

Victorian consumer survey of knowledge, attitudes and behaviours related to salt intake: Project summary.

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The current intake of salt within the Victorian population is high and a high salt intake contributes to the development of high blood pressure, which increases the risk for stroke and heart disease. At present, little is known regarding Victorian adult's knowledge and attitudes related to salt intake. This information can be used to inform strategies to help reduce salt intake. The aim of this project was to determine knowledge, attitudes and behaviours (KAB) related to salt intake in a sample of Victorian adults.

This project was conducted from September – November 2015 and a total of 2559 Participants were recruited via shopping centre, Facebook and an online research panel. Information was collected via an online survey from adults 18-65 years living in Victoria, 56% of whom were male and with an average age of 43 years. The majority of participants (80%) were born in Australia and 63% were the main grocery shopper. A spread of socioeconomic (SES) backgrounds, as determined by the highest level of education reported, was captured, with 49%, 24% and 26% of participants from a high, mid and low SES background, respectively, based on education level.

Most participants (83%) believed that Australians eat too much salt and over two thirds (76%) could correctly identify salt from processed foods as being the main source of salt in the Australian diet. Less than a third of participants believed their own salt intake exceeded dietary recommendations. The majority (83%) were aware of the health risks associated with a high salt intake. Most were aware of the relationship between high salt intake and high blood pressure (83%) and heart disease/heart attack (77%). Most (84%) participants believed Australians eat either far too much or too much salt but only 28% could correctly

identify the recommended maximum amount of salt to eat per day. About half (56%) believed that they eat less than or about the right amount of recommended salt. About half of the sample either agreed or strongly agreed that it was difficult to find low salt options when eating out (59%) and that it was difficult to understand sodium information displayed on food labels (47%). Forty percent agreed or strongly agreed that salt should be added to food to make it tasty and 37% agreed or strongly agreed that specialty salts are healthier than regular table salt.

Of the 2398 participants in the main analysis, 840 (35%) responded that they were either a parent or a caretaker for a child or children under the age of 18 years. Most of these parents (75%) believed Australian children eat far too much or too much salt. Just over two thirds of parents (70%) agreed or strongly agreed with the statement that limiting the amount of salt in their child's diet was important. There was strong support for parent's believing that more action needs to be taken to reduce the amount of salt in foods targeted at children.

CONCLUSION

It is clear that Victorian adults believe that Australians eat too much salt and most are aware that processed foods contain high levels of salt. However although over three quarters of participants (76%) could correctly identify salt from processed foods as being the main source of salt in the Australian diet, less than a third believed their own individual salt intake would exceed dietary recommendations. Few consumers could correctly identify the maximum recommended daily intake for salt. Most parents believed Australian children were consuming too much salt and were aware of the long term health risks associated with high salt intakes during childhood.

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