

## Consumer research on Manuka honey on the UK market

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### Summary

1. The Food Standards Agency (FSA) has previously carried out a surveillance activity to understand the types of Manuka honey that are sold in the UK. Whilst this increased the understanding of how Manuka honey is sold in the UK, it identified the need for further work to get a better understanding of what consumers understand about the marketing terms and other information on Manuka product labels.
2. The activity reported here has provided a greater insight into what consumer's perceptions are of Manuka honey. The information from this will be used to work out how to better protect consumers and help them make informed choices.
3. The information gathered as part of this exercise will be used to support further discussions at an EU level on whether information present on manuka honey is seen as a quality statement or an indirect health claim.

### Background

4. The UK market for Manuka honey has developed significantly over the last few years, mostly due to the promotion of supposed increased antibacterial activity and perceived health benefits.
5. Previous work has demonstrated the complexity of the situation and the variety of different approaches taken by industry to how they represent their product.
6. New Zealand's Ministry for Primary Industries (MPI) published [interim Manuka honey labelling guide](#) in July 2014, which focusses on legislative labelling requirements and outlines interim characteristics of New Zealand Manuka-type honey (monofloral and multifloral). However, the conclusions drawn in this guidance needs to be considered against European law (EC Regulation 1924/2006 on nutrition and health claims made on food). In particular, consideration of whether activity claims constitute a health claim or are just an indication of quality, needs to be on a case-by-case basis to assess whether the purported 'claims' are true to label in the first instance and ensuring that consumers aren't being misled.
7. The FSA's surveillance activity on Manuka honey on the UK market involved the testing of 93 samples of Manuka honey against some of characteristics set in the interim NZ guidance for New Zealand Manuka-type honey. Within the parameters tested, 10 samples were found not to be true to label and 10 didn't meet pollen criteria.
8. From the surveillance activity it was acknowledge that there was a gap in understanding in this regard. The consumer research sought to address this, by exploring among a representative sample of the public in the UK, the:

- Awareness of Manuka honey and whether people think about it differently to other types of honey;
- Understanding of how the product is labelled;
- Opinion towards any reported health benefits that are sometimes used to market the product;
- Any perceived association between grading systems and health claims.

## **The Survey**

9. FSA commissioned a Manuka honey research using the FSA Consumer Panel. The Consumer panel is an online panel of members of the general public living in the UK that provides a cost effective and flexible methodology for conducting fast turn-around research.
10. The panel is operated by TNS BMRB <sup>1</sup> and is comprised of over 400,000 panellists.
11. The research was conducted using online, self-completion interviews via the TNS Online Omnibus and included questions to gain an understating about their knowledge and awareness of Manuka honey, its labelling and the perceived associated health properties. The research was carried out between 15-22 March 2016 and included 2500 Adults in England, Scotland, Wales and Northern Ireland, aged 16+. Quotas by age and gender and region were used to ensure the sample was nationally representative of the UK population.

## **Results**

12. The detailed results from this research can be found in the Manuka Honey Project Summary findings report which has been published on the [Consumer insight page on Food.gov.uk](#). This research has highlighted that:
  - 56% of respondents have heard of Manuka honey, which increased to 62% after further information was provided.
  - 22% of the respondents have purchased Manuka honey with 37% of those purchases being due to perceived health benefits.
  - Women were more aware of Manuka honey, 71%, compared with 54% of men.
  - Of those consumers who had previous knowledge of Manuka honey, 20% thought that it offered health benefits that differ from other types of honey. Amongst those who thought there were beneficial properties, there was no consensus about what these may be.
  - When shown mock labels of Manuka honey 80% of respondents did not know what the numbers on the labels referred to.

## **Conclusion**

13. In linking back to the aims of this research it can be concluded that;

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<sup>1</sup> British Market Research Bureau Limited

14. **Awareness:** consumers are aware of manuka honey. However, they weren't fully aware that it was any different to other honey with only a fifth believing that manuka had something health benefit although there was no consensus as to what these benefits are.
15. **Understanding the labels:** when looking at the various labels of how manuka honey is marketed in the UK the majority of respondents (65%) did not know what the numbers meant demonstrating that they don't know what the numbers represent and subsequently understand whether they are a health benefit of quality marker.
16. However, a quarter of respondents indicated that they would choose the label with the product with the word 'active' present on the label again with no clear reasoning. A quarter of respondents also indicated that they would choose the product simply marketed as 'manuka honey' as it was less confusing.
17. Consumer's perception of the various numerical values represented was again varied and it can be concluded that consumers are generally not being misled about the labelling of manuka honey however; they clearly don't understand what the labelling means. Some consumers have a vague idea that manuka honey has some health benefits but again there is no agreed consensus of what these benefits are.

#### **Further work**

18. From the research we can conclude that consumers do not fully understand the labelling and the numerical values are poorly understood with small percentage linking them to health benefits. It is clear that there is a need to consumer understanding and the results of this survey will be shared with the MPI to assist them in their continued work in this area.
19. The finding of this research will be passed on to the Department of Health (DH) to support further discussions at the European Union (EU) working group to discuss in more detail with Member States to determine whether the labelling of these products are in line with Regulation(EC) No 1924/2006 on nutrition and health claims in Food Standards Agency.