



FSPC Survey Results (Primary findings)

Methodology

These results are based on telephone interviews with randomly selected participants of 1,014 adults, aged 18 and older between October 31, 2005 and February 9, 2006. The survey was conducted on behalf of the Food Safety Policy Center by the Institute for Public Policy and Social Research at Michigan State University. For results based on these samples, one can say with 95% confidence that the maximum error attributable to sampling and other random effects is ± 3 percentage points. Results are weighted to reflect the socio-demographic composition of the United States population.

1. Public concern with food safety

- 63% of respondents are very or fairly concerned about the safety of the foods they eat (33% very concerned), 34% not concerned.
- 68% are very or fairly concerned about foodborne illness (35% very concerned), only 22% not concerned.
- 50% are very or fairly concerned about antibiotics and hormones (28% very concerned), 41% not concerned.
- 70% are very or fairly concerned about pesticide and chemical residues (39% very concerned), only 22% not concerned
- 52% are very or fairly concerned about additives and preservatives (24% very concerned), 38% not concerned
- The public is most concerned about pesticide and chemical residues and foodborne illness. About half of the respondents are concerned with antibiotics/hormones and additives/preservatives.
- Even though 34% of respondents said they are not concerned about the safety of the foods they eat, only about one-fifth are not concerned about pesticide/chemical residues and foodborne illness.

Statistically significant socio-demographic differences

- **Concern about the safety of the foods**
 - Respondents with someone in the household who is allergic to foods are more likely to be very concerned about food safety than those who do not have someone allergic in the household;
 - respondents with lower education levels are more likely to be highly concerned about food safety [less than high school diploma (53%), high school diploma (40%), some college (28%), and at least a college degree (24%)];
 - respondents between the ages of 35-44 and 45-54 are most likely to be concerned about food safety (42% and 43% are very concerned and 74% and 68% are concerned) than those between the ages of 18-24, 25-34, 55-64, and 65 years or older;



- African-Americans are more likely to be highly concerned about food safety (70%) than Whites, Hispanics, and respondents who indicated their ethnicity as other;
- respondents who live in the West are more likely to have low levels of concern about food safety (48% are not concerned, and only are 21% very concerned) than those who live in the Northeast, South, and Midwest;
- lower income respondents (less than \$20,000) are more likely to have the highest levels of concerns about food safety (53% are very concerned and 76% are concerned) than respondents with higher incomes.
- **Concern about foodborne illness.**
 - Respondents with someone in the household who is allergic to foods are more likely to be very concerned about foodborne illness (45%) than those who do not have someone allergic in the household;
 - respondents with someone over 65 years of age in the household are more likely to be very concerned about foodborne illness (44%) than those who do not have someone over 65 years of age in the household;
 - females are more likely to be very concerned about foodborne illness than males (38% to 32%);
 - respondents with lower education levels are more likely to be highly concerned about foodborne illness than respondents with higher educational attainment [less than high school (54%), high school diploma (41%), some college (33%), and at least a college degree (24%)];
 - younger respondents (18-24 and 25-34) are less likely to be very concerned about foodborne illness (25% and 29%) than older respondents;
 - African-Americans are more likely to be highly concerned about foodborne illness (74%) than whites, Hispanics, and respondents who indicated their ethnicity as other; white respondents are less likely to be concerned (35% are not concerned) than other ethnic groups;
 - respondents who live in the South are more likely to be concerned about foodborne illness (45% are very concerned, and 78% concerned) than respondents who live in the Northeast, Midwest, or West;
 - lower income respondents (less than \$20,000) are more likely to be concerned about foodborne illness (57% are very concerned and 86% are concerned) than those with higher incomes.
- **Concern about antibiotics and hormones.**
 - Respondents with someone in the household who is allergic to foods are more likely to be concerned about antibiotics and hormones (69%) than those who do not have someone allergic in the household;
 - respondents without a child under the age of 6 in the household indicated that they are more likely to be very concerned about antibiotics and hormones (30%) than respondents with a child under the age of 6;
 - respondents with someone over 65 years of age in the household are more likely to be concerned about antibiotics and hormones (59%) than those who do not have someone over the age of 65 in the household;



- females are more likely to be very concerned about antibiotics and hormones (36%) than males, and males are more likely to be not concerned (48%) than females;
- those with lower education levels are more likely to highly concerned about antibiotics and hormones than respondents with higher education levels [less than high school (42%), while respondents with at least a college degree are more likely to be not concerned (48%);
- younger respondents (18-24) are least likely to be very concerned about antibiotics and hormones (9%) and respondents between the ages of 35-44 are most likely to be highly concerned (44%);
- African-Americans and respondents who identified their ethnicity as other are more likely to be highly concerned about antibiotics and hormones (63% and 40%) than Whites and Hispanics; 46% of whites are not concerned;
- respondents who live in the South are more likely to be very concerned about antibiotics and hormones (32%) than those who live in the Northeast, Midwest, and West, but Midwest respondents are more likely to be not concerned than those who live in other regions;
- lower income respondents (less than \$20,000) are more likely to have high levels of concern about antibiotics and hormones (47% very concerned) than with higher incomes.
- **Concern about pesticide and chemical residues.**
 - Respondents with someone in the household who is allergic to foods are more likely to be very concerned about pesticide and chemical residues (48%);
 - respondents without a child under the age of 6 in the household indicated that they are more likely to be concerned about pesticides and chemical residues (72%);
 - respondents with someone over 65 years of age in the household are more likely to be very concerned about pesticide and chemical residues (48% to 36%);
 - females are more likely to be very concerned about pesticide and chemical residues (45%);
 - respondents with lower education levels are more likely to highly concerned about pesticide and chemical residues [less than high school (53%), high school diploma (43%), some college (39%), and at least a college degree (29%)];
 - younger respondents (25-34) are least likely to be very concerned about pesticide and chemical residues (22%);
 - African-Americans are more likely to be highly concerned about pesticide and chemical residues (61%), while only 34% of whites are very concerned;
 - respondents who live in the West are more likely to be not concerned about pesticide and chemical residues (32%);



- lower income respondents (less than \$20,000) are more likely to have high levels of concern about pesticide and chemical residues (56% very concerned).
- **Concern about additives and preservatives.**
 - Respondents with someone in the household who is allergic to foods are more likely to be concerned about additives and preservatives (36%) than those who do not have someone allergic in the household ;
 - respondents with a child under the age of 6 in the household indicated that they are not likely to be concerned about additives and preservatives (52% are not concerned) than those without a child under the age of 6;
 - respondents with someone over 65 years of age in the household are more likely to be very concerned about additives and preservatives (33%) than those without someone over the age of 65 in the household;
 - respondents who have never been married are not likely to be concerned about additives and preservatives (51%) than those who are married and were married, but are now single;
 - females are more likely to be very concerned about additives and preservatives (30%) than males;
 - respondents with lower education levels are more likely to highly concerned about additives and preservatives [less than high school (34%)] than those with higher levels of educational attainment;
 - younger respondents (18-24 and 25-34) are not likely to be concerned about additives and preservatives (45% and 54% not concerned) than older respondents;
 - African-Americans are more likely to be highly concerned about additives and preservatives (46%) than Whites, Hispanics, and those who identified their ethnicity as other; Hispanics are most likely to be not concerned (49% not concerned);
 - respondents who live in the South are more likely to be very concerned about additives and preservatives (27%) than those who live in the Northeast, Midwest, and West;
 - lower income respondents (less than \$20,000) are likely to have the highest levels of concern about additives and preservatives (37% very concerned) than those with higher incomes.

2. Consumer behaviors and food safety

- 54% of respondents said they think about food safety when shopping at the grocery store
- 46% thought about food safety the last time they ate at a restaurant
- 43% said they do not buy some foods because they are likely to be unsafe
- 58% said that they know a lot or quite a bit about food safety, about a third indicated they knew a little, and only 8% said they knew not much at all

Statistically significant socio-demographic differences

- **Think about food safety when shopping at the grocery store.**



- Respondents with someone in the household who is allergic to foods are more likely to think about food safety when they are shopping for food (67%) than those who do not have someone allergic in the household;
- females are more likely to think about food safety when they are shopping for food (61%) than males;
- respondents with lower education levels are more likely to think about food safety when they are shopping for food than those with higher education levels [less than high school (68%), high school diploma (64%), some college (51%) and at least a college degree (49%);
- respondents between the ages of 55-64 are less likely to think about food safety when they shop for food (42%) than younger and older respondents;
- African-Americans are more likely to think about food safety when they shop for food (77%) than Whites, Hispanics, and those who identified their ethnicity as other;
- respondents who live in the West are less likely to think about food safety when they shop for food (43%) than those who live in the Northeast, Midwest, and South;
- lower income respondents are more likely to think about food safety when they shop for foods (less than \$20,000—70%, \$20-\$39,999—59%) than those with higher incomes.
- **Think about food safety when eating at a restaurant.**
 - Respondents with someone in the household who is allergic to foods are more likely to think about food safety when they eat at a restaurant (64%) than those who do not have someone allergic in the household;
 - females are more likely than males to think about food safety when they eat at a restaurant (55% to 39%);
 - respondents with at least a college degree are less likely to think about food safety when they eat at a restaurant (38%) than those with less than high school diploma, with a high school diploma, and at least a college degree;
 - respondents between the ages of 55-64 are less likely to think about food safety when they eat at a restaurant (32%) than those between the ages of 18-24, 25-34, 35-44, and 65 years of age or older, and young respondents (18-24) are more likely to think about food safety when eating at a restaurant (62%) than older respondents;
 - African-Americans and Hispanics are more likely to think about food safety when eating a restaurant (74% and 62%) than Whites and those who identified their ethnicity as other;
 - respondents who live in the South are more likely to think about food safety when they eat at a restaurant (60%) than those who live in the Northeast, Midwest, and West;
 - lower income respondents are more likely to think about food safety when they eat at a restaurant (less than \$20,000—63%) than higher income respondents;



- respondents with at least a college degree are less likely to think about food safety when eating at a restaurant (36%) than respondents with lower levels of education.
- **Do not buy some foods because they are likely to be unsafe.**
 - Respondents with someone in the household who is allergic to foods are more likely to avoid buying foods because they are likely to be unsafe (60%) than those who do not have someone allergic in the household;
 - females are more likely to avoid buying foods because they are likely to be unsafe (50%) than males;
 - respondents with less than a high school education are less likely to avoid buying foods because they are likely to be unsafe (30%) than respondents with higher levels of education;
 - African-Americans and respondents who identified their ethnicity as other are more likely to avoid buying foods because they are likely to be unsafe (61% and 58%) than Whites and Hispanics;
 - respondents who live in the West are less likely to avoid buying foods because they are likely to be unsafe (36%) than those who live in the Northeast, Midwest, and the South;
 - lower income households are more likely to avoid buying some foods because they are likely to be unsafe (less than \$20,000—59%) than higher income respondents.

3. Perceptions of food system actors

- Respondents believe that the federal government should be most responsible for insuring food safety (38%), followed by food processors and manufacturers (23%), consumers (11%), state government (10%), farmers (7%), grocery stores (4%), and restaurants (2%)
- 78% said that federal government agencies (FDA and USDA) were doing a good job of making sure that the foods they eat are safe; 78% for food processors and manufacturers; 89% for farmers; 82% for grocery stores; 69% for restaurants; 62% for average Americans; 96% for the respondents themselves
- 88% of respondents stated that the FDA and USDA were capable in making sure the foods we eat are safe; 91% for food processors and manufacturers; 92% for farmers; 93% for grocery stores; 95% for restaurants; 85% for average Americans; and 98% for respondents
- 78% indicated that the FDA and USDA were committed to food safety; 86% for food processors and manufacturers; 93% for farmers; 90% for grocery stores; 82% for restaurants; 80% for average Americans, and 97% for respondents
- Only 51% believe that federal government agencies have enough resources to insure food safety; 75% for food processors and manufacturers; 62% for farmers; 68% for restaurants; 56% for average Americans; and 66% for respondents



Statistically significant socio-demographic differences

- **Performance.**

- Respondents with someone in the household who is allergic to foods are less likely to rate the performance of the federal government, grocery stores, restaurants, and average Americans as good than those who do not have someone allergic in the household.
- Respondents with a child under the age of six in their household are less likely to rate the performance of the federal government, restaurants, and average Americans as good than those without a child under the age of six in their household.
- White respondents are more likely to believe that the federal government is doing a good in insuring food safety than African-Americans, Hispanics, and those who identified their ethnicity as other .
- High school graduates (86%) are more likely to say that food processors and manufacturers are doing a good job than respondents who have completed high school, and those with some college and at least a college degree.
- Hispanics (93%) are more likely to say that food processors and manufacturers are doing a good job than African Americans, Whites, and those who identified their ethnicity as other. African-Americans are less likely to say that grocery stores and supermarkets are doing a good job than Whites, Hispanics, and those who identified their ethnicity as other.
- Respondents with less than a high school diploma (56%) are less likely to state that restaurants are doing a good job of food safety.
- Respondents with lower incomes (<\$20,000—63% and \$20-\$39,999—69%) are less likely to state that restaurants are doing a good job of food safety than higher income respondents.
- Respondents who have never been married (56%), have completed some college (60%) or college (62%), are young (18-24—44%), and are Hispanic (40%) are less likely to indicate that average Americans are doing a good job with food safety than respondents who are married, have been married, have less than a high school education or have attained high school diploma, are older, and are White, African-American, or identified their ethnicity as other.

- **Resources.**

- Respondents who have never been married, are male, are young (18-24 and 25-34), are Hispanic, and have incomes less than \$20,000 are more likely to state that the federal government has enough resources to insure food safety; respondents with an elderly person in the household and those with at least a college degree are less likely to state that the federal government has enough resources to insure food safety.
- Respondents who are married, have some college, and are Hispanic are more likely to believe that food processors and manufacturers have enough resources to insure food safety; respondents who live in the West are less likely to state that food processors and manufacturers have enough resources than those who live in other regions.



- Elderly respondents, Hispanics and ethnic groups identified as other, and those with household incomes less than \$20,000 are more likely to state that farmers have enough resources to insure food safety; respondents with at least a college degree are less likely to state that farmers have enough resources to insure that the foods they are safe.
- African-Americans are less likely to state that grocery stores and supermarkets have enough resources to insure that the foods they are safe; respondents with some college, respondents who identified their ethnicity as other, and those with household incomes less than \$20,000 are more likely to say that grocery stores and supermarkets have enough resources to insure food safety.
- Respondents with less than a high school degree are more likely to indicate that restaurants have enough resources to insure that the foods they eat, while respondents with a high school degree are less likely to say that restaurants have enough resources.
- Respondents who are between the ages of 45-54, have some college, and those who live in the Midwest are more likely to state that average Americans have enough resources to insure that the foods they eat are safe, while respondents who have never been married, have less than a high school education, are Hispanic, and have household incomes less than \$20,000 are less likely to say that average Americans have enough resources.
- When it comes to the respondents themselves, those with less than a high school education less likely to state that they have enough resources to insure that the foods they eat are safe.

4. Trade-offs between food safety and other food attributes

- More respondents agreed that the government should ban foods that are less safe even if they have other attributes such as nutrition, taste, and convenience than disagreed (47% to 42%; 55% to 38%; 64% to 30%).
- The majority of respondents feel that anyone should be able to buy any foods regardless of how safe or unsafe they may be (52%)

Statistically significant socio-demographic differences

- **Anyone should be able to buy any foods regardless of how safe or unsafe they may be.**
 - Married respondents are less likely to agree with the statement that anyone should be able to buy any foods regardless of how safe or unsafe they may be than single respondents than those who were married, but are now single and those who have never been married;
 - females are more likely to disagree with the statement than males;
 - Respondents with a high school diploma and some college education are more likely to agree with the statement that anyone should be able to buy any foods regardless of how safe or unsafe they may be than those without a high school diploma and at least a college degree;



- younger respondents (18-24) are more likely to agree with the statement that anyone should be able to buy any foods regardless of how safe or unsafe they may be than older respondents;
- African Americans are more likely to agree with the statement that anyone should be able to buy any foods regardless of how safe or unsafe they may be than Whites, Hispanics, and respondents who indicated their ethnicity as other;
- respondents who live in the Northeast are more likely to agree with the statement that anyone should be able to buy any foods regardless of how safe or unsafe they may be than those living in the Midwest, South, and the West.

5. Acceptability and willingness to pay to increase food safety

- The majority of respondents stated that the current number of foodborne related illness and deaths are unacceptable. 73% said that the percentage of foodborne illness is unacceptable; 60% said that the number of hospitalizations due to foodborne diseases is unacceptable; and 68% stated that the number of deaths due to foodborne diseases is unacceptable.
- About three quarters of respondents (74%) would be willing to pay an additional five percent to their food bill if foodborne diseases could be reduced by 50%; 84 percent would be willing to pay an additional \$270 to their food bill if foodborne diseases could be reduced by 50% [\$270 is the equivalent to paying five percent more).

Statistically significant socio-demographic differences

- **Percentage of foodborne illness.**
 - Respondents with a college education are more likely to state that the current percentage of foodborne illness is unacceptable (85%) than those with less than high school, a high school diploma, and some college; those with less than high school are less likely to state that the percentage is unacceptable (64%) than those with higher education levels;
 - younger respondents (18-24) are less likely to state that the current percentage of foodborne illness is unacceptable (60%) than older respondents;
 - Hispanics and respondents who indicated their ethnicity as other are less likely to state that the current percentage of foodborne illness is unacceptable (61% and 67%) than Whites and African-Americans;
 - respondents with incomes between \$20-\$39,999 are less likely to state that the current percentage of foodborne illness is unacceptable (69%) than those with incomes below \$20,000 and \$40,000 or above.
- **Number of hospitalizations.**
 - Respondents with someone in the household who is allergic to foods are more likely to find the number of hospitalizations due to foodborne diseases to be unacceptable (73%) than those who do not have someone allergic in the household;



- females are more likely to find the number of hospitalizations due to foodborne illness to be unacceptable (65%) than males;
- respondents with less than a high school education are more likely to find the number of hospitalizations due to foodborne illness to be unacceptable (72%) than those with higher education levels;
- young respondents (18-24) are more likely to find the number of hospitalizations due to foodborne illness to be acceptable (51%) than older respondents;
- respondents who live in the Midwest are more likely to find the number of hospitalizations due to foodborne illness to be acceptable (44%) than those living in the Northeast, Midwest, and South;
- respondents with incomes less than \$20,000 are more likely to find the number of hospitalizations due to foodborne illness to be unacceptable (73%) than those with higher incomes.
- **Number of deaths.**
 - Respondents with someone in the household who is allergic to foods are more likely to find the number of deaths due to foodborne diseases to be unacceptable (79%) than those who do not have someone allergic in the household;
 - females are more likely to find the number of deaths due to foodborne diseases to be unacceptable than males (77% to 61%);
 - young respondents (18-24) are less likely to find the number of deaths due to foodborne diseases to be unacceptable (53%) than older respondents;
 - Hispanics are less likely to find the number of deaths due to foodborne diseases as unacceptable (56%) than Whites, African-Americans, and those who identified their ethnicity as other.
- **Willingness to pay 5% for reduction in foodborne diseases.**
 - Females are more likely to pay more (5%) for increased food safety (82%) than males;
 - respondents between the ages of 35-44 are more willing to pay for increased food safety (86%) than 18-24, 25-34, 45-54, 55-64, and those 65 years old or older;
 - African Americans are most willing to pay for increased food safety (92%), followed by Hispanics (83%), respondents who indicated their ethnicity as other (77%), and whites (69%).
- **Willingness to pay \$270 for reduction in foodborne diseases.**
 - Respondents with someone in the household who is allergic to foods are more likely to pay \$270 more for increased food safety (90%) than those who do not have someone allergic in the household;
 - respondents with a child under 6 years of age in the household are more likely to pay more for increased food safety (92%) than without a child under the age of 6;
 - respondents who do not have someone aged 65 years or older in the household are more willing to pay more for increased food safety (87%) than those who do have someone aged 65 years older living in their household;



- respondents with some college are most willing to pay more for increased food safety (93%), followed by those with at least a college degree (84%);
- younger respondents (18-24 and 25-34) are more willing to pay for increased food safety (88% and 94%), respondents between the ages of 35-44 and 55-64 are less willing to pay more (both 74%);
- respondents who live in the Northeast are more likely to be willing to pay more (94%), while those who live in the West are less likely to pay more (72%);
- higher income respondents are more likely to spend \$270 more on food safety (\$40-\$59,999—94%, \$60,000+--87%) than those who make less than \$20,000 (\$80%) and those who make between \$20-\$39,999 (75%).

Willingness to pay and concern

- The percentage of respondents willing to pay 5% more for increased food varied by the level of concern about food safety. The majority in all concern levels are willing to pay more, including those who are not concerned. Very concerned (85%); fairly concerned (74%); not too concerned (90%); not concerned (56%).
- The percentage of respondents willing to pay \$270 more for increased food varied by the level of concern about food safety. The majority in all concern levels are willing to pay more, including those who are not concerned. Very concerned (86%); fairly concerned (89%); not too concerned (91%); not concerned (77%).

6. Policy options

- 96% of respondents state that labels should contain food safety information (52% strongly agree)
- 95% of respondents indicate that imported foods should be subjected to the same inspection processes as domestically produced foods (56% strongly agree)
- 71% disagree that imported foods are as safe as domestic foods