

## SUPPLEMENTARY MATERIAL

### Knowledge, attitudes and behaviours related to dietary salt intake among New Zealand adults –Survey tool

#### Overview of questions included in KAB survey

| Question Type   | Question number   | Total questions  |
|-----------------|---|--|
| Demographic     | <ol style="list-style-type: none"> <li>1. Sex</li> <li>2. Age</li> <li>3. Ethnicity</li> <li>4. Country of birth</li> <li>5. Residential suburb</li> <li>6. Residential city</li> <li>7. Highest secondary school qualification</li> <li>8. Highest completed qualification</li> <li>9. Medical history</li> <li>10. Medical advice to reduce salt intake</li> <li>11. Height</li> <li>12. Weight</li> <li>13. Parent/caregiver of children under 18 years</li> <li>14. Access to variety of foods (food security)</li> </ol> | <b>14</b><br>Questions 1-14  |
| Knowledge       | <ol style="list-style-type: none"> <li>15. Relationship between salt and sodium</li> <li>16. Knowledge of how much salt NZ adults consume</li> <li>17. Dietary sources</li> <li>21. Impact of excess sodium intake on health</li> <li>22. Health outcomes associated with excessive salt intake</li> <li>23. Sodium RDI (adults)</li> <li>29. Knowledge of how much salt NZ children consume</li> <li>30. Long term impact of excess sodium intake in childhood.</li> <li>32. Sodium RDI (children)</li> </ol>                | <b>9</b><br>Adult only questions: 15, 16, 17, 21, 22, 23<br><br>Parent/caregiver questions: 29, 31, 32 |
| Attitudes       | <ol style="list-style-type: none"> <li>24. Level of concern regarding food related issues (matrix)</li> <li>25. Level of agreement regarding common salt related beliefs (matrix)</li> <li>26. Level of agreement with groups responsible for reducing sodium intake (matrix)</li> <li>31. Level of agreement regarding importance of child(ren) consuming lower salt products</li> </ol>   | <b>4</b><br>Adults questions: 24, 25, 26<br><br>Parent/caregiver questions: 30                         |
| Behaviour       | <ol style="list-style-type: none"> <li>18. Frequency of salt added during cooking.</li> <li>19. Frequency of salt shaker being placed at the table.</li> <li>20. Frequency of salt added to food at the table.</li> <li>27. Frequency of implementing salt related behaviours (matrix).</li> <li>28. Use of the Health Star Rating to make food choices (matrix).</li> <li>33. Action to reduce child(ren)'s salt intake.</li> </ol>  | <b>6</b><br>Adults questions: 18, 19, 20, 27, 28<br><br>Parent/caregiver questions: 33                 |
| Total questions |   | <b>33</b><br>(Questions: 29-33 specific to parents/caregivers only)                                    |



# What do you know about **SALT?**

**PROJECT TITLE** Knowledge, attitudes and behaviours related to dietary salt intake among NZ adults

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**SUPERVISORS:** Dr Helen Eyles and Associate Professor Jennifer Utter

Thank you for taking the time to complete this survey!

There are two sections to this survey, please complete all questions in each section by selecting the most suitable option. This survey will take you about ten (10) minutes to complete.

For further information, please read the Participant Information Sheet

Approved by the University of Auckland Human Participants Ethics Committee on the 8<sup>th</sup> of May 2018, for three years.

Reference number: 021119

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## SECTION ONE: DEMOGRAPHIC INFORMATION

In this section we are interested in finding out a bit of background information about you. This information will help us compare the answers of respondents from different backgrounds. Your responses will remain anonymous.

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**1** What is your sex?

- Male
- Female
- Gender diverse

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**2** What is your age in years?

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**3** Which ethnic group or groups do you belong to? You may select more than one option.

- New Zealand European
- Māori
- Samoan
- Cook Island Māori
- Tongan
- Niuean
- Chinese
- Indian
- Other, please specify

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**4** Which country were you born in?

- New Zealand
- Australia
- England
- China (People's Republic of)
- India
- South Africa
- Samoa
- Cook Island
- Other, please specify

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**5** What suburb do you live in?

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**6** What city do you live in?

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- 
- 7
- None
  - NZ School Certificate in one or more subjects OR National Certificate Level 1 OR NCEA level 1
  - NZ Sixth Form Certificate in one or more subjects OR National Certificate level 2 OR NZ UE before 1986 in one or more subjects OR NCEA level 2
  - NZ Higher School Certificate OR Higher Leaving Certificate OR NZ University Bursary / Scholarship OR National Certificate level 3 OR NCEA level 3 OR NZ Scholarship level 4
  - Other secondary school qualification gained in New Zealand. Please specify
  - Other secondary school qualification gained overseas
  - Don't know
  - Choose not to answer

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8 Apart from secondary school qualifications, please tell us your highest qualification.

- No qualification beyond secondary school
- Bachelors degree e.g. BA, BSc
- Bachelors degree with honours
- Masters degree e.g. MA, MSc
- PhD
- Diploma (not postgraduate)
- Diploma (postgraduate)
- Trade or technical certificate which took more than 3 months full-time study
- Professional qualification e.g. ACA, teachers, nurses
- Other
- Choose not to answer

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9 Have you ever been diagnosed with or suffered from one or more of the following conditions? You may select more than one option.

- Heart disease
- Stroke
- High blood pressure
- Heart attack
- Other, please specify
- Can't recall/ don't know
- No

[If answered yes to 'high blood pressure']

Do you currently take medication for the control of your blood pressure?

- Yes
- No

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10 Have you ever received any advice from your doctor or a health professional to reduce your intake of salt/sodium and/or salty foods?

- Yes
- No
- Can't recall

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11 How tall are you without shoes? (Centimetres (cm) or Feet and inches (ft, in))

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12 Approximately how much do you weigh without clothes and shoes? (Kilograms (kg) or Pounds (lb))

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13 Are you a parent or caregiver of a child or children under the age of 18 years?

- No
- Yes, I am a parent of a child (or children) under 18 years
- Yes, I care for a child (or children) under 18 years

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14 The variety of foods I am/ we are able to eat is limited by lack of money

- Always
  - Often
  - Sometimes
  - Rarely
  - Never
  - Don't know
-

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**SECTION 2: YOUR VIEWS ON SALT INTAKE**

In this section, we are interested in finding out about your views on salt. There are no right or wrong answers.

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**15** Information about the amount of sodium is displayed on the food label on New Zealand food products. What is the relationship between salt and sodium?

- They are exactly the same
  - Salt contains sodium
  - Sodium contains salt
  - Don't know
- 

**16** In general, how much salt do you think New Zealander adults eat?

- Far too much
  - Too much
  - Just the right amount
  - Too little
  - Far too little
  - Don't know
- 

**17** Which of the following do you think is the main source of salt in the New Zealand diet?

- Salt added during cooking or at the table
  - Salt from processed foods such as bread, sausages and cheese
  - Salt from natural food sources
  - Don't know
- 

**18** In the food you eat at home, how often is salt added during cooking?

- Always
  - Often
  - Sometimes
  - Rarely
  - Never
  - Don't know
- 

**19** Do you place salt on your table at mealtimes? (e.g. salt shaker, bowl of salt)

- Always
  - Often
  - Sometimes
  - Rarely
  - Never
  - Don't know
- 

**20** How often do you add salt to your food at the table?

- Always
  - Often
  - Sometimes
  - Rarely
  - Never
  - Don't know
- 

**21** Do you think that eating too much salt could damage your health?

- Yes
  - No
  - Don't know
-

22

Which, if any of the following conditions do you think is linked to eating too much salt? Please select an option for each line.

| Health condition            | Yes | No | Don't know |
|-----------------------------|-----|----|------------|
| High blood pressure         | •   | •  | •          |
| Kidney disease              | •   | •  | •          |
| Heart disease/ Heart attack | •   | •  | •          |
| Osteoporosis                | •   | •  | •          |
| Stroke                      | •   | •  | •          |
| Stomach cancer              | •   | •  | •          |

23

Health professionals recommend that adults should eat no more than a certain amount of salt each day. How much salt do you think this is?

- 3 grams per day (about ½ a teaspoon)  
 5 grams per day (about 1 teaspoon)  
 8 grams per day (about 1 ½ teaspoons)  
 10 grams per day (about 2 teaspoons)  
 15 grams per day (about 3 teaspoons)  
 Don't know

24

Please indicate on the scale below how concerned you are about each of the following food related issues. Please select an option for each line.

|   | Not at all concerned | Not very concerned | Somewhat concerned | Very concerned | Extremely concerned |
|---|----------------------|--------------------|--------------------|----------------|---------------------|
| The amount of sugar in food               | •                    | •                  | •                  | •              | •                   |
| The amount of salt in food                | •                    | •                  | •                  | •              | •                   |
| The amount of total fat in food           | •                    | •                  | •                  | •              | •                   |
| The amount of saturated fat in food       | •                    | •                  | •                  | •              | •                   |
| The amount of kilojoules/calories in food | •                    | •                  | •                  | •              | •                   |

25

Please indicate on the scale below how much you agree or disagree with the following statements. Please select an option for each line.

| Statement  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree |
|--|-------------------|----------|----------------------------|-------|----------------|
| Himalayan salt, pink salt, sea salt and gourmet salts are healthier than regular table salt                                    | •                 | •        | •                          | •     | •              |
| I believe salt needs to be added to food to make it tasty  | •                 | •        | •                          | •     | •              |
| My health would improve if I reduced the amount of salt in my diet   | •                 | •        | •                          | •     | •              |
| It is hard to understand sodium information displayed on food labels   | •                 | •        | •                          | •     | •              |
| When eating out at restaurants/cafes/pubs, I find that lower salt options are not readily available or only in limited variety | •                 | •        | •                          | •     | •              |
| There should be laws which limit the amount of salt added to manufactured foods.   | •                 | •        | •                          | •     | •              |

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From the list below, please rate how responsible you think each group is for reducing the amount of salt New Zealanders eat.

| Group   | Not at all responsible | Somewhat responsible | Responsible | Very responsible | Don't know |
|---|------------------------|----------------------|-------------|------------------|------------|
| Government  | •                      | •                    | •           | •                | •          |
| Food manufacturers                                | •                      | •                    | •           | •                | •          |
| Business (e.g. supermarkets, local markets)       | •                      | •                    | •           | •                | •          |
| Chefs preparing foods in restaurants/ cafes/ pubs | •                      | •                    | •           | •                | •          |
| Friends/family                                    | •                      | •                    | •           | •                | •          |
| Yourself  | •                      | •                    | •           | •                | •          |
| Fast food chains                                  | •                      | •                    | •           | •                | •          |

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Below are some common ways to lower the amount of salt in your diet. In the past month, to what extent have you personally done any of the following? Please select an option for each line.

|   | Never do this | Rarely do this | Sometimes do this | Often do this | Always do this | Does not apply to me |
|---|---------------|----------------|-------------------|---------------|----------------|----------------------|
| Looked at a food label to check the salt/sodium content of a food item                            | •             | •              | •                 | •             | •              | •                    |
| Avoided eating packaged, ready-to-eat foods   | •             | •              | •                 | •             | •              | •                    |
| Used spices/herbs instead of salt when cooking  | •             | •              | •                 | •             | •              | •                    |
| Avoided eating food from fast food restaurants (e.g. McDonalds, KFC, Pizza Hut)                   | •             | •              | •                 | •             | •              | •                    |
| Avoided eating food from an Asian style restaurant or takeaway store (e.g. Chinese, Thai, Indian) | •             | •              | •                 | •             | •              | •                    |

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On some food products, a Health Star Rating is displayed on the food label (example below). Do you use the Health Star Rating information to choose any of the following products?



| Product   | Usually | Sometimes | Never | Don't know |
|---|---------|-----------|-------|------------|
| Breakfast cereals   | •       | •         | •     | •          |
| Cheese  | •       | •         | •     | •          |
| Bread   | •       | •         | •     | •          |
| Processed meat (e.g. ham, bacon, sausages, luncheon, corned beef) | •       | •         | •     | •          |
| Sauces (e.g. tomato sauce, soy sauce)                             | •       | •         | •     | •          |

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### SECTION 3: YOUR VIEWS ON CHILDREN'S SALT INTAKE

In this section, we are interested in finding out about your views on salt for children. There are no right or wrong answers.

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**29** In general, how much salt do you think your child/children consume?

- Far too much
- Too much
- Just the right amount
- Too little
- Far too little
- Don't know

**30** In general, how important is it for your child/children to consume foods with lower amounts of salt?

- Not important at all
- Not important
- Neither important nor unimportant
- Important
- Very important

**31** Please indicate on the scale below how much you agree or disagree with the following statement:  
*In the long term, eating too much salt during childhood may have harmful effects on children's health*

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

**32** Health professionals recommend that children aged 7-10 years should consume no more than a certain amount of salt each day. How much salt do you think this is?

- 3 grams per day (about ½ a teaspoon)
- 5 grams per day (about 1 teaspoon)
- 8 grams per day (about 1 ½ teaspoons)
- 10 grams per day (about 2 teaspoons)
- 15 grams per day (about 3 teaspoons)
- Don't know

**33** In general, do you currently do anything to reduce the amount of salt your child/children consume?

- Yes
- No

[If answered yes] Please specify what you currently do.  
[Free-text comment box provided]

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You have reached the end of the survey. Thank you for your time.  
Please press SUBMIT to finish.

[Redirect to separate webpage to enter prize draw and/or request summary of findings]

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### SALT SURVEY PRIZE DRAW

Thank you for completing this survey!

Do you wish to receive a summary of the findings from this study?

• Yes • No

Do you wish to enter the draw to win a \$100 Westfield voucher?

• Yes • No

Please complete the following details:

First Name

Last name

Email address

Phone number

The information you provide cannot be linked back to your survey responses. Your contact details will only be used for the purpose of the prize draw and/or sending you a summary of our results.  
After completion of the study, your details will be deleted.

Approved by the University of Auckland Human Participants Ethics Committee on the 8th of May 2018 for three years.  
Reference number: 021119.

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