNT V; 5 % in TNT VI), eat organic food (4% in both TNT V and TNT VI) and drink more water (2% in TNT V; 4% in TNT VI).

Detailed Findings

Exhibit 21

Type of Change or Improvement to Eating Habits



Q.23 What has been the most significant change(s) you have made to improve or change your eating habits over the past year?

Base: Made changes to eating habits in past year, n=1272

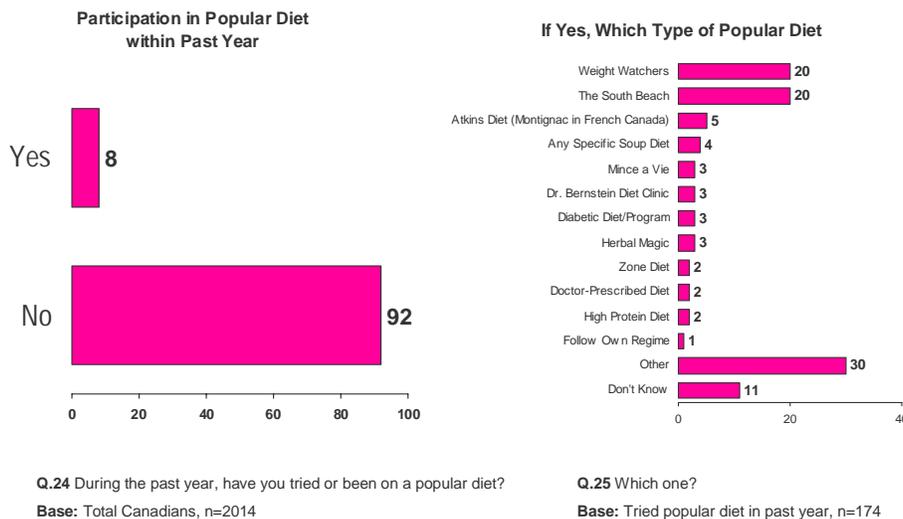
Popular Diets

Less than one in ten (8%) Canadians has tried or been on a “popular” diet during the past year (Exhibit 22). The results have remained unchanged since the TNT V survey. It could be that Canadians continue to engage in more long-term approaches that reflect healthy lifestyle choices, including eating habits such as increasing intake of fruits and vegetables, decreasing fat intake and generally being nutrition- and health-conscious, as discussed earlier. Of course, it may also reflect the tendency for some Canadians not to deal with their weight issue.

For those who have tried a popular diet in the past year, 20 per cent have equally followed the Weight Watchers (compared with 21% in TNT V) and the South Beach diet (compared with 9% in TNT V). The Atkins Diet (5%) has lost considerable appeal when compared with the TNT V results (33%).

Other diets include any specific soup diet (4%), Mince a Vie (3%), Dr. Bernstein’s Diet Clinic (3%), a diabetic diet/program (3%), Herbal Magic (3%), and the Zone Diet (2%). Several other diets individually make up less than 2 per cent of the total mentions, such as TOPS (1%) and a diet from a specific health club/gym (1%).

Exhibit 22
Dieting

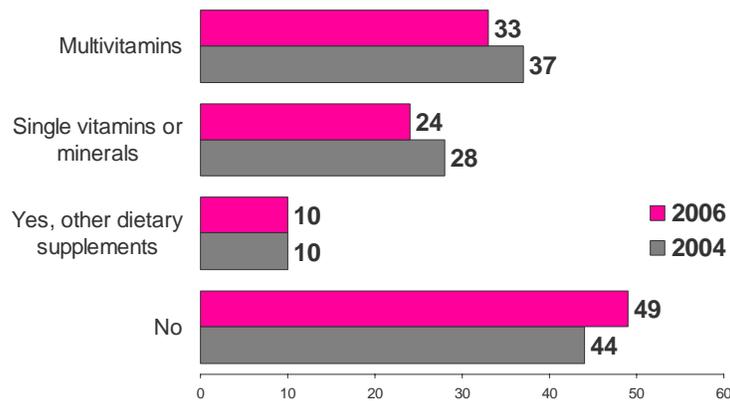


Use of Supplements

Slightly fewer Canadians in the TNT VI survey (51%) than in TNT V (56%) ingest some kind of vitamin, mineral or supplement (Exhibit 23). Multivitamins are the most popular (33%); however, multivitamin usage has modestly decreased since TNT V (37%). Similarly, slightly fewer Canadians take a single vitamin or mineral (24% in TNT VI versus 28% in TNT V). A significant minority of Canadians continues to take some other type of dietary supplement (10% in both the TNT V and TNT VI surveys). These dietary supplements remain quite diverse and include, for example, calcium, protein powder, garlic, and ginseng.

Exhibit 23

Use of Vitamin or Supplement



Q.28 Do you use any vitamins, herbal supplements, or other dietary supplements?

Base: Total Canadians, n=2014

The use of vitamin, mineral and/or other supplements varies by demographic group, with men, younger Canadians, Quebec residents, and those from lower socioeconomic groups being less likely to take a supplement.

- The use of vitamin, mineral and/or other supplements is associated with age. A majority (58%) of young Canadians (under 25 years) takes no supplement; use increases with age such that only one in three (35%) seniors reports not using any supplement.
- Consistent with the findings about self-rated health and education, those who have lower levels of formal education and those with lower levels of household income are less likely to take vitamin, mineral and/or other supplements. For example, Canadians with at least some post-graduate education are more likely to use multivitamins (42%) than are those with some high school education (28%).

- Men are more likely than women not to take any form of vitamin, mineral and/or other supplement (58% and 41%, respectively).
- In addition, those who rate their eating habits better and those who claim to be knowledgeable about nutrition are more likely to use vitamin, mineral and/or other supplements. For example, Canadians who say they are very knowledgeable about nutrition (37%) are more likely than those with little knowledge (20%) to use multivitamins.
- Residents of Quebec are less likely to use single vitamin or mineral supplements (14%) than are Canadians in the British Columbia region (34%).

Appendix 1: Questionnaire

English

Serial: Q,
QT

RANGE 1 .. 99999 DEF 99999,
Serial number

Hello, my name is [INTERVIEWER] and I'm calling from TNS Canadian Facts, an international research company. Today we are conducting a survey about nutrition and would like to ask you some questions. The study will take approximately 15 minutes to complete and I can assure you that we are not selling anything.

To randomly select a person in your household , may I speak to the individual living in your household, who is 18 years or older who had the most recent birthday, and is presently at home.

USE STANDARD CALL OUTCOME CODING

WHEN SPEAKING TO CORRECT PERSON

REPEAT INTRO IF NECESSARY

Please be aware this call may be monitored for quality control purposes.

Q3: S,
QT

RECORD GENDER OF RESPONDENT

(DO NOT READ)

AL

MALE
FEMALE

SECTION 1 - EATING HABITS

Q4: S,

QT

In general would you say that your eating habits are excellent, very good, good, fair or poor?

DO NOT READ DON'T KNOW

AL

Excellent

Very good

Good

Fair

Poor

DON'T KNOW

Q5: S,

QT

How would you assess your overall health?

READ LIST IF NECESSARY

DO NOT READ DON'T KNOW

AL

Excellent

Very good

Good

Fair

Poor

DON'T KNOW

Appendix

Q6: S,

QT

Are you the primary meal planner in your household?

READ ANSWER LIST IF NECESSARY

DO NOT READ DON'T KNOW

AL

Yes

No

Shared equally

DON'T KNOW

SECTION 2 - ATTITUDES ABOUT FOOD AND NUTRITION

Q7: S,

QT

What makes a food "healthy"?

RECORD FIRST THREE MENTIONS

DO NOT READ LIST

AL

Absence of negative nutrients (trans free, sat fat free, salt free)

Lower in negative nutrients (trans, fat, salt, sugar)

Contains good nutrients (whole grains, fibre, omega 3, vitamins and minerals)

Fresh format (not processed)

No preservatives, artificial flavour or colour, no MSG

Organic

Natural, all natural

GMO Free

Has an endorsement on pack (third party)

Has company endorsement on pack (manufacturer logo)

OTHER SPECIFY

Q8A: S,

QT

When you are selecting food to eat, to what degree, if any, does each of the following influence your food choice?

(How much influence is...)

RANDOMIZE MT LIST

READ ANSWER LIST AS OFTEN AS NECESSARY

DO NOT READ "DON'T KNOW" OR "REFUSED"

AL

Very influential

Somewhat influential

Not too much

Not at all

DON'T KNOW

REFUSED

RANDOMIZE LIST

Maintaining good health

Following a special or prescribed diet

Weight Management/Body Image

To get energy or stamina

Appendix

Q8B: S,

QT

When you are selecting food to eat, to what degree, if any, does each of the following influence your food choice?

(How much influence is...)

RANDOMIZE MT LIST

READ ANSWER LIST AS OFTEN AS NECESSARY

DO NOT READ "DON'T KNOW" OR "REFUSED"

NOTE TO INTERVIEWERS: IF RESPONDENT IS NOT AWARE OF WHAT LOW GLYCEMIC INDEX IS, PLEASE CODE AS "DON'T KNOW"

DO NOT READ "DON'T KNOW" OR "REFUSED"

AL

Very influential

Somewhat influential

Not too much

Not at all

DON'T KNOW

REFUSED

RANDOMIZE LIST

If the food is organically grown

A food that has added nutrients or ingredients such as calcium or soy

A food produced using biotechnology

A food that has a low glycemic index

If it is made from whole grains

If it contains Omega-3 fatty acids

IF "NOT AT ALL" OR "NOT TOO MUCH" TO ANY OF THE FOOD CHARACTERISTICS LISTED ASK Q8C OTHERS SKIP TO Q9.

READ ONLY THOSE THAT RESPONDENT ANSWERED "NOT TOO MUCH" OR "NOT AT ALL"

Q8C: S,

QT

I am going to list a series of food characteristics that you do not find influential. Please tell me if they do not influence your food choice because you are not aware of the health benefits or you do not care about the health benefits.

AL

- Not Aware
- Do not care
- OTHER SPECIFY (VOLUNTEERED)
- Don't know

- If the food is organically grown
- A food that has added nutrients or ingredients such as calcium or soy
- A food produced using biotechnology
- A food that has a low glycemic index
- If it is made from whole grains
- If it contains Omega-3 fatty acids

Appendix

Q9: S,

QT

ASK ALL

Please tell me how important each of the following factors is to you when choosing the food you eat. Would you say that it is very important, somewhat important, not very important, or not at all important?

(How important is...)

RANDOMIZE MT LIST

READ ANSWER LIST AS OFTEN AS NECESSARY

DO NOT READ "DON'T KNOW" OR "REFUSED"

AL

Very Important

Somewhat important

Not very important

Not at all important

DON'T KNOW

REFUSED

Nutrition

Taste

Convenience or ease of preparation

Cost

Q10: S,

QT

How knowledgeable would you say you are about nutrition?
Would you say you are...?

READ LIST.

DO NOT READ NO OPINION - DON'T KNOW

AL
 Very knowledgeable
 Somewhat knowledgeable
 Not very knowledgeable
 Not at all knowledgeable
 NO OPINION - DON'T KNOW

Q11: M*
 OPEN,

QT
 Could you name food safety issues that concern you personally?

OPEN ENDED. TAKE UP TO THREE MENTIONS.

IF AT Q9 "NUTRITION" IS "VERY IMPORTANT" OR "SOMEWHAT IMPORTANT", ASK Q12.

OTHERS SKIP TO Q13.

Q12: S,
 QT

How often, if ever, do you select the foods that you eat based on the amount of a specific nutrient that the food contains? As I read you each item, please tell me whether you select the foods based on the content of this nutrient often, sometimes, rarely or never.

RANDOMIZE MT LIST

READ ANSWER LIST AS OFTEN AS NECESSARY

DO NOT READ "DON'T KNOW"

AL
 Often
 Sometimes
 Rarely
 Never
 DON'T KNOW

RANDOMIZE LIST

Calories/Energy

Total Fat

Saturated Fat

Trans Fatty Acids

Cholesterol

Carbohydrate

Fibre

Sugar

Protein

Salt/Sodium

Vitamins

Iron

Calcium

ASK ALL

Q13: S,

QT

Some foods contain added vitamins and minerals. How important is it for you to know if the following foods contain added vitamins and minerals? Would you say that it is very important, somewhat important, not very important, not at all important, or do you not buy these types of foods.

RANDOMIZE LIST

AL

Very important

Somewhat important

Not very important

Not at all important

I do not buy this type of food

DON'T KNOW

	<p>Pasta</p> <p>Bars (if asked, energy/snack/cereal)</p> <p>Breakfast cereals</p> <p>Beverages such as flavoured drinks or carbonated beverages</p>
Q14: S,	
QT	<p>Some foods that are part of our usual diet are called functional foods because they have additional benefits and reduce the risk of chronic disease beyond providing nutrients. Have you ever heard about functional foods before this survey?</p>
AL	<p>YES</p> <p>NO</p> <p>DON'T KNOW</p>
Q15: S,	
QT	<p>I will read you some statements. Please tell me whether you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree or strongly disagree with each of the following statements.</p>
	<p>RANDOMIZE MT LIST</p> <p>READ ANSWER LIST AS OFTEN AS NECESSARY</p> <p>DO NOT READ "DON'T KNOW"</p>
AL	<p>Strongly agree</p> <p>Somewhat agree</p> <p>Neither</p> <p>Somewhat disagree</p> <p>Strongly disagree</p> <p>DON'T KNOW</p>

RANDOMIZE LIST

Some types of dietary fibre can help reduce cholesterol in your blood.

Trans fatty acids have the same effect as saturated fat.

Reducing fat in the diet can lower cholesterol in the blood.

A high fibre diet may help prevent colon cancer.

The amount of cholesterol people eat is the major factor that affects their blood cholesterol.

Non-hydrogenated or soft margarine contains less fat than butter.

Hard, stick margarine is better for you than soft margarine.

The glycemic index ranks carbohydrate foods on how they affect our blood glucose levels.

Omega-3 fatty acids are essential to a healthy diet.

SECTION 3 - SOURCES OF INFORMATION

Q16: S,

QT

People can get information about food and nutrition from a number of different sources. Please tell me from which of the following sources you personally got information on food and nutrition in the past year.

(Did you get food and nutrition information in the past year from..
INSERT MT?)

RANDOMIZE MT LIST

DO NOT READ "DON'T KNOW"

AL

YES

NO

DON'T KNOW

RANDOMIZE LIST

A Family Physician or other health professional

A Dietitian

Magazines, newspapers, and books

Government Materials

Food Company Materials or advertisements

Radio/TV Programs

Food product labels

Friends/Relatives/Colleagues

Fitness/Weight Loss Programs

Health Association Materials(Cancer/Heart/Diabetic Association)

The Internet or the Web

SECTION 4 - LABELLING

Q17: S,

QT

Thinking specifically about labels on the various food products you buy (other than brand name or flavour), how often do you read the labels? Would you say that you always, usually, sometimes, only the first time you buy a product, or never read the labels?

AL

Always

Usually

Sometimes

Only the first time I buy a product/brand

Never

Appendix

IF OTHER THAN "NEVER" AT Q17 ASK Q18, Q19 AND Q20
IF "NEVER" AT Q17 SKIP TO Q21

Q18: S,

QT

When you are looking at the labels, which of the following do you look for?

READ LIST EXCEPT "NONE OF THESE"

AL

The nutrition facts table or nutrition information panel

Ingredients

Nutrient claims such as the amount of a particular ingredient

Health claims such as statements on the benefits of eating the food for your health

A healthy or better choices slogan, symbol or logo

NONE OF THESE

Q19: S,

QT

When you look at the Information on food packages, either in the store or at home, how often, if at all, do you use the information provided in the following ways. Would you say often, sometimes, rarely or never?

(How often do you use the information...)

RANDOMIZE MT LIST

READ ANSWER LIST AS OFTEN AS NECESSARY

DO NOT READ "DON'T KNOW"

AL

Often

Sometimes

Rarely

Never

DON'T KNOW

- a) to compare different types of foods with each other, for example, to compare granola bars and cookies.
- b) to compare similar types of foods with each other, for example, to compare two different brands of crackers.
- c) to figure out how much of a food product you or your family should eat.
- d) to get a general idea of the calorie content of a food.
- e) to see whether the food contains a specific ingredient.
- f) to see whether the food contains nuts.
- g) to see how much of a nutrient is in a product, such as the amount of fat, carbohydrate, fibre or vitamins.
- h) to find foods that claim to be good for your health (for example, "A healthy diet rich in a variety of vegetables and fruit may help reduce the risk of some types of cancer").
- i) to see whether the food is organic.

Q20: S,

QT

When you look for nutrition related information on the label, how often can you generally find the information you need?

READ ANSWER LIST

DO NOT READ "DON'T KNOW"

AL

Often

Sometimes

Rarely

Never

DON'T KNOW

Appendix

	ASK ALL
Q21A: S, QT	Are there any particular claims or statements made by food companies regarding the nutritional or health benefits of their food that attracted your attention over the past 12 months?
AL	YES NO DON'T KNOW
	ASK Q21B IF "YES" TO Q21A OTHERS GO TO Q22
Q21B: M* OPEN, QT	What was the food claim or statement that attracted your attention?
	SECTION 5 - LIFESTYLE
	ASK ALL
Q22: S, QT	Have you made any changes over the past year to improve or change your eating habits?
AL	DO NOT READ LIST YES NO DON'T KNOW - NOT SURE - CAN'T REMEMBER

Q23: S,

QT

IF YES TO Q22 ASK Q23

IF NO OR DON'T KNOW AT Q22 SKIP TO Q24

What has been the most significant change(s) you have made to improve or change your eating habits over the past year?

DO NOT READ LIST. ACCEPT ALL MENTIONS

PROGRAMMER NB OTHER SPECIFY

AL

INCREASE PROTEIN INTAKE

RESTRICT CARBOHYDRATES INTAKE

REDUCING SALT INTAKE

TRYING TO CONSUME LESS TOTAL FAT

TRYING TO CONSUME LESS SATURATED FAT

TRYING TO CONSUME LESS TRANS FAT

EATING MORE VEGETABLES

EATING MORE FRUITS

EATING ORGANIC FOOD

LESS SNACKING

DIFFERENT SNACK CHOICES

REDUCE SUGAR INTAKE

REDUCING CALORIE INTAKE - EATING LESS - WATCHING WEIGHT

REDUCING CAFFEINE INTAKE

TAKING VITAMINS - MINERAL SUPPLEMENTS

EAT MORE FIBRE/ROUGHAGE

EAT MORE WHOLE GRAINS

EAT YOGURT

BALANCE FOOD INTAKE WITH PHYSICAL ACTIVITY

OTHER DIET-RELATED (SPECIFY)

DON'T KNOW (VOLUNTEERED)

Appendix

	ASK ALL
Q24: S, QT	During the past year, have you tried or been on a popular diet?
AL	Yes No Refused
	IF YES TO Q24 ASK Q25 OTHERS SKIP TO Q26
Q25: S, QT	IF YES TO Q24 Which one?
AL	DO NOT READ LIST ACCEPT ALL MENTIONS WEIGHT WATCHERS ATKINS DIET (MONTIGNAC IN FRENCH CANADA) JENNY CRAIG DR. BERNSTEIN DIET CLINIC ZONE DIET SCARSDALE DIET L.A. PLAN SLIM FAST - MEAL REPLACEMENTS DIET PILLS HERBAL LIFE OTHER SPECIFY

Q26: S,

QT

Please tell me how often in a typical week you do the following:

READ ANSWER LIST AS OFTEN AS NECESSARY

DO NOT READ "DON'T KNOW"

AL

Every day

Four or more times a week

Two or three times a week

Once per week

Less than once a week

Never

DON'T KNOW

DO NOT RANDOMIZE LIST

a) Eat home-prepared meals (IF ASKED, INCLUDES BREAKFAST, LUNCH AND DINNER)

b) Order take-out or home delivered meals (IF ASKED, INCLUDES BREAKFAST, LUNCH AND DINNER)

c) Eat breakfast

d) Go out to eat (IF ASKED, INCLUDES BREAKFAST, LUNCH AND DINNER; IF ASKED, RESTAURANTS, FAST FOOD OUTLETS AND CAFETERIAS)

IF "GO OUT TO EAT" AT LEAST ONCE PER WEEK IN Q26, ASK Q27

OTHERS SKIP TO Q28

Appendix

Q27: S,

QT

When eating out, nutritional information of the food served can be found in a number of places: on the menu, on posterboards or other signs, on brochures and on the tray liner. Thinking about the places that you go out to eat, would you say that all, most, some or none of them have nutritional information about their food available.

AL

All

Most

Some

None

NOT APPLICABLE

DON'T KNOW

ASK ALL

Q28: S,

QT

Do you use any vitamins, herbal supplements, or other dietary supplements?

NB SPECIFY

AL

Yes, multi-vitamins

Yes, single vitamins or mineral

Yes, other dietary supplements SPECIFY

No

SECTION 6 - DEMOGRAPHICS

I have just a few more questions to help us classify your responses.

D1: S,
QT

What is your current marital status?

READ LIST IF NECESSARY

DO NOT READ REFUSED

AL

Single, never married

Married

Living together or common law

Divorced

Separated

Widowed

REFUSED

D2: Q,
QT

How many people are living in your household?

D3: S,
QT

IF >1 AT D2

Do you have any children under the age of 18 who currently live at home with you?

AL

YES

NO

Refused

Appendix

D4: S,

QT

IF CHILDREN UNDER 18 AT D3

How many of these children are...

RECORD NUMBER FOR EACH AGE

AL

newborn to 5 years

6 to 11 years

12 to 17 years

D5: S,

QT

Which of the following categories includes your age?

READ LIST

DO NOT READ REFUSED

AL

18 to 24

25 to 34

35 to 44

45 to 54

55 to 64

65 to 75

Over 75

REFUSED

D6: S,

QT

What is the highest level of formal education you have completed?

READ LIST IF NECESSARY

DO NOT READ DON'T KNOW/REFUSED

AL

SOME GRADE/PRIMARY SCHOOL
 GRADUATED GRADE/PRIMARY SCHOOL
 SOME HIGH/SECONDARY SCHOOL
 GRADUATED HIGH/SECONDARY SCHOOL
 SOME COMMUNITY COLLEGE/TECHNICAL COLLEGE/CEGEP
 GRADUATED COMMUNITY COLLEGE/TECHNICAL COLLEGE/CEGEP
 SOME UNDERGRADUATE UNIVERSITY
 GRADUATED UNDERGRADUATE UNIVERSITY
 SOME POST-GRADUATE UNIVERSITY
 GRADUATED POST-GRADUATE UNIVERSITY
 OTHER
 DON'T KNOW/REFUSED

D7: S,

QT

For statistical purposes only, what is the total household income before taxes, that is, the total income of all members in this household? Would it be \$50,000 or more, or would it be less than \$50,000 per year?

AL

\$50,000 OR OVER
 UNDER \$50,000
 DON'T KNOW
 REFUSED

IF D7 UNDER \$50,000 ASK D8

IF D7 OVER \$50,000 ASK D9

Appendix

D8: S,

QT

Would it be...

READ LIST

DO NOT READ DON'T KNOW/REFUSED

AL

\$45,000 to \$49,999

\$35,000 to \$44,999

\$25,000 to \$34,999

\$15,000 to \$24,999

Less than \$15,000

DON'T KNOW

REFUSED

D9: S,

QT

Would it be...?

READ LIST.

DO NOT READ DON'T KNOW OR REFUSED

AL

\$50,000 to \$59,999

\$60,000 to \$74,999

\$75,000 to \$79,999

\$80,000 to \$99,999

\$100,000 or more

DON'T KNOW

REFUSED

TIMING FOR REGULAR SURVEY TO STOP HERE.

ASK NEXT QUESTIONS ONLY DURING PRETEST.

PT1: S,

QT

How clear do you feel this survey was?

READ LIST IF NECESSARY

DO NOT READ DON'T KNOW

AL

Very Clear

Somewhat Clear

Somewhat Unclear

Very Unclear

DON'T KNOW/NOT SURE

PT2: M*

OPEN,

QT

Do you have any comments about this survey, for example, was there anything you could not understand or that could be clarified?

RECORD VERBATIM RESPONSE. NOT TO BE CODED - PROVIDE AS VERBATIM ONLY

Thank you very much for participating in this survey.

Appendix

French

Serial: Q,
QT

RANGE 1 .. 99999 DEF 99999,
Serial number

Bonjour/Bonsoir, mon nom est [INTERVIEWEUR] de TNS Canadian Facts, une firme internationale de recherche. Aujourd'hui, nous effectuons un sondage sur la nutrition et nous aimerions vous poser quelques questions. Le sondage prendra environ 15 minutes et je peux vous assurer que nous ne vendons rien.

Afin de sélectionner aléatoirement une personne dans votre foyer, puis-je parler à la personne de 18 ans ou plus dans votre foyer, qui a été la dernière à avoir son anniversaire de naissance et qui est présentement à la maison.

UTILISEZ LE CODAGE DE RÉSULTATS D'APPELS
STANDARD

LORSQUE VOUS AVEZ LA BONNE PERSONNE EN LIGNE

RÉPÉTEZ L'INTRODUCTION AU BESOIN

Afin d'assurer le contrôle de la qualité il se peut que quelqu'un d'autre écoute cet appel.

Q3: S,
QT

INSCRIVEZ LE SEXE DU RÉPONDANT

(NE LISEZ PAS)

AL

HOMME
FEMME

SECTION 1 - HABITUDES ALIMENTAIRES

Q4: S,

QT

Diriez-vous qu'en général vos habitudes alimentaires sont excellentes, très bonnes, bonnes, passables ou mauvaises?

NE LISEZ PAS «NE SAIT PAS»

AL

Excellentes

Très bonnes

Bonnes

Passables

Mauvaises

NE SAIT PAS

Q5: S,

QT

Comment évalueriez-vous votre état de santé général?

LISEZ LA LISTE AU BESOIN

NE LISEZ PAS «NE SAIT PAS»

AL

Excellent

Très bon

Bon

Passable

Mauvais

NE SAIT PAS

Q6: S,

QT

Êtes-vous principalement responsable de la planification des repas dans votre foyer?

LISEZ LA LISTE AU BESOIN

NE LISEZ PAS «NE SAIT PAS»

Appendix

AL
Oui
Non
Vous la partagez à parts égales avec quelqu'un d'autre
NE SAIT PAS

SECTION 2 - ATTITUDES ENVERS LA NOURRITURE ET LA NUTRITION

Q7: S,
QT
Quelles sont les caractéristiques d'un aliment «sain»?

ENTREZ LES 3 PREMIÈRES MENTIONS

NE LISEZ PAS LA LISTE

AL
Ne contient pas de nutriments négatifs (sans gras trans, sans gras saturés, sans sel)
Contient moins de nutriments négatifs (trans, gras, sel, sucre)
Contient de bons nutriments (grains entiers, fibres, oméga-3, vitamines et minéraux)
Est frais (pas transformé)
Sans agents de conservation, saveur ou colorant artificiel, sans MSG
Biologique
Naturel, tout naturel
Sans OGM
A un endossement sur l'emballage (tierce partie)
A l'endossement de la compagnie sur l'emballage (logo du fabricant)
AUTRE PRÉCISEZ

Q8A: S,

QT

Quand vous choisissez des aliments à manger, dans quelle mesure chacun des éléments suivants a-t-il une influence sur votre choix d'aliments?

(Diriez-vous que l'élément suivant a beaucoup, assez, pas tellement ou aucune influence sur votre choix?)

RANDOMIZE MT LIST

LISEZ LA LISTE AUSSI SOUVENT QU'IL LE FAUT

NE LISEZ PAS «NE SAIT PAS» OU «REFUSE»

AL

Beaucoup d'influence

Assez d'influence

Pas tellement d'influence

Aucune influence

NE SAIT PAS

REFUSE

RANDOMIZE LIST

Maintenir une bonne santé

Suivre un régime alimentaire spécial ou prescrit

Gérer son poids/image corporelle

Pour avoir de l'énergie ou de l'endurance

Appendix

Q8B: S,

QT

Quand vous choisissez des aliments à manger, dans quelle mesure chacun des éléments suivants a-t-il une influence sur votre choix d'aliments?

(Diriez-vous que l'élément suivant a beaucoup, assez, pas tellement ou aucune influence sur votre choix?)

RANDOMIZE MT LIST

LISEZ LA LISTE AUSSI SOUVENT QU'IL LE FAUT

NE LISEZ PAS «NE SAIT PAS» OU «REFUSE»

NOTE TO INTERVIEWERS: SI LE RÉPONDANT NE SAIT PAS CE QU'EST UN INDICE GLYCÉMIQUE FAIBLE, VEUILLEZ CODER COMME «NE SAIT PAS»

NE LISEZ PAS «NE SAIT PAS» OU «REFUSE»

AL

Beaucoup d'influence

Assez d'influence

Pas tellement d'influence

Aucune influence

NE SAIT PAS

REFUSE

RANDOMIZE LIST

Si l'aliment est biologique

Un aliment enrichi de nutriments ou d'ingrédients comme le calcium ou le soya

Un aliment issu de la biotechnologie

Un aliment qui a un faible indice glycémique

Est fait à partir de grains entiers

Contient des acides gras oméga-3

IF "NOT AT ALL" OR "NOT TOO MUCH" TO ANY OF THE FOOD CHARACTERISTICS LISTED ASK Q8C OTHERS SKIP TO Q9.

READ ONLY THOSE THAT RESPONDENT ANSWERED "NOT TOO MUCH" OR "NOT AT ALL"

Q8C: S,

QT

Je vais vous lire une série de caractéristiques sur les aliments qui ne vous influencent pas. Veuillez me dire si la caractéristique n'a pas d'influence sur votre choix d'aliments parce que vous ne connaissez pas ses bienfaits sur la santé ou parce que ses bienfaits sur la santé n'ont pas d'importance pour vous.

AL

Ne connaît pas ses bienfaits

Les bienfaits n'ont pas d'importance

AUTRE PRÉCISEZ (VOLONTAIRE)

Ne sait pas

Si l'aliment est biologique

Un aliment enrichi de nutriments ou d'ingrédients comme le calcium ou le soya

Un aliment issu de la biotechnologie

Un aliment qui a un faible indice glycémique

Est fait à partir de grains entiers

Contient des acides gras oméga-3

POSEZ À TOUS

Appendix

Q9: S,

QT

Veillez me dire dans quelle mesure chacun des facteurs suivants est important pour vous lorsque vous choisissez les aliments que vous mangez. Diriez-vous que ce facteur est très important, assez important, pas très important ou pas du tout important?

RANDOMIZE MT LIST

LISEZ LA LISTE AUSSI SOUVENT QU'IL LE FAUT

NE LISEZ PAS «NE SAIT PAS» OU «REFUSE»

AL

Très important

Assez important

Pas très important

Pas du tout important

NE SAIT PAS

REFUSE

La nutrition

Le goût

L'aspect pratique ou la facilité de préparation

Le coût

Q10: S,

QT

Dans quelle mesure diriez-vous que vous êtes renseigné(e) sur la nutrition? Diriez-vous que vous êtes...?

LISEZ LA LISTE.

NE LISEZ PAS SANS OPINION - NE SAIT PAS

AL

Très renseigné(e)

Assez renseigné(e)

Pas très renseigné(e)

Pas du tout renseigné(e)

SANS OPINION - NE SAIT PAS

Q11: M*
OPEN,

QT

Pouvez-vous nommer des problèmes de salubrité alimentaire qui vous préoccupent personnellement?

QUESTION OUVERTE. ENTREZ JUSQU'À TROIS MENTIONS.

IF AT Q9 "NUTRITION" IS "VERY IMPORTANT" OR "SOMEWHAT IMPORTANT", ASK Q12.

OTHERS SKIP TO Q13.

Q12: S,

QT

À quelle fréquence, s'il y a lieu, choisissez-vous les aliments que vous mangez en fonction de la quantité d'un nutriment spécifique que l'aliment contient? À mesure que je lirai chaque élément, veuillez me dire si vous choisissez souvent, parfois, rarement ou jamais les aliments selon le contenu de ce nutriment.

RANDOMIZE MT LIST

LISEZ LA LISTE AUSSI SOUVENT QU'IL LE FAUT

NE LISEZ PAS "NE SAIT PAS"

AL

Souvent

Parfois

Rarement

Jamais

NE SAIT PAS

RANDOMIZE LIST

- Calories/Énergie
- Total des matières grasses
- Gras saturés
- Acides gras trans
- Cholestérol
- Glucides
- Fibres
- Sucre
- Protéines
- Sel/Sodium
- Vitamines
- Fer
- Calcium

POSEZ À TOUS

Q13: S,
QT

Certains aliments contiennent des vitamines et minéraux ajoutés. Dans quelle mesure est-il important pour vous de savoir que les aliments suivants contiennent des vitamines et minéraux ajoutés? Diriez-vous que c'est très important, assez important, pas très important, ou pas du tout important, ou est-ce possible que vous n'achetez pas ces types d'aliments.

RANDOMIZE LIST

AL

- Très important
- Assez important
- Pas très important
- Pas du tout important
- Je n'achète pas ce type d'aliments
- NE SAIT PAS

	<p>Les pâtes</p> <p>Les barres (si on demande, d'énergie/de collation/de céréales)</p> <p>Les céréales pour le déjeuner</p> <p>Les breuvages comme les boissons aromatisées ou les boissons gazeuses</p>
Q14: S,	
QT	<p>Certains aliments qui font partie de notre régime habituel sont appelés aliments fonctionnels parce qu'ils offrent des bienfaits additionnels et qu'il réduisent les risques de maladies chroniques en plus de fournir des nutriments. Aviez-vous déjà entendu parler d'aliments fonctionnels avant ce sondage?</p>
AL	<p>OUI</p> <p>NON</p> <p>NE SAIT PAS</p>
Q15: S,	
QT	<p>Je vais vous lire certains énoncés. Veuillez me dire si vous êtes fortement d'accord, assez d'accord, ni d'accord ni en désaccord, assez en désaccord ou fortement en désaccord avec chacun des énoncés suivants.</p>
	<p>RANDOMIZE MT LIST</p> <p>LISEZ LA LISTE AUSSI SOUVENT QU'IL LE FAUT</p> <p>NE LISEZ PAS "NE SAIT PAS"</p>
AL	<p>Fortement d'accord</p> <p>Assez d'accord</p> <p>Ni d'accord ni en désaccord</p> <p>Assez d'accord</p> <p>Fortement en désaccord</p> <p>NE SAIT PAS</p>

RANDOMIZE LIST

Certains types de fibres alimentaires peuvent aider à faire baisser le cholestérol sanguin.

Les acides gras trans ont le même rôle que les gras saturés.

Réduire les gras dans le régime alimentaire peut faire baisser le cholestérol sanguin.

Un régime alimentaire riche en fibres peut aider à prévenir le cancer du côlon.

La quantité de cholestérol que les gens mangent constitue le facteur principal qui affecte leur cholestérol sanguin.

La margarine non hydrogénée ou margarine molle contient moins de gras que le beurre.

La margarine solide ou en bâton est meilleure pour vous que la margarine molle.

L'indice glycémique classe les aliments riches en glucide en fonction de la façon dont ils influencent nos taux de glycémie.

Les acides gras oméga-3 sont essentiels à un régime alimentaire sain.

SECTION 3 - SOURCES D'INFORMATION

Q16: S,
QT

Les gens peuvent obtenir de l'information sur les aliments et la nutrition auprès de sources différentes. Veuillez me dire auprès de quelles sources d'information suivantes vous avez personnellement obtenu de l'information sur les aliments et la nutrition au cours de la dernière année.

(Au cours de la dernière année, avez-vous obtenu de l'information sur les aliments et la nutrition auprès de la source suivante... INSERT MT?)

AL

OUI

NON

NE SAIT PAS

RANDOMIZE LIST

D'un médecin de famille ou autre professionnel de la santé

D'un ou une diététiste

Dans des magazines, journaux et livres

De la documentation du gouvernement

De la documentation ou des publicités de fabricants de produits alimentaires

Des émissions à la radio/télé

Des étiquettes de produits alimentaires

D'amis/de la parenté/de collègues

Des programmes de conditionnement physique/de perte de poids

De la documentation d'associations de santé (Société du Cancer/Fondation des maladies du coeur/Association du diabète)

Sur Internet ou le Web

SECTION 4 - ÉTIQUETAGE

Q17: S,

QT

En pensant spécifiquement aux étiquettes des différents produits alimentaires que vous achetez, à quelle fréquence lisez-vous les étiquettes (en plus de la marque ou de la saveur)? Diriez-vous que vous lisez les étiquettes toujours, habituellement, parfois, seulement la première fois que vous achetez un produit ou jamais?

AL

Toujours

Habituellement

Parfois

Seulement la première fois que j'achète un produit/une marque

Jamais

Appendix

	IF OTHER THAN "NEVER" AT Q17 ASK Q18, Q19 AND Q20 IF "NEVER" AT Q17 SKIP TO Q21
Q18: S, QT	Lorsque vous lisez les étiquettes, lesquels des éléments suivants recherchez-vous? LISEZ LA LISTE SAUF «AUCUNE DE CES RÉPONSES»
AL	Le tableau sur la valeur nutritive ou le panneau d'information nutritionnelle Les ingrédients Les allégations sur les nutriments comme la quantité d'un ingrédient en particulier Les allégations sur la santé comme les énoncés sur les bienfaits pour votre santé de manger l'aliment Un slogan, symbole ou logo «choix santé» ou «meilleur choix» AUCUNE DE CES RÉPONSES
Q19: S, QT	Quand vous regardez l'information sur les emballages de produits alimentaires, soit au magasin ou à la maison, à quelle fréquence utilisez-vous cette information pour les raisons suivantes? Diriez-vous souvent, parfois, rarement ou jamais? (À quelle fréquence utilisez-vous l'information...) RANDOMIZE MT LIST LISEZ LA LISTE AUSSI SOUVENT QU'IL LE FAUT NE LISEZ PAS «NE SAIT PAS»
AL	Souvent Parfois Rarement Jamais NE SAIT PAS

a) pour comparer différents types d'aliments, comme comparer des barres granola et des biscuits.

b) pour comparer des types d'aliments similaires, comme comparer deux marques différentes de craquelins.

c) pour savoir quelle quantité d'un produit alimentaire vous et votre famille devriez manger.

d) pour avoir une idée générale de la teneur en calories d'un aliment.

e) pour voir si l'aliment contient un ingrédient spécifique.

f) pour voir si l'aliment contient des noix.

g) pour voir combien un produit contient de nutriments comme la quantité de matières grasses, de glucides, de fibres ou de vitamines.

h) pour trouver des aliments qui se réclament bons pour la santé (par exemple, «Une saine alimentation, comportant une grande variété de légumes et de fruits, peut aider à réduire le risque de certains types de cancer»).

i) pour voir si le produit est biologique.

Q20: S,

QT

Quand vous cherchez de l'information nutritionnelle sur l'étiquette, à quelle fréquence trouvez-vous habituellement l'information dont vous avez besoin?

LISEZ LA LISTE

NE LISEZ PAS "NE SAIT PAS"

AL

Souvent

Parfois

Rarement

Jamais

NE SAIT PAS

Appendix

	POSEZ À TOUS
Q21A: S, QT	Y a-t-il des allégations ou énoncés exprimés par les compagnies de produits alimentaires au sujet des avantages nutritionnels ou bienfaits sur la santé de leurs aliments qui ont attiré votre attention au cours des 12 derniers mois?
AL	OUI NON NE SAIT PAS
	ASK Q21B IF "YES" TO Q21A OTHERS GO TO Q22
Q21B: M* OPEN, QT	Quel est l'allégation ou l'énoncé qui a attiré votre attention?
	SECTION 5 - STYLE DE VIE
	POSEZ À TOUS
Q22: S, QT	Avez-vous amélioré ou changé vos habitudes alimentaires au cours de la dernière année?
	NE LISEZ PAS LA LISTE
AL	OUI NON NE SAIT PAS - INCERTAIN(E) - NE SE SOUVIENT PAS
	IF YES TO Q22 ASK Q23 IF NO OR DON'T KNOW AT Q22 SKIP TO Q24

Q23: S,

QT

Quel est ou quels sont les changements les plus significatifs que vous avez faits pour améliorer ou changer vos habitudes alimentaires au cours de la dernière année?

NE LISEZ PAS LA LISTE. ACCEPTEZ TOUTES LES MENTIONS

PROGRAMMER NB OTHER SPECIFY

AL

A AUGMENTÉ SA CONSOMMATION DE PROTÉINES

LIMITE SA CONSOMMATION DE GLUCIDES

A RÉDUIT SA CONSOMMATION DE SEL

ESSAIE DE CONSOMMER MOINS DE MATIÈRES GRASSES

ESSAIE DE CONSOMMER MOINS DE GRAS SATURÉS

ESSAIE DE CONSOMMER MOINS DE GRAS TRANS

MANGE PLUS DE LÉGUMES

MANGE PLUS DE FRUITS

MANGE DES ALIMENTS BIOLOGIQUES

MOINS DE COLLATIONS

CHOIX DE COLLATIONS DIFFÉRENTS

A RÉDUIT SA CONSOMMATION DE SUCRE

A RÉDUIT SA CONSOMMATION DE CALORIES - A MANGÉ MOINS - A SURVEILLÉ SON POIDS

A RÉDUIT SA CONSOMMATION DE CAFÉINE

PREND DES SUPPLÉMENTS VITAMINIQUES/MINÉRAUX

MANGE PLUS DE FIBRES, DE FIBRES ALIMENTAIRES

MANGE PLUS DE GRAINS ENTIERS

MANGE DU YOGOURT

ÉQUILIBRE LA RATION ALIMENTAIRE AVEC LES ACTIVITÉS PHYSIQUES

AUTRE AYANT TRAIT AU RÉGIME ALIMENTAIRE (PRÉCISEZ)

NE SAIT PAS (SPONTANÉMENT)

Appendix

	POSEZ À TOUS
Q24: S, QT	Au cours de la dernière année, avez-vous essayé ou adopté un régime alimentaire en vogue?
AL	Oui Non Refuse
	IF YES TO Q24 ASK Q25 OTHERS SKIP TO Q26
Q25: S, QT	IF YES TO Q24 Lequel?
AL	NE LISEZ PAS LA LISTE ACCEPTEZ TOUTES LES MENTIONS WEIGHT WATCHERS ATKINS (MONTIGNAC AU QUÉBEC) JENNY CRAIG CLINIQUE DU DR. BERNSTEIN ZONE SCARSDALE SOUTH BEACH SLIM FAST - REMPLACEMENT DE REPAS PILULES POUR MAIGRIR HERBAL LIFE AUTRE PRÉCISEZ

Q26: S,

QT

Veillez me dire à quelle fréquence vous faites ce qui suit au cours d'une semaine type :

LISEZ LA LISTE AUSSI SOUVENT QU'IL LE FAUT

NE LISEZ PAS "NE SAIT PAS"

AL

Tous les jours

Quatre fois ou plus par semaine

Deux ou trois fois par semaine

Une fois par semaine

Moins d'une fois par semaine

Jamais

NE SAIT PAS

DO NOT RANDOMIZE LIST

a) Mangez des repas préparés à la maison (SI ON DEMANDE, COMPREND LE PETIT-DÉJEUNER, LE REPAS DU MIDI ET LE SOUPER)

b) Commandez des repas pour emporter ou faire livrer à la maison (SI ON DEMANDE, COMPREND LE PETIT-DÉJEUNER, LE REPAS DU MIDI ET LE SOUPER)

c) Prenez un petit-déjeuner

d) Mangez à l'extérieur du foyer (SI ON DEMANDE, COMPREND LE PETIT-DÉJEUNER, LE REPAS DU MIDI ET LE SOUPER; SI ON DEMANDE, RESTAURANTS, ÉTABLISSEMENTS DE RESTAURATION RAPIDE ET CAFÉTÉRIAS)

IF "GO OUT TO EAT" AT LEAST ONCE PER WEEK IN Q26, ASK Q27

OTHERS SKIP TO Q28

Appendix

Q27: S,

QT

Lorsque vous mangez au restaurant, l'information nutritionnelle sur les aliments servis peut se retrouver à plusieurs endroits : sur le menu, sur des affiches ou autres enseignes, dans des brochures et sur la feuille qui recouvre le plateau. En pensant aux endroits où vous allez manger, diriez-vous que tous les endroits, la plupart ou certains des endroits affichent l'information nutritionnelle sur les aliments qu'ils servent, ou diriez-vous qu'aucun ne l'affiche?

AL

Tous

La plupart

Certains

Aucun

SANS OBJET
NE SAIT PAS

POSEZ À TOUS

Q28: S,

QT

Prenez-vous des vitamines, des suppléments à base de plantes ou d'autres suppléments alimentaires?

NB PRÉCISEZ

AL

Oui, des multivitamines

Oui, des vitamines ou des minéraux individuels

Oui, d'autres suppléments alimentaires PRÉCISEZ

Non

SECTION 6 - DEMOGRAPHIQUES

Il ne me reste que quelques questions qui serviront à classifier vos réponses.

D1: S,

QT

Quel est votre état matrimonial actuel?

LISEZ LA LISTE AU BESOIN

NE LISEZ PAS «REFUSE»

AL

Célibataire, jamais marié(e)

Marié(e)

En union de fait

Divorcé(e)

Séparé(e)

Veuf/veuve

REFUSE

D2: Q,

QT

Combien de personnes y a-t-il dans votre foyer?

D3: S,

QT

IF >1 AT D2

Avez-vous des enfants de moins de 18 ans qui demeurent actuellement avec vous?

AL

OUI

NON

Refuse

Appendix

D4: S,

QT

IF CHILDREN UNDER 18 AT D3

Combien de ces enfants se situent dans les groupes d'âge suivants...?

ENTREZ LE NOMBRE POUR CHAQUE GROUPE D'ÂGE

AL

Nouveau-né à 5 ans

6 à 11 ans

12 à 17 ans

D5: S,

QT

Dans lequel des groupes d'âge suivants vous situez-vous?

LISEZ LA LISTE

NE LISEZ PAS «REFUSE»

AL

18 à 24 ans

25 à 34 ans

35 à 44 ans

45 à 54 ans

55 à 64 ans

65 à 75 ans

Plus de 75 ans

REFUSE

D6: S,

QT

Quel est le niveau d'études le plus élevé que vous avez terminé?

LISEZ LA LISTE AU BESOIN

NE LISEZ PAS «NE SAIT PAS/REFUSE»

AL	<p>COURS PRIMAIRE EN PARTIE</p> <p>COURS PRIMAIRE AU COMPLET</p> <p>COURS SECONDAIRE EN PARTIE</p> <p>COURS SECONDAIRE AU COMPLET</p> <p>CÉGEP/COURS TECHNIQUE/COLLÈGE COMMUNAUTAIRE EN PARTIE</p> <p>CÉGEP/COURS TECHNIQUE/COLLÈGE COMMUNAUTAIRE AU COMPLET</p> <p>UNIVERSITÉ (1ER CYCLE) EN PARTIE</p> <p>UNIVERSITÉ (1ER CYCLE) AU COMPLET</p> <p>UNIVERSITÉ (2E-3E CYCLE) EN PARTIE</p> <p>UNIVERSITÉ (2E-3E CYCLE) AU COMPLET</p> <p>AUTRE</p> <p>NE SAIT PAS/REFUSE</p>
D7: S, QT	<p>À des fins statistiques seulement, quel est le revenu total de votre foyer avant impôts, c'est-à-dire le revenu total de tous les membres de votre foyer? Est-il de 50 000 \$ ou plus, ou est-il de moins de 50 000 \$ par année?</p>
AL	<p>50 000 \$ OU PLUS</p> <p>MOINS DE 50 000 \$</p> <p>NE SAIT PAS</p> <p>REFUSE</p> <p>IF D7 UNDER \$50,000 ASK D8</p> <p>IF D7 OVER \$50,000 ASK D9</p>
D8: S, QT	<p>Est-il de...?</p> <p>LISEZ LA LISTE.</p> <p>NE LISEZ PAS «NE SAIT PAS/REFUSE»</p>

Appendix

AL	45 000 \$ à 49 999 \$ 35 000 \$ à 44 999 \$ 25 000 \$ à 34 999 \$ 15 000 \$ à 24 999 \$ Moins de 15 000 \$ NE SAIT PAS REFUSE
D9: S, QT	Est-il de...? LISEZ LA LISTE NE LISEZ PAS «NE SAIT PAS/REFUSE»
AL	50 000 \$ à 59 999 \$ 60 000 \$ à 74 999 \$ 75 000 \$ à 79 999 \$ 80 000 \$ à 99 999 \$ 100 000 \$ ou plus NE SAIT PAS REFUSE TIMING FOR REGULAR SURVEY TO STOP HERE. POSEZ LES QUESTIONS SUIVANTES SEULEMENT PENDANT LE PRÉTEST.

PT1: S,

QT

Dans quelle mesure avez-vous trouvé que ce sondage était clair?

LISEZ LA LISTE AU BESOIN
NE LISEZ PAS «NE SAIT PAS»

AL

Très clair
Assez clair
Pas tellement clair
Pas du tout clair
NE SAIT PAS/INCERTAIN(E)

PT2: M*
OPEN,

QT

Avez-vous des commentaires concernant ce sondage, par exemple, y a-t-il quelque chose que vous n'avez pas compris ou qui pourrait être clarifié?

ENTREZ LA RÉPONSE MOT À MOT. NOT TO BE CODED
- PROVIDE AS VERBATIM ONLY

Merci beaucoup d'avoir participé à ce sondage.

Appendix 2: Additional Methodological Information

Record of Call

Total Numbers Attempted	27,872
Invalid Numbers / Sample	10,977
1. Not in service	6708
2. Non-residential	2387
3. Fax/modem	1711
4. Other ineligible	171
Unresolved In-Scope Sample	9435
5. Busy	148
6. Answering Machine	2197
7. No answer	2631
8. Language	232
9. Other	4227
Resolved but Non-Responding	5434
10. Selected/eligible respondent not available	531
11. Appointment/Callback	280
12. Refusals	4623
Resolved and Responding	2026
13. Disqualified/Other	12
14. Completed Interview	2014
15. No Such Person/Deceased	0
16. Quota Failure	0
RESPONSE RATE	12%

Actual and Weighted Completions

Actual

	Total Canadians						
	Total	Atlantic	Quebec	Ontario	MB/SK	AB	BC
	(2014)	(214)	(516)	(661)	(185)	(203)	(235)
	#	#	#	#	#	#	#
Males:							
18-24	85	7	22	30	7	12	7
25-34	110	10	32	31	12	13	12
35-44	143	13	30	41	15	18	26
45-54	119	18	32	35	13	7	14
55-64	91	10	22	33	7	8	11
65-75	76	8	20	27	7	7	7
75+	32	5	8	9	4	4	2
Females:							
18-24	119	12	30	44	11	8	14
25-34	230	26	57	80	18	23	26
35-44	284	30	62	104	25	40	23
45-54	289	28	88	93	24	30	26
55-64	202	29	50	61	14	15	33
65-75	154	9	47	46	16	13	23
75+	80	9	16	27	12	5	11

Appendix

Weighted

	Total Canadians						
	Total	Atlantic	Quebec	Ontario	MB/SK	AB	BC
	(2014)	(149)	(483)	(779)	(132)	(199)	(271)
	#	#	#	#	#	#	#
Males:							
18-24	126	9	28	48	9	14	17
25-34	178	12	42	69	11	20	23
35-44	204	14	48	83	12	21	26
45-54	196	15	48	74	13	20	26
55-64	138	11	35	51	9	12	19
65-75	93	7	23	35	6	8	13
75+	51	4	11	19	4	5	8
Females:							
18-24	121	9	26	47	9	13	16
25-34	175	12	40	69	11	19	23
35-44	202	14	46	83	12	20	27
45-54	196	15	48	75	12	19	27
55-64	142	11	37	53	9	12	19
65-75	102	8	26	39	7	8	13
75+	89	7	22	33	7	7	12

For More Information Please Contact:

Richard W. Jenkins, Ph.D.

Vice President

**Corporate Director, Public Opinion
Research**

TNS Canadian Facts

Phone (613) 230-4408

Email richard.jenkins@tns-global.com

Web www.tns-global.com

Professional Staff Involved in this Project:

-Richard Jenkins, Vice President

-Nancy Vouloukos, Research Associate

TNS Study Number C1062