

An investigation into Fast Food advertising and health consciousness in Ireland

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Declaration: I, Carlos Eduardo Rezende e Souza, declare that this research is my original work and that it has never been presented to any institution or university for the award of Degree or Diploma. In addition, I have referenced correctly all literature and sources used in this work and this this work is fully compliant with the Dublin Business School's academic honesty policy.

Signed: Carlos Eduardo Rezende e Souza

Date: August 18th, 2018.

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Dedication:

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Abstract

This research aim to investigate the influence of fast food advertising and healthy consciousness in Ireland, offering guidance on how restaurants can enhance advertising strategy, in relation to: food-related behaviour, legislation and negative connotations of fast food. Poor-quality diet and low levels of physical activity are cause of many non-communicable diseases (Naughton, *et al.* 2015). In Ireland, the Department of Health approved the Code of Practice aiming to reduce population exposure to marketing initiatives relating to HFSS foods (Irish Department of Health, 2017).

The research approach includes a review of relevant literature on fast food advertising and consumer behaviour, coupled with collection and analysis of empirical data. A questionnaire was carried out with 110 adults across four different age groups. Another questionnaire was sent to four fast food restaurants.

Key findings: women in general; middle-age adults and older adults; and people with higher income showed significantly higher health consciousness; people with higher income had high assumption that healthy food is more expensive; taste was the most important factor when deciding for eating out; and advertisement of fast food did not appeal to potential customers of healthy fast food.

The main conclusions: advertising of healthy fast food was not seen as a strong factor over people's food choice, thus different adverting strategies should be taking into consideration due distinct behaviour between women and men, age groups and income.

This dissertation recommends future research that consider: a bigger sample size (Ireland); the approach of focus groups (depth analysis); investigate the influence of television comparing to internet exposure on food choice; investigate the influence of healthy food advertising among families with kids and no kids; and study countries with distinct cultures and distinct income per capita (East and West Europe).

Keywords: fast food, healthy food, healthy fast food, food-related behaviour, advertising, food choice

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An investigation into fast food advertising and health consciousness in Ireland

1. Introduction

Over the past 15 years numerous studies have been done in the area of fast food advertising and consumer behaviour. Some of these studies with focus on children and healthy eating. There is a general and wide perception that fast food is not healthy. And some researchers argue that the food industry has crucial responsibilities concerning public health issues, such as obesity and type 2 diabetes. (Tempels, *et al.* 2017 and Kelly, *et al.* 2010).

The relationship between food marketing and public health is conflicting, sometimes clashing with each other. The main objective of food advertising is to encourage consumers to consume even more, and consume in excess leads to health problems. In addition, the production of tasty foods requires require a complex process and in general the use of ingredients such as sugar, salt, oils and chemical compounds which are not the most healthy choices. “The food sector plays a crucial role in relation to healthy weight ... therefore, advertising and pricing play a major role in food choice” (Irish Department of Health, 2017).

Unhealthy eating is becoming a global concern. World authorities such as World Health Organisation (WHO) has established that a poor-quality diet and low levels of physical activity are causative factors in the development of many non-communicable diseases as well as having many social and economic consequences (Naughton, *et al.* 2015).

A study by Story and French (2004) presented that in USA 15% of young people were overweight and the index for children was almost double, reaching triple among teenagers, comparing to statistics from the 80's. This same study has shown data from different sources such the US Department of Health and Human Services and the American Diabetes Association where “almost two-thirds (60%) of overweight children had at least one cardiovascular risk factor (e.g., hypertension, hyperlipidaemia) and the prevalence of type 2 diabetes *mellitus* were increasing among young people.” With great concern about the future health and productivity of the American population and the increasing of the health care costs (Story and French, 2004).

In 2016, data from the Organisation for Economic Co-operation and Development (OECD) - Directorate for Employment, Labour and Social Affairs and Australian Institute of Health and Welfare (AIHW) revealed that obesity affects low and rich-income countries (Norman *et al.*, 2003 cited in Freeman *et al.*, 2016, p.2).

The United Kingdom and Ireland, through a number of initiatives, has demonstrated equal attention about its population's health and eating habits. In the UK a campaign called Change4Life aim to encourage people to change their eating habits and adopt an active life by practising exercises. Another action from the UK government was the launch of 'The Eatwell Guide', that is a policy with recommendations on eating healthy and achieving a balanced diet. (Public Health England, 2017).

Ireland has recently implemented the 'Traffic Lights Label'. The traffic light colour coding is used to rank fat, saturated fat, salt and sugar. The ranking colour stands for: high (red), medium (amber) or low (green) based on nutrient cut-off points.

In 2009, the Food Safety Authority of Ireland (FSAI) published a nationwide survey about consumers' understanding and views of food labelling. At least two thirds of consumers said they would be inclined to buy food products labelled with the nutrition claims: 'low salt', 'low sugars', 'high fibre', or 'fat free'. (Food Safety Authority of Ireland, 2009).

A study conducted by Crofton *et al.* (2013, p. 1136) examined Irish consumers' perceptions and expectations towards healthy snacks and has found that "consumers expected a healthy snack to contain low levels of calories, fat, salt and sugar, and to contain high levels of wholegrain, oats, bran, nuts, seeds, pulses and fruit". A demand for healthy snacks, or healthy fast food in general can be related to the fact that traditional fast food, known as high in calories, trans fat (fat created in an industrial process), sugars and salt, is pointed as cause of obesity and heart diseases. (Arcan *et al.* 2013, p. 1-3; American Heart Association (no date), p.1; Jolly, 2011, p. 3; Herron, 2014).

A study conducted by Kelly *et al.* (2010, p. 334), concerned about unhealthy food and child obesity. Examining commercial activity around food marketing in Irish schools, the researchers found that 81.4% operate shops or canteens that sell snacks, 44.7% have drinks vending machines and 28% snack vending machines. In response to Irish regulations 87.3% of schools agreed with establishing a national voluntary code of practice in relation to industry sponsorship, that is recommended by the Irish National Taskforce on Obesity.

Another study investigated the frequency and type of food and beverage TV advertised for children in UK and Ireland. The study analyzed the morning broadcasts between 6:00 and 11:30 in both countries. The results showed a total recording of 1,155 food and beverage cues. The most frequent food cue were sweet snacks with 13.3% and sweets/candy with 11.4%. Regarding beverage cues, tea/coffee was the most frequent with 13.5%, and sugar-sweetened beverages 13.%. As final result, the study showed that both countries present high levels of unhealthy food cues, showing evidence of unhealthy food in children's programming (Scully *et al.* 2014).

Other two research investigate the influence of television food advertising on consumer's food choice. The first one, conducted by Scully *et al.* (2008), examined the association between television advertising exposure and Australian adults' consumption of fast foods. Results shown a positive relation between cumulative exposure to television food advertising and fast-food consumption. The study by Kemps *et al.* (2014), also conducted in Australia, investigated consumer behaviour after exposure to television food advertising, noticing an increased self-reported desire to eat.

A research by Richards and Padilla (2007), debates the question of fast food advertising *versus* consumption. This complex study took in consideration the fast food industry in Canada. As well used an empirical model of fast food demand, and an analysis of the promotion effect to understand "brand choice, category choice and purchase quantity". The results agreed that in Canada, advertising increases demand for fast food.

In Ireland, advertising of food is also a concern by the health authority. One of the latest figures point the country as having the fourth highest prevalence of overweight and obesity in men in the EU and the seventh highest prevalence among women, according to Irish Department of Health (2017). To tackle this issue, in 2016 the government approved and published a policy called 'A Healthy Weight for Ireland - Obesity Policy and Action Plan, 2016 - 2025', urging government and society to work together. "This policy is committed to 60 different but integrated actions that include: Develop, implement and evaluate a Code of Practice for food and beverages promotion, marketing and sponsorship", Irish Department of Health (2017).

From these studies it is possible to affirm that the Irish government and consumers are concern about unhealthy eating. However, there is no many studies conducted in Ireland regarding the relation between fast food advertising and consumption. This gap offers an

opportunity to this research to investigate the advertising of fast food and consumer behaviour towards food choice in an Irish perspective. So, the proposed research question:

<p>Is Irish adults' food choice influenced by advertising of fast food?</p>
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Consumer behaviour towards fast food is changing. Consumers are demanding healthier options and they would pay more for that. According to Nielsen's 2015 Global Health & Wellness Survey cited in Forbes, 2015, 88% of respondents are willing to pay more for healthier foods.

Fast food restaurants are responsible for about 35% of Irish spending on foodservice industry (The Irish Times, 2016a). And particularly the healthy fast food market with growing presence in Ireland.

By adding valuable knowledge to the field of advertising of fast food and consumer food-related behaviour, this research will directly benefit the fast food industry and academy aiming to:

1. Better understand consumer behaviour and the motivation behind healthy eating.
2. Assist fast food restaurants, specially healthy fast food business enhance their advertising.
3. Discuss how healthy food and food safety legislation can affect the present fast food business.
4. Propose marketing strategies that deal with the negative aspects of the unhealthy connotations of fast food.

With a qualitative research in format of interview with the industry looking at fast food restaurant, this study will have a depth analyse of advertising of fast food and healthy food. Through a quantitative research, by applying a questionnaire the research proposes to investigate which factors influence consumer behaviour towards food choice, considering eating outside their homes.

2. Literature Review

2.1 Literature Introduction

The literature review was evaluated to bring relevant and up to date research, study cases and newspaper reports on fast food and its advertising; the issue around food advertising for children; healthy food and healthy fast food; public health legislation; healthy eating studies, and some marketing and advertising concepts. With all those subjects with sources in Ireland and abroad, aiming to support this research objective.

2.2 Literature theme one - Food and Fast Food Advertising

Advertising is part of a company's communication mix, and it has a very wide scope. For Linehan and Cadogan (2011), the main objective is to persuade consumers to purchase a product or service. According to Belch and Belch (2012, p. 20), advertising enables the company to build a positive and "unique images and associations" to the brand. Some consumers are influenced by brands and for what they stand for it. The total advertising expenditure in western Europe, was predicted to be worth US\$ 38 billion in 2015 (eMarketer, 2011 cited in Boyland and Whalen 2016, p. 3).

Tempels *et al.* (2017, p1) and Boyland and Whalen (2016, p. 1), argue that international food companies, which are called the "Big Food", contribute to problems such as obesity and type 2 diabetes. These same companies produce most of the HFSS food and drinks (HFSS stands for high in saturated fats, fat, sugar and salt) that contribute to developing diet-related NCDs (noncommunicable diseases).

A review paper from Boyland and Whalen (2016, p. 1-4), discuss food advertising and consumption in Europe with three major approaches. First is the use of digital marketing, that is gaining space from traditional media, especially television. Companies are currently spending more with online advertising. Facebook, Instagram and YouTube are some of the platforms that have been presenting effective food brand publicity. Second is the increase of the personalised advertising where the message is designed according to each consumer profile.

According to Boyland *et al.* (2016), there is no evidence that prove that food advertising increases food consumption in adults. The results of Mills *et al.* (2013) study did not

determined if it is true or not, that food advertising affects food-related behaviour, attitudes or beliefs in adults, however, the results indicate that there is an impact which varies in subgroups such as gender, weight and food habits.

Australian research shows that advertising of fast food it does influence consumption. In 2007 Scully *et al.* (2008), conducted a research to examine the association between television advertising and consumption of fast foods on adults. Through a cross-sectional telephone survey with questions that “included measures of frequency of fast-food consumption at different meal times and average daily hours spent watching commercial television”. Scully *et al.* (2008, p. 105). The results show that “23% of respondents usually ate fast food for dinner at least once weekly, while 17% consumed fast food for lunch on a weekly basis. The majority of respondents reported never eating fast food for breakfast (73%) or snacks (65%)”. Regarding television time spending, “41% of respondents estimated watching commercial television for 1h/d (low viewers); 29% watched for 2h/d (moderate viewers); 30% watched for 3h/d (high viewers). After adjusting for demographic variables, high viewers were more likely to eat fast food for dinner at least once weekly compared with low viewers”. As the authors established: “the results of the study provide evidence to suggest that cumulative exposure to television food advertising is linked to adults’ fast-food consumption”, Scully *et al.* (2008, p. 105).

Boyland and Whalen (2016), also discuss about the influence of price on food and drink expending. Results from a number of articles shows “evidence that price promotions and retail displays increase purchases of high sugar foods” (Press release 04/08/2016; Nakamura, R. *et al.* (2015) and Public Health England, 2015, cited in Boyland and Whalen 2016, p. 7). In the same article is given an example from England, where “40% of food and drink expenditure is estimated to be on products with price promotions, with more promotions on HFSS foods than healthy foods” (Press release 04/08/2016, cited in Boyland and Whalen 2016, p. 7). The authors argue that the small number of “evidence of food promotion in adults” do not imply that fast food advertising does not influence food choice, particularly considering marketing budgets that fast food companies allocate for advertising and other marketing activities.

Kemps *et al.* (2014), investigated eating behaviour in Australians after exposure to television food advertising. They first “developed a word stem completion task to measure accessibility of food-related cognitions”. Then in two subsequent experiments, 160 female undergraduate students (Experiment 1) and 124 overweight or obese community-dwelling women (Experiment 2) viewed a series of television commercials advertising either food or non-food

products". The next step was to complete the word stem task and also rated their desire to eat. The results show that "exposure to televised food advertisements led to the completion of word stems with more food- and eating-related words in both experiments. In both samples, there was a positive association between accessibility of food-related cognitions and reported desire to eat, following priming with television food advertisements". As final conclusion, "an increased activation of food-related cognitions may provide a mechanism for the link between food advertising and consumption. This has implications for tackling pathological (over)eating", Kemps *et al.* (2014, p. 1202).

A research by Richards and Padilla (2007, p. 2; p. 17, p. 25), studied the effects of fast food advertising and consumption, observing "market share and total demand by estimating a discrete / continuous model of fast food restaurant choice and food expenditure that explicitly accounts for both spatial and temporal determinants of demand". The complete sample was 12,000 Canadian households who reported purchasing food away from home for a period of 6 years (2000 - 2005), with focus on visits to fast food restaurants. Nevertheless, a random sample of 139 households was chosen to create a more tractable data set. The results show that marketing of fast food increases market share and expand demand for fast food in general. The conclusion emphasizes that "the expansion in demand is far greater than that due to brand-switching".

In a wider point of view, Tuder (2016), presents four marketing elements responsible for influence consumers' food choice: Social Media, Word-of-Mouth, Television and Celebrity Endorsement. Social Media such as Facebook and Instagram, can influence people's decision. How many times per day we check our news feed? The author mentions that "the majority of buying decisions about what to have for a meal happen approximately two hours before mealtime". As a result, our fast food choice might be in response to the ads we are exposed. Second is the Word-of-Mouth. We tend to trust on recommendation and opinion from people we know and at certain extent has some influence on our decisions.

Another bias is Television, which can influence people's opinion, including what consumers eat. In 2014, eMarketer - a market research company - published a global research showing that people were spending 4h31min in front of a TV and 5h16min with digital media. And the last element is celebrity endorsement. Consumers in general are not aware of how much celebrities can influence purchase decision, including food choice. "With repetition, the association between celebrity and product create value in the mind of the consumer; credibility is formed as well as brand recognition and trust" Tuder (2016).

King (2018), describes that various elements can influence food choice, for instance, flavour, aroma and appearance, but the author strength this influence to four major factors: Culture, Advertisers, Health and Time. The author argues that our preference for sweets and snacks may have started in childhood with our parents giving them to us as reward instead of healthier food. Advertisers tend to use lighting, shelf placement and packaging to influence consumers' choice. Medical history or healthy habits also can determine the king of food we eat. And the fast-pace of our lives leave us with time shortage. As consequence fast food restaurants or frozen food at home become first food options.

Acknowledging that the food sector plays a crucial role in relation to healthy weight the Irish Government approved in 2016 'A Healthy Weight for Ireland - Obesity Policy and Action Plan, 2016 - 2025'. The purpose of this code of practice is to "ensure that foods high in fat, especially saturated fat, sugar and salt are marketed and advertised in a responsible way, thereby reducing the exposure of the Irish population to marketing communication concerning these foods to exert a positive influence on healthy eating patterns". As established: "the overall objective of this code is to reduce exposure of the population to marketing initiatives relating to foods that are high in fat, sugar and/or salt (HFSS foods).

To conclude this section, the last two papers have their focus around the discussion on healthy fast food *versus* fast food with healthy options our health claims. The first article is a result of a research conducted by Chandon and Wansink in USA in 2007. The second one written by McDermott in 2010 is about Tony Pace and his work as CMO for Subway, an American fast food company, one of the world's biggest fast food chain.

Chandon and Wansink (2007), have executed an extensive literature review and backed with primary research. The study, carried out in USA, proposed and tested how health claims influence food decision, would explain why the rate of obesity still increasing in America while is also increasing the number of restaurants holding up a healthy flag. For this research two fast food restaurants, with opposite positioning, was used as an example. One is Subway, which is positioning to be healthy and the other side is McDonald's, which do not. The research was compound in four studies, and a short brief of some of its results is showed next.

The first one is that consumers estimated that familiar sandwiches and burgers contain up to 35% fewer calories when they come from restaurants claiming to be healthy, such as Subway, then when they come from restaurants not making this claim, such as McDonald's Chandon and Wansink (2007). As the Study 1 addressed calorie estimations, there was as

belief among consumers that Subway meal had 21,3% fewer calories than his competitor McDonald's. Another finding is that healthy conscious consumers or not are both influenced by health claims and calorie estimation. The Study 2 conclude that "although nutrition involvement improves the quality of calorie estimations, it does not reduce the halo effects of the restaurant brand's health positioning" (Chandon and Wansink, 2007, p. 303).

Other results, as presented in Study 3, shows that consumers tend to choose up 131% higher calories of beverages side dishes, and deserts when the main course is target as healthy. By answering some questions about eating healthy and attention to calorie information, the respondents' behaviour did not show any relation to healthy eating goals. Finally, the Study 4 proposed correct the effects of health claims on main dish calorie estimation and on side-dish choices. And the results presented that the health halo effects were eliminated. "In fact, the effects of health claims are slightly reversed when participants consider opposite arguments. ... The Study 4 also shows that manipulating the name of the restaurant and the type of food on the menu, while keeping the target meal constant, suffices to influence consumers' choice of side orders and their estimation of the number of calories contained in a familiar meal consisting of a ham sandwich and a cola" (Chandon and Wansink, 2007).

The authors at the end emphasized that was not the purpose of the study recommend people to not eat in restaurants, like Subway, which does offer healthier meals than their competitors. "As showed in Study 1, meals ordered at Subway contain, on average, fewer calories (M = 694 calories) than meals ordered at McDonald's (M = 1,081) ... the findings show that the public health benefits of healthier foods are at least partially negated by the halo effects of health claims that lead people to order calorie-rich side dishes and beverages".

As a complementary and last reading of this chapter is presented an article by McDermott and published by WARC in 2010. This paper was about the work of Tony Pace, at that time, CMO at Subway. He quoted: "Subway's position is unique because there are so many different facets to the brand: fresh, made-to-order, more healthful than other fast food" (McDermott, 2010). His words come right to the discussion around the claims of some fast food restaurants make as being healthy. However, is important to mention that this observation does not mean a judgment of Pace's statement but to emphasize the relevance of this research.

2.3 Literature theme two - Food Advertising for Children

As mentioned before, food advertising for children and teenagers is not the focus of this study. Given the extent research in this area, some valuable studies were found, which is believed can positively contribute to this very research.

The importance of advertising for the success of a business is undeniable. In the US food advertising was the second biggest sector, only behind the automotive industry (Story and French, 2004). When it comes to advertising for children, some premises of consumer behaviour are not left behind. The article approach that not only adults, but children can also pass through all the brand stages: awareness, preference, loyalty, and food purchase and repurchase (p. 14).

Other studies also show concern about food marketing to children. Some of them have consistently shown that children exposed to food advertising prefer and choose advertised food products more frequently than those not exposed to such ads (Kotz K, and Story M, 1994; Dibb, S. and Harris, L., 1996 and Lewis, M.K., and Hill, A.J., 1998 cited in Story and French, 2004).

Television is one of the biggest advertising channels. In the US children and adolescents watch TV for almost four and a half hours each day. (Rideout *et al.* 2010 cited in Arcan *et al.* 2013). This article brings findings from another study by Food for Thought, 2007 saying that “advertising accounts for half of all advertising time in children’s TV programs. Children between 2 to 7 years see 12 food ads and those between 8 to 12 years see 21 food ads each day, or 7,609 ads each year” (Arcan *et al.* 2013). According to Arcan *et al.* (2013) since we started developing our food taste and preference at young age the excessive exposure to food ads will permanently influence our eating behaviour.

It has been documented that among young children, TV viewing is significantly associated with increased consumption of unhealthy foods, including fast food (Chang, H. and Nayga Jr., R.M., 2009 cited in Arcan *et al.*, 2013). Also increased requests of foods seen on TV, and more positive attitudes toward unhealthy foods. (Dixon, H. G. *et al.*, 2007; Chamberlain, L. J. *et al.* 2006 cited in Arcan *et al.* 2013).

The next paper is a study by Bernhardt (*et al.* 2013), comparing television fast food advertising aimed to children and the ones aimed to adults in the US. As method, all nationally televised advertisements for the top 25 American fast food restaurants from July 1,

2009 to June 30, 2010 were obtained and reviewed to identify those advertising meals for children and these advertisements were compared with adult advertisements from the same companies. Of the 92 children's meal advertisements during the study period 99% were attributable to McDonald's (70%) or Burger King (29%). Healthy food, milk and/or apple slices, were present in 78% of children's advertisements and none of the adult advertisements. Median food image size was only 20 percent of the screen diagonal in children's ads compared with 45 percent in adult ads (Bernhardt *et al.*, 2013, p.4).

Closing this chapter, two more papers were examined. Herron (2014), raises the problem in Australia where 25% of Australian children is overweight or obese and 41% of their daily food consumption are considered unhealthy. Another alarming statistic is the estimated AUS\$56 billion spent on obesity every year.

In Ireland a broadcasting legislation passed in 2001 requiring the Broadcasting Commission to introduce a code that deals specifically with advertising either directly or indirectly targeted at children. Approved in January 2015, the code defines children as persons aged under 18 years. And bans the use of cartoon characters and celebrities to promote foods to children and certain categories of food, such as fast foods, must carry messages stating that the foods should be eaten in moderation; as part of a balanced diet (Jolly, 2011).

Overall the discussion around food advertising for children does not leave behind the issues concerning legislation, in most of the cases the lack of legislation. Several authors expressed the importance of regulation concerning the exposure of advertising of unhealthy food; the impact of advertising and obesity on children, and children eating habits (*American Heart Association*, no date; Bernhardt *et al.* 2013; Herron, 2014 and Jolly, 2011). Another call is for more regulation in regard to sponsorship for sports events (Herron, 2014) and sponsorship in schools (Kelly, 2010; The Irish Times, 2017).

2.4 Literature theme three - The Food Industry and Public Health Legislation

In this section is discussed the responsibilities of the food industry and its advertising has on public health problems. And approach some governments' initiatives to deal with obesity and some diseases such as diabetes, heart condition.

Tempels *et al.* (2017, p. 402) in its paper argue that 'Big Food' corporation is partially responsible for public health problems such as obesity, but on the other side, those same companies engage with programs to prevent those diseases. The article highlights the importance of shared responsibility suggesting that food companies, governments, individuals, and civil society, work together embracing on population health problems.

The next article is a research by Nixon *et al.* (2015). The paper examined news articles containing obesity-related arguments that referenced a trade association or industry-funded non-profit organization, between 2000 and 2012. In this period 393 articles were found. Only 2% were referred to obesity-related arguments attributed to the food industry in general. The highlight was the years 2005 and 2009. The authors explained that in 2005 the food and beverage industry acted in response "to a combination of obesity-prevention policy developments and launched self-regulatory initiatives" (p. 2230). One example was the limitation on soda in schools and the issue around "McDonald's placement of nutrition facts on its food packaging" (p. 2230). And from 2009, the industry's presence in newspaper coverage was about the industry reacting from a growing number of public health policy actions, including the Affordable Care Act's menu-labelling provision in 2010 and various states and local efforts to regulate sugar-sweetened beverages.

Magnusson (2010), debates around the responsibilities food industry has to population health problems, with the industry showing resistance to the adoption of a food labelling scheme. Australia is in one of the countries fighting against obesity. Statistics showed in 2008 that 68% of men and 55% of women were either overweight or obese (Australian Bureau of Statistics, 2009 cited in Magnusson 2010, p. 2). And there was an increasing of the risks of chronic diseases including diabetes, heart disease, and several types of cancer (Pérez, A. *et al.* 2007 cite in cited in Magnusson 2010, p. 2). To tackle this problem in 2009 the Australian government introduced the 'Traffic Lights Label'.

A research conducted by Australian organizations and the Cancer Council showed that Traffic Lights was highly approved. Consumers found to be easier to identify healthier the foods, with a survey showing that consumers using traffic light labelling were "five times more likely to correctly identify the healthier food products, compared to "daily intake label" which was monochrome % system). Furthermore, the debate about nutrition labelling has moved beyond packaging to food items in chain restaurants in countries such as the United States and Australia (McColl, K. 2008 cited in Magnusson 2010 p. 9).

In regard to food labelling, Ireland had also put in action. In 2009 the Food Safety Authority of Ireland (2009), published a nationwide survey about consumers' understanding and views of food labelling. A questionnaire was carried face-to-face with 1,021 consumers and interview face-to-face with 50 consumers. The survey showed that 87% of consumers considered the nutrition table on a label to be very or fairly important, but most would prefer to see nutrient values stated per portion (e.g. per bowl), than per 100g or 100ml (FoodBev Media, 2009). About 65% of consumers would be inclined to buy food products labelled with the nutrition claims: 'low salt', 'low sugars', 'one of five a day', 'high fibre', or 'fat free'.

More than 70% of consumers surveyed said they were very or fairly concerned about salt in food, so it's important that food labelling is presented in a way that allows consumers to identify lower salt options. Currently, the salt content of a food is declared as 'sodium', but the majority of consumers said that they would prefer to see a 'salt' value on the label instead, though labelling both would be acceptable.

The Irish govern has recently implemented the 'Traffic Lights Label'. The traffic light colour coding is where key nutrients, such as fat, saturated fat, sugar and salt, are ranked and colour coded. The high levels (red), medium (amber) or low (green) based on nutrient cut-off points. A survey by the Food Standards Agency UK showed that 39% of consumers found the traffic light system most informative comparing to the Guideline Daily Amount – GDA (FSAI, 2009).

To finish the argument about food advertising and legislation is presented a newspaper articles about a new voluntary code of practice developed by the Department of Health, the HSE, food companies and advertisers. According to The Irish Times (2017), this code aims to reduce exposure to advertising of food and drink that is classified as HFSS - high in fat, sugar and salt. The article presented an alarming data: 60% of Irish adults, and 25% of children, are overweight or obese. With increasing obesity levels Ireland is set to become the most obese in Europe by 2030.

2.5 Literature theme four - Healthy Eating Studies

The literature review closes bringing to the discussion research about eating habits studies. The first two research debate about eating habits in Ireland. The last one is an American documentary about the fast food industry and unhealthy eating.

The study conducted by Crofton *et al.* (2013), examined Irish consumers' expectations towards healthy cereal based snacks. The researchers explicated that "over the past decade

there has been a steady increase in the number of consumers demanding products with functional benefits throughout” (Crofton *et al.* 2013, p. 1131).

Consumers’ attitudes and preferences towards healthy food products are closely related to demographic variables such as age and gender (Tuorila *et al.*, 1998; Roininen *et al.*, 2001 cited in Crofton *et al.* 2013, p. 1131). Regarding gender women have been described as more likely to comply with dietary guidelines (Bogue *et al.*, 2005 cited in Crofton *et al.* 2013, p. 1131) and have a more positive attitude towards the consumption of healthy snack alternatives when compared with men (McIntyre and Baid, 2009 cited in Crofton *et al.* 2013, p. 1131). In addition, older consumer groups have been shown to be more diet conscious and more likely to make healthier snack choices compared with younger adults who are more oriented towards unhealthy “comfort snacks” (Irish Universities Nutrition Alliance (IUNA), 2001; Wansink *et al.* 2003 cited in Crofton *et al.* 2013, p. 1131).

As data collection method Crofton *et al.* (2013), used three male and three female focus groups, both divided in three age groups. Some results are highlighted next:

1. Consumers expected a healthy snack to contain low levels of calories, fat, salt and sugar, and to contain high levels of whole- grains, oats, bran, nuts, seeds, and fruit’;
2. The definition of snack was not conclusive by the participants. But the majority defined snack as “as something eaten between regular meals”;
3. Most of consumers would choose an unhealthy snack “especially if they had to “go out of their way” to buy it”;
4. Participants also said that “a healthier snack would appear more “home-made” and “natural” and expected the product to be “baked” or “not fried” or produced under organic growing conditions’;
5. “Taste” appeared to be decisive when choosing a snack. And constant mentioned as the main reason for not choosing a healthy snack. Men was reported to assimilate the word “healthy” with “boring” or “tasteless” food;
6. Healthy snacks were strongly associated with a higher price, with some impact on the food choice by the student’s groups;
7. There was a perception that snack appearing healthy but with cheaper price, comparing its competitors, would indicate have less quality;
8. Male participants reported that healthy snack alternatives available aim towards women;
9. All groups apart from the male students were concerned about the “accuracy of health claims” and with variety of snack products being labelled as “healthy”.

10. Women showed more positive attitudes towards choosing a healthy snack than male groups.

The second article is a study analysing healthy eating motivation in relation to dietary, lifestyle and activity behaviour by Naughton *et al.* (2015). As method, a cross-sectional survey, with a sample of 1,262 adults. Some of its results are listed next:

1. People with strong motivation to eat a healthy diet had healthier dietary profiles, exercised more and watched less television compared to those with weak motivations towards eating a healthy diet;
2. Individuals motivated to eat healthy are more likely to make healthy food choices;
3. Women were more likely than men to be positively motivated towards eating a healthy diet;
4. Healthy eating motivation becomes stronger with increasing age;
5. Social class was non-significant, which contrasted to previous studies where significant associations were shown between social class and healthy eating.

The third reference of this chapter is a 2004 documentary by Morgan Spurlock, an American filmmaker, who decided to document a 30-day diet eating exclusively at McDonald's, including bottled water. During this time, he was supervised by three physicians – a cardiologist, a gastroenterologist, and a general practitioner. As well as a nutritionist and a personal trainer. Soon he increased his cholesterol levels, started to present kidney problems and other health issues. At the end of his diet he gained around 11kg.

He was criticized by his extreme experiment, while having his 3 meals a day he stopped doing exercises. Only taking the 5,000 steps (the average distance an American walk every day). Also criticized by not taking the advice of his doctors, of stopping with the diet after presenting serious medical conditions.

The overall message with his diet was to increase people's health conscious. Morgan Spurlock not only show the consequences of eating fast food with such high frequency – McDonald's consider people who eat their food at least once a week as 'heavy users', and they count for 72% of the customers. And there are the 'super heavy users' who eat 3 or more times a week. There is also concern about people who tend to go for supersized options, like the 1.5 litre of soft drink.

The documentary also approaches other two big issues, the presence of unhealthy food in American schools and the strong lobby the food industry has on government legislation. As

an example, the “Cheeseburger Bill”, a law passed in the US Congress that would make it illegal for people to sue food companies for making them obese.

2.6 Literature Conclusion

From the literature review is noticed that until now most of studies and research in the field of advertising and the fast food industry regard specially children and the excessive exposure to food and beverage advertising on television; and public health problems and its cost. This research aim to investigate the influence of advertising on consumer’s fast food choice on adults in Ireland and health consciousness.

To achieve research objective 1 – A better understanding of consumer behaviour and the motivation behind healthy eating, the literature review covered previous research in the area of eating habit carried out in Ireland and US. For research objective 2 – Assist fast food restaurants, specially healthy fast food business enhance their advertising, the literature was based on advertising and marketing strategy, added to papers about food advertising in Europe; and a number of studies that discuss the influence of television and some other factors on food consumption. To meet objective 3 – Discuss how healthy food and food safety legislation can affect the present fast food business, the literature approached some current legislations that impact on fast food adverting in Ireland. Finally, to meet objective 4 – Propose marketing strategies that deal with the negative aspects of the unhealthy connotations of fast food, the literature was based on general marketing strategy and digital media.

The findings of the literature review will be discussed later with findings from the survey with consumers and the interview of some experts involved in the food industry. The methodology for primary data collection is explained in the following chapter) The objective is to examine for any agreements or disagreements comparing to previous research, also considering the possibility of bringing new knowledge to the academy and to the industry. The main objective is to answer the research question: “Is Irish adults’ food choice influenced by advertising of fast food?”

3. Methodology

3.1. Methodology Introduction

A methodology describes the process of the research including the methods used for data collection. This chapter explains the techniques used to collect data from Primary Research. First describing the Research Design, from which philosophy the study most relate to. Second step is the Approach with a description of the nature of this research and the developing of theory. Next explain which Strategy is used to collect data and why it was considered to this research. This chapter also detail the sampling, in other words, which people or groups of people have been approached and what materials and equipment were used to store data. This same data was analysed in accordance to its nature. Coming to the end a description regarding Ethics and its general issues. And finally, the Limitations faced during the study.

3.2 Research Design

3.2.1 Research Philosophy

This study research falls more into an Interpretivist philosophy. According to Saunders *et al* (2009, p.116) Interpretivism supports the idea that when research is conducted with people is necessary take into consideration that we act as part of a society from we may have “our own set of meanings”. Furthermore, there is a debate with that Interpretivism is recommended to business and management research such as marketing.

3.2.2 Research Approach

The research approach identified as suitable for this study was the Induction approach. Where data is collected, and theory is developed as a result of data analysis (Saunders *et al.* (2007, p. 118). Also, useful for studies with small samples (Saunders, *et al.* 2007 p. 119). The authors summarize that some characteristics of the Induction approach as listed (Saunders, *et al.* 2009, p. 127):

- An understanding of the meanings humans attaches to events;
- Close understanding of the research context;
- The collection of qualitative data' and
- Less concern with the need to generalise,

3.2.3 Research Strategy

To answer my research question and meet my objectives, this research employed multiple methods. A Survey (quantitative method) was required to reach a considerable number of consumers in Ireland. Using a questionnaire to obtain responses respecting the influence of marketing advertising of healthy food on its food choice. Also, this research approached fast food companies through an in-depth Interview (qualitative method), that was the most suitable strategy to obtain detailed information about the market and a more complete picture about their marketing advertising management.

3.3 Sampling - Selecting Respondents

This research covered two populations of interest: Irish consumers and fast food restaurants. Consumers were approached by a questionnaire sent through Survey Monkey, an online survey platform. Fast Food restaurants were approached with an interview. A set of questions were sent ahead by email. Due to the limitation of time, was not possible to carry out a face-to-face interview, so the interviewees have written down the answers and sent it back also by email. answers were collected.

The Irish Population

According to the latest Census, from 2016, Ireland had a total population of 4,761,865. Only Dublin city and suburbs there are 1,173,179 people. Considering that still a big population for this market study, it is proposed to approach a sample of the population.

Because the focus of this research was adult consumers the population of interest was also adults, males and females, age of 18 years old and over, living in Ireland. A sample frame was not available. Therefore, no-probability sampling was used, and the chosen method was snowball. The use of snowball sampling occurs when there is difficulty of finding individual cases (Saunders *et al* 2009, p. 234, 240). The expected sample size was around 100 people. Because this research was conducted by only one person this research was carried out in Dublin city, since is the biggest city in the country and concentrate a large number of fast food restaurants. As I believed a 100 people was a reasonable number to manage a questionnaire survey.

The snowball started by contacting people from four different groups based in Dublin, which I have considerable access:

- Arnotts employees - 10 employees
- Cantando Chamber Choir - 30 members
- ELA Language School - 10 employees
- Itsa Bagel employees - 20 employees

The next step was asking them to identify other people to answer the questionnaire and so forth. The process was planned to stop when achieving 100 respondents or above. The participants answered a questionnaire available online, with mixed open and closed questions. As explained by Fink, 2003 (cited in Saunders *et al.*, 2009, p. 374), open questions allow respondents to give answers in their own words. Closed questions use a set of alternative answers with instructions of how to answer it. (Saunders *et al.*, 2009, p. 375). For example, questions looking for facts, as gender, age and income; and questions investigating opinions, with predetermined statements, as an example level of agreements and likeability (Collis and Hussy, 2009).

The respondents had a time window of 2 weeks to answer the questions. At the end of data collection, 110 respondents (55 women and 55 men) have completed the questionnaire. This difference meets the latest census of 97.8 males for every 100 females. (Census 2016). The heterogeneous sampling allowed this study identify patterns in different groups.

The second population of interest was fast food restaurants. A sample frame was also not available. Therefore, no-probability sampling was used. The chosen method was purposive based on the companies that agreed with an interview.

The sample size is 4 companies:

- Itsa (cafes, restaurants & catering)
- Umi Falafel
- Subway Ireland
- Bombay Pantry

Representing Itsa, the person who took part in the interview was Domini Kemp – Co-founder and Director. Frances Adgey, Marketing Manager for Subway Ireland was the interviewee. By the end of the data collection phase I had no received reply from Umi Falafel and Bombay Pantry.

The interview was semi-structured questions based. In a semi-structured interview, there are some prepared question with a possibility the interviewer add another question during the

interview (Collis and Hussey, 2009). An open questions interview allows participant to give detailed answers. (Saunders *et al.* (2009, p. 375). Data from the interview was coupled with findings from the questionnaire – Chapter 4. Survey Findings: Description, Analysis and Synthesis and discussed in Chapter 5. Discussion.

A secondary research also was done. With analysing Literature Review available in the areas: Advertising, Marketing Strategy, Food Industry, Fast Food Industry, and Consumer Behaviour, Healthy Food Legislation.

3.4 Data Collection

As mentioned before the questionnaire was available in online form. The online questionnaire was chosen because had shorter completion time comparing to postal or delivered and collection. According to Saunders *et al.* (2009, p. 364) a written questionnaire would take between 2-6 weeks from distribution to collection. The usually automated data input is another advantage. Indispensable to inform that the respondents identification will remain confidential.

The interview was set be made through a face to-face meeting. The interview method was chosen because employ higher engage by the interviewee and higher response comparing to a questionnaire method. However, due to time limitations the interviewees agreed to write down the answers and send them back by email. The questionnaire form informed in advance the voluntary and consent in taking part of the research.

3.5 Data Analysis

Data Analysis is a complex step of a research and the type of data will guide the interpretation of data collected from the questionnaire and interviews. This research employed qualitative and quantitative data. All data collected was stored physically in my personal computer and cloud storage as backup (Google Drive).

As quantitative data, this research managed categorical - nominal and ordinal data, and continuous with ratio data. For non-quantity questions Saunders *et al.* (2009, p. 385) suggest the use a coding scheme which further enable comparisons with other data. Those findings will be presented with tables, charts and graphs. The Excel spreadsheets will use be used for quantitative data analysis.

For qualitative data, through a semi-structured interview, data collected is summarised allowing to better illustrate the theme; key themes or patterns are identified; and finally developing theories and drawing relevant conclusion (Saunders, 2009, p. 490).

3.6 Research Ethics

This section addresses the ethical issues regarding access to people and organizations and the collection of data which I declared:

1. This research had no ethics conflicts;
2. Privacy and confidentiality will be maintained;
3. The participation was voluntary - the questionnaire form informed beforehand that once participants start to answer they automatically gave consent in taking part of the research, with the possibility to withdraw any time (see Appendix 1 and Appendix 4); and
4. The research does not offer any physical or psychological harm.

3.7 Limitations of Methodology

The research had identified some limitations as expressed below:

- Getting access to the industry - I have tried to get access to some of the biggest worldwide fast food chains like McDonald's and Burger King without success. Supermac's, the leading Irish fast food chain also was contacted but with no particular reason decided to not participate of the research. Chopped, the Irish healthy fast food chain was also contacted without response.
- Applying the 'snowball' sampling - there was a risk of bias, as respondents tend to refer onto other people with similarities to themselves;
- Time - the limitation of time as the survey should was to be completed within 2 months;
- Human resource - the study was conducted only by me, as an individual essay; and
- Budget - all the expenses if any, was covered by this researcher.

4. Survey Findings: Description, Analysis and Synthesis

4.1 Introduction

This chapter reveals the results of the survey described in Chapter 3 Research Methods. The research, based in the Irish market, approaches fast food consumers. They were asked about their food choice when eating out, in regard to healthy eating habits, and their response to advertising of healthy fast food. The main objective of the survey is answering the research question: "Is Irish adults' food choice influenced by advertising of fast food?"

The survey questionnaire was conducted online through SurveyMonkey platform. And the questions were structured in three sections: 1. Demographics, 2. Food Choice and 3. Fast Food Advertising. The gathering of primary data for this research allowed an analysis of consumer behaviour in the healthy fast food market. The first section will give a demographic synopsis of the respondents. The second set of questions illustrates consumers' behaviour towards healthy eating, as well their view of healthy food and the frequency of visit to a healthy and traditional fast food restaurant. The last section addresses consumers' view of fast food advertising and its influence. Of 110 respondents, 94% have completed all 14 questions. The questionnaire can be found in Appendix 2

4.2 Findings

4.2.1 Demographics

In the first section of the survey, respondents were asked about their age, gender and annual personal income. This section is highly important since it is the base line for the next analysis. The knowledge of respondents' demographics is essential for a marketing research and the results will give support to understand consumer behaviour. A clear consumer profile increases the probability of success of any marketing or advertisement strategy.

Of 110 respondents, 100% have completed the first section, which included three questions. There were 55 men and 55 women. Participants were grouped in four distinct age groups (18-35, 26-50, 51-64 and 65 years old and over). See Table 1.

Table 1 – Respondents: Q1. Gender x Q2. Age Group

Respondents – Q1. Gender / Q2. Age Group					
Gender	18–35 years	36–50 years	51–64 years	65+ years	Total
Female	18	13	23	1	55
Male	13	15	26	1	55
Total	31	28	49	2	110

The majority of respondents were at the age group of 51-64 years old (45%), followed by age group 18-35 years old (28%), then respondents age group 36-50 years old (25%), only 2 respondents were 65 years old or over (2%).

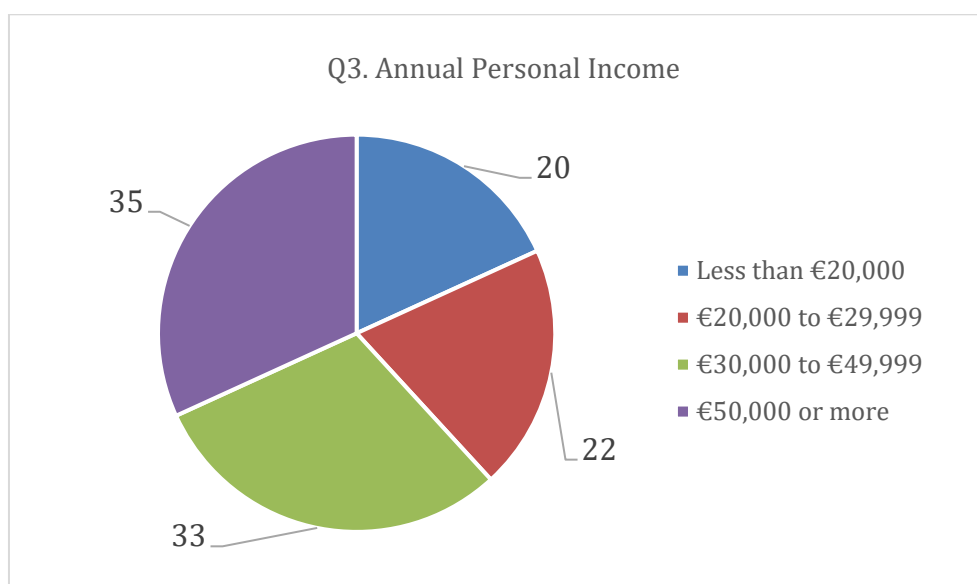
Participants were also asked about their annual personal income, (see Table 2, Question 3) and group in four distinct income range (less than €20,000, €20,000 to €29,999, €30,000 to €49,999 and €50,000 or more).

Table 2 – Q3. Respondents Annual Personal Income

Q3. Annual Personal Income	Number of Respondents
Less than €20,000	20
€20,000 to €29,999	22
€30,000 to €49,999	33
€50,000 or more	35
Total	110

In the first group, with annual income of less than €20,000 there were 20 respondents (18%). The second group, annual income from €20,000 to €29,999 with 22 respondents (20%). The group with income from €30,000 to €49,999 there were 33 respondents (30%). The last group with income of €50,000 or more was slightly the largest group with 35 people (32%). See Graph 1.

Graph 1 – Q3. Annual Personal Income



In order to examine the respondents' behaviour, with more depth, they were group considering the three variables: gender, age and annual personal income. See Table 3.

Table 3 – Overview of Survey Sample

Q1. Gender / Q3. Annual Personal Income	18–35 years	36–50 years	51–64 years	65+ years	Total
Female	18	13	23	1	55
Less than €20,000	7	1	5	0	13
€20,000 to €29,999	7	4	3	1	15
€30,000 to €49,999	4	5	1	0	10
€50,000 or more	0	3	14	0	17
Male	13	15	26	1	55
Less than €20,000	3	3	1	0	7
€20,000 to €29,999	2	2	3	0	7
€30,000 to €49,999	6	6	10	1	23
€50,000 or more	2	4	12	0	18
Total	31	28	49	2	110

From the overview survey sample, two particular groups presented the highest number of respondents. The first group is represented by women age between 51-64 years old and annual personal income of €50,000 or more (25% of female respondents) The other group is represented by men in the same age group and income (22% of male respondents).

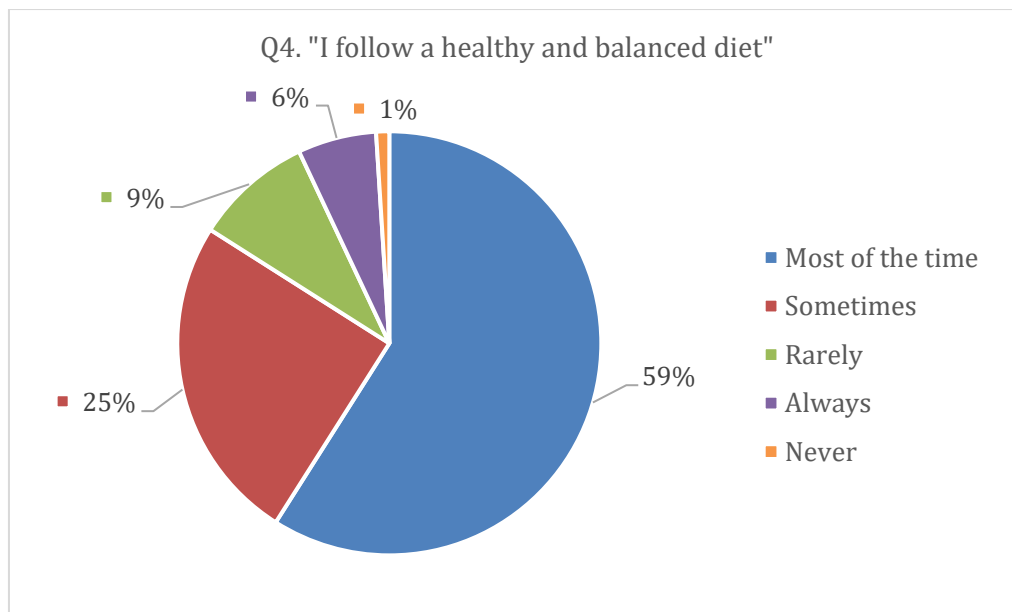
4.2.2 Food Choice

In this section there were a set of 7 questions about food choice. Of 110 respondents 104 of them (50 women and 54 men), have completed the section (95% of completion rate). The respondents were asked to choose the statement that matched to their view most closely.

4.2.2.1 Food Choice and Eating Behaviour

Question 4 "I follow a healthy and balanced diet", (Graph 2) and Question 5 "It is important that the food I eat..." (Graph 3) were set in order to get an insight of consumers' healthy eating habit.

Graph 2 – Q4. "I follow a healthy and balanced diet"



Fifty nine percent of respondents, (34 women and 27 men, total of 61 people) declared that they follow a healthy and balanced diet 'Most of the Time'. Followed by respondents who answered 'Sometimes', which was 25% of respondents (8 women and 18 men, total of 26 people). See also Table 4 as follow.

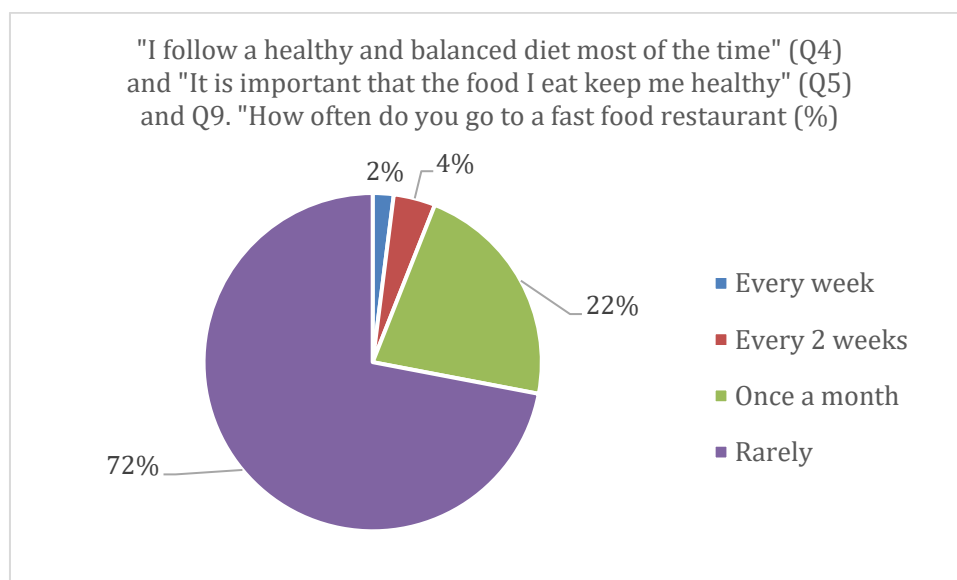
Table 4 – Q4. "I follow a healthy and balanced diet" and Gender (Q1)

Q4. "I follow a healthy and balanced diet" and Gender (Q1)			
Frequency	Female	Male	Total
Always	3	3	6
Most of the time	34	27	61
Sometimes	8	18	26
Rarely	4	6	10
Never	1	0	1
Total	50	54	104

As shown in Table 4, women are keener to follow a healthy and balanced compared to men when looking at the respondents who answered "most of the time" (56%). For respondents who answered "sometimes", the men takes the lead (69%). Overall, considering respondents who answered "Always", "Most of the time" and "Sometimes" women still more inclined to eat healthy.

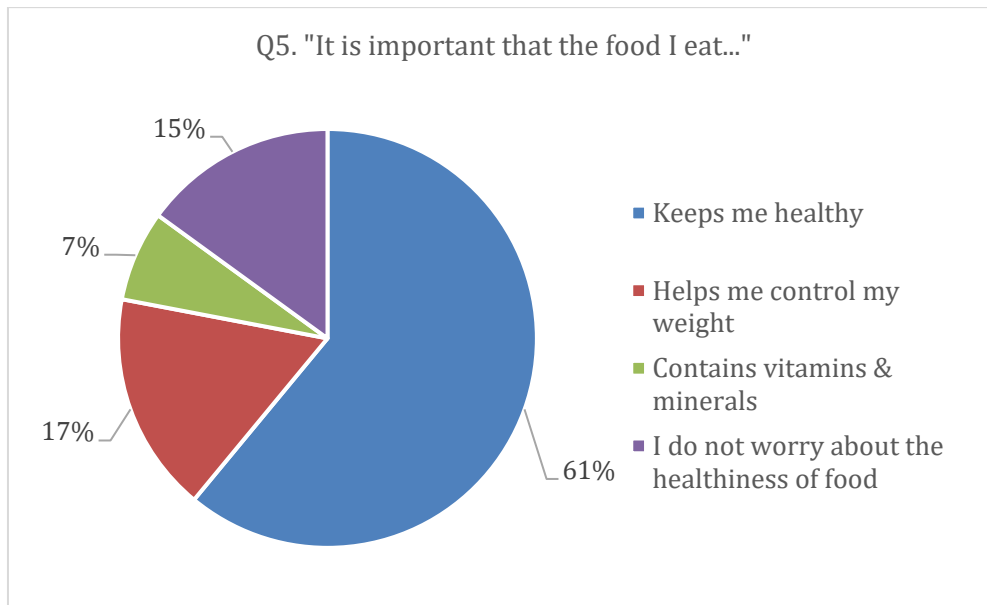
To enhance the analysis, the answer "I rarely go to a fast food restaurant" from Question 9, is added to this evaluation. The result show that 72% of respondents who "Follow a healthy and balanced diet most of the time" (Q4), and "It is important that the food they eat keep them healthy" (Q5), "Rarely go to a fast food restaurant" (Q9). See Graph 3.

Graph 3 – "I follow a healthy and balanced diet most of the time"(Q4) and "It is important that the food I eat keep me healthy" (Q5) and Q9 "How often do you go to a fast food restaurant?" (%)



The following analysis discuss, among four factors, which of them respondents most take in consideration when choosing the food they are going to eat.

Graph 4 – Q5. "It is important that the food I eat..."

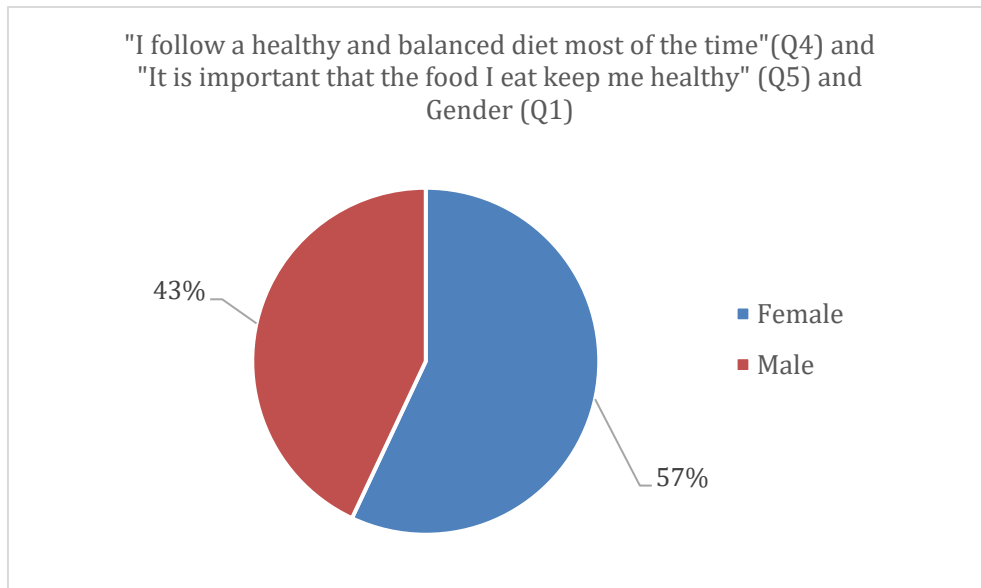


Note: Question 5 was adapted from a questionnaire applied in a research conducted by Naughton *et al.* (2015, p. 10).

When asked about the importance of the food they eat, 61% of respondents (34 women and 29 men, in total 63 people) answered "It is important to keep me healthy". For 17% respondents (9 women and 9 men, in total 18 people) it is important that the food they eat "Helps control the weight", followed by 7% respondents (4 women and 3 men, in total 7 people) who answered, "Contains vitamins & minerals". A group of 16 respondents (3 women, 13 men) "Do not worry about healthiness of food", which was 15% of respondents. Overall the analysis of the relation between gender and a healthy eating habit, show that women appear to have more interest in eating healthy.

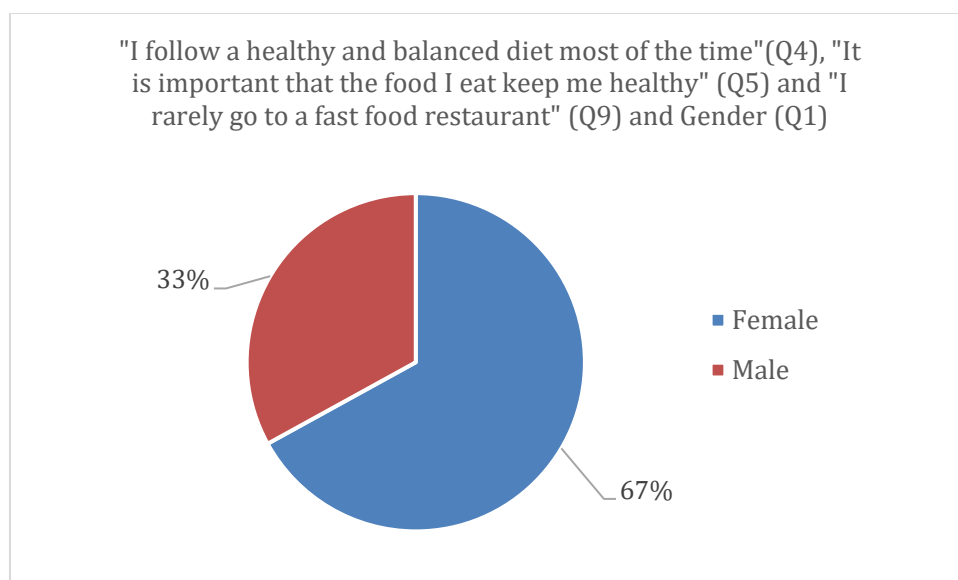
In another analysis of the influence of gender on healthy eating habits, the answers "I follow a healthy and balanced diet most of the time" (Q4) and "It is important that the food I eat keep me healthy" (Q5) were crossed. As observed on Graph 5, of 46 respondents who matched the two answers, results shows that the female group have a healthier dietary profile with 57% (26 women), compared to men with 43% (20 men).

Graph 5 – "I follow a healthy and balanced diet most of the time" (Q4) and "It is important that the food I eat keep me healthy" (Q5) and Gender (Q1)



To a greater evaluation of the influence of gender on healthy eating habits, again the answer "I rarely go to a fast food restaurant" from Question 9, is added to the analysis. The result confirm the previous finding that women are more likely to adhere to a healthy eating habit. As show in Graph 6, the percentage of women who follow a healthier dietary profile increased to 67%. In total there were 33 respondents (22 women and 11 men).

Graph 6 – "I follow a healthy and balanced diet most of the time" (Q4), "It is important that the food I eat keep me healthy" (Q5), "I rarely go to a fast food restaurant" (Q9), and Gender (Q1)

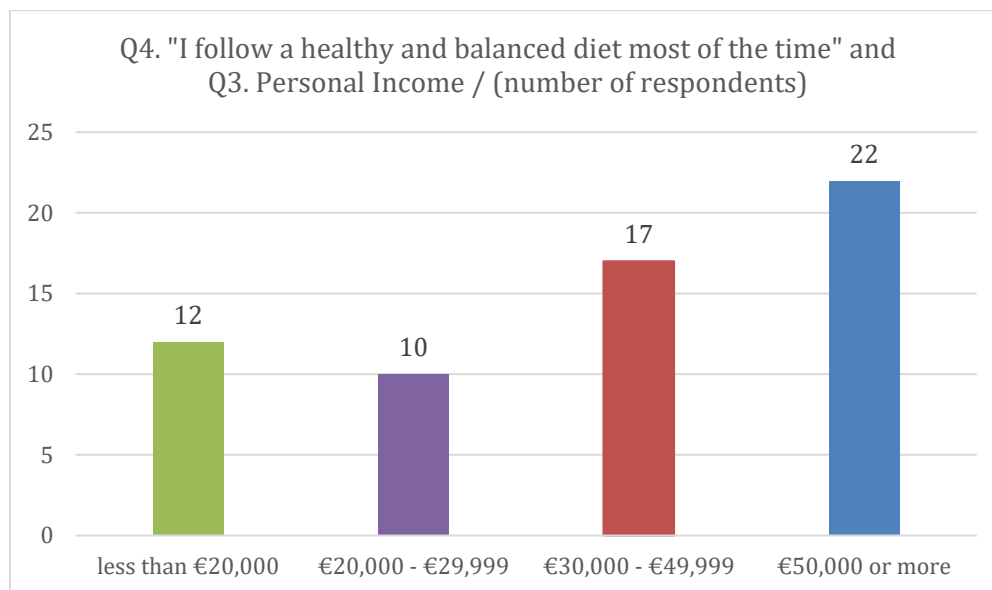


4.2.2.2 Food Choice and Personal Income

To investigate any influence on eating behaviour in relation to Income, Question 4 "I follow a healthy and balanced diet" and Question 5 "It is important that the food I eat" were crossed with Question 3 "Annually Personal Income".

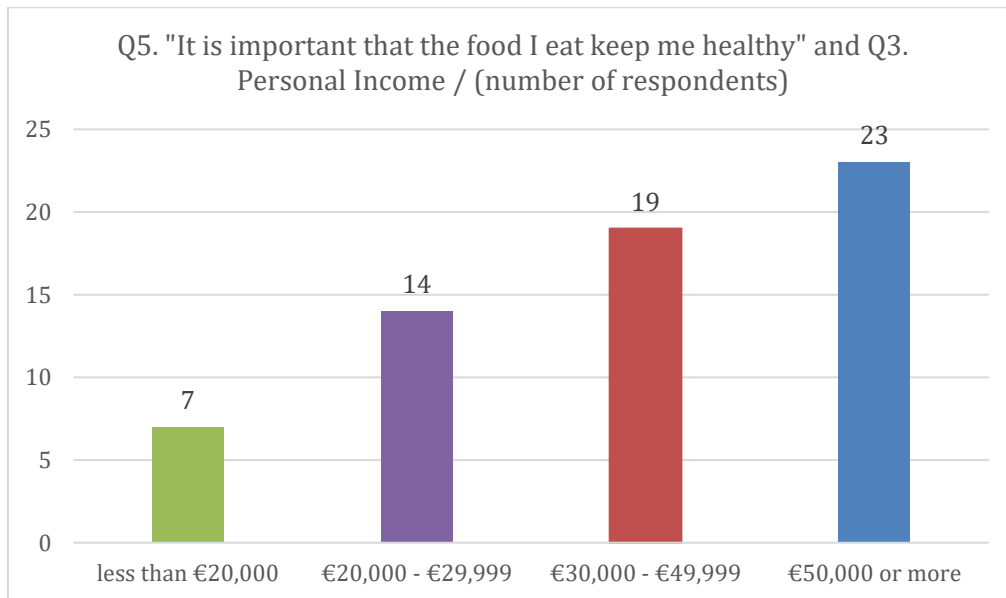
Analysing the income of 59% of respondents (34 women and 27 men, in total 61 people) who said "I follow a healthy and balanced diet most of the time", is possible to see that as income gets higher, also increases the number people with concerns about the food they eat. With income of €50,000 or more there were 22 respondents (36%), followed by group with income of €30,000 - €49,999 (28%). See Graph 7.

Graph 7 – Q4. "I follow a healthy and balanced diet most of the time"



For those respondents who answered "It is important that the food I eat keep me healthy" there were 63 respondents. The two largest group was the ones of income between €30,000 and €49,999 with 19 respondents (30%) and income of €50,000 or more with 23 respondents (37%).

Graph 8 – Q5. "It is important that the food I eat keep me healthy" and Personal Income (Q3)



From the analysis of those two graphs, data show to some extent income can influence consumer's food choice.

4.2.2.3 Food Choice and Age Groups

The next analysis of food choice investigate the relation between eating behaviour through different generations.

Again, looking at the respondents who answered, "I follow a healthy and balanced diet most of the time", the age group which show more tendency of this habit was those between 36-50 years old with 20 respondents (71%). Followed by age group 51-64 years old with 27 respondents (55%) and then age group 18-35 years old, 13 respondents (42%). See Table 4 - Age and Healthy Eating Behaviour.

The same pattern happens when studying the respondents who answered, "It is important that the food I eat keep me healthy", as shown in Table 5. With age between 36-50 years old were 19 respondents (68%). Followed by age group 51-64 years with 28 respondents (57%) and then age group 18-35 years old, 14 respondents (45%).

Table 5 – Q2. Age and Healthy Eating Behaviour (Q4 and Q5)

Q2. Age and Healthy Eating Behaviour (Q4 and Q5)			
Q2. Age Group	Total Number of Respondents	Q4. "I follow a healthy and balanced diet most of the time" - %	Q5. "It is important that the food I eat keep me healthy" - (%)
18–35 years	31	42%	45%
36–50 years	28	71%	68%
51–64 years	49	55%	57%
65+ years	2	-	-
Grand Total	110		

When analysing Question 4 – “I follow a healthy and balanced diet” and Question 5 – “It is important that the food I eat” by matching the two statements: "I follow a healthy and balanced diet most of the time”, and "It is important that the food I eat keep me healthy", there is different scenario. The respondent with more interest in the healthiness of the food they eat is the age group 51-64 years old (51%). See Table 6.

Table 6 – Q2. Age Group and Healthy Eating Behaviour (Q4 and Q5)

Table 6 – Q2. Age Group and Healthy Eating Behaviour (Q4 and Q5)			
Q2. Age Group	Total Number of Respondents	Q4. "I follow a healthy and balanced diet most of the time" and Q5. "It is important that the food I eat keep me healthy" - number of respondents	Q4. "I follow a healthy and balanced diet most of the time" and Q5. "It is important that the food I eat keep me healthy" - (%)
18–35 years	31	7	26%
36–50 years	28	13	46%
51–64 years	49	25	51%
65+ years	2	-	-
Total	110		

So, in this particular analysis is possible to affirm that concerns about eating healthy rises for respondents in the “older” age groups.

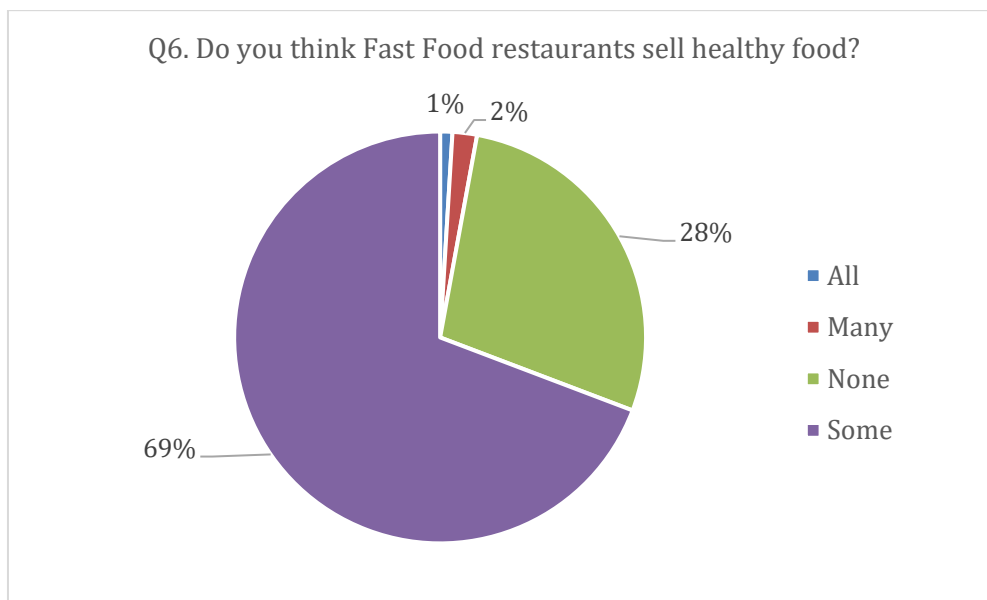
The group age of 65 years old or over were not considered for this analysis since only two participants were in this group.

4.2.2.4 Fast Food: Healthy versus Traditional

In this section, the analysis focus on investigating consumers' food choice regarding healthy and traditional fast food options when eating outside home. In order to examine the respondents' behaviour with more depth, the same variables presented previously in this chapter will be used, such as Income (Question 3) and Healthy Eating Habits (Question 4 and Question 5).

The Graph 9, (Question 6), can give an insight of consumers' perception of fast food restaurants and the offer of a healthy food. When asked "Do you think fast food restaurants sell healthy food?" the majority of respondents, 69% (35 women and 47 men, in total 72 people), answered that "Some" of them sell healthy food. Twenty seven percent (14 women and 15 men, in total 29 people) think that "None" of fast food restaurants sell healthy food.

Graph 9 – Q6. Do you think Fast Food restaurants sell healthy food?



The Question 7, "Can you name a healthy fast food restaurant?" was made in order to see the ones Irish consumers were familiar with. In total 58 respondents (29 women and 29 men) answered "Yes", which as 56% of respondents. Freshly Chopped (also cited as Chopped) was the company with most citation (63%). Of those 39 respondents 60% were women. Subway was cited by 6 respondents (1 woman and 5 men), Freshii was cited by 4 respondents (3 women and 1 men). McDonald's was cited by 4 respondents (all men). In total 11 companies were cited, as presented in Table 7.

Table 7 – Q7. Fast Food Restaurants that sell healthy food according to respondents

Table 7 – Q7. Can you name a healthy fast food restaurant?

Fast Food Restaurants	Number of citation
Bagel Factory	1
Camile	1
Chopped	39
Freshii	4
Kanoodle	3
McDonald's	4
Nando's	1
Pasta Bella	1
Sprouts & Co	1
Subway	6
Tolteca	1

Looking into the respondents who cited Chopped, 23 women and 16 men, and taking in consideration the number of respondents in each age group, it is possible to see that women age between 51-64 years old and age between 36-50 years old were the age groups that most cited Chopped, as a fast food restaurant that sells healthy food. See Table 8.

Table 8 – Respondents who cited Freshly Chopped as a fast food restaurant that sells healthy food

Respondents who cited Freshly Chopped as a fast food restaurant that sells healthy food

Q2. Age Group	Women	Men
18–35 years	28%	39%
36–50 years	50%	40%
51–64 years	52%	15%

The next two questions is related to the frequency respondents visit healthy fast food restaurant (Question 8) and traditional fast food restaurants (Question 9). As shown in Table 9, 45% of respondents (22 women and 25 men, in total 47 people) “Rarely” go to a healthy fast food restaurant, 17% of respondents (12 women and 6 men, in total 18 people) answered “Once a month”. A representative number of people (30%) of respondents (14 women and 17 men, in total 31 people) answered “Not applicable”, that one can be interpreted as “I do not have any favourite healthy fast food restaurant” or “I do not go to healthy fast food restaurants”.

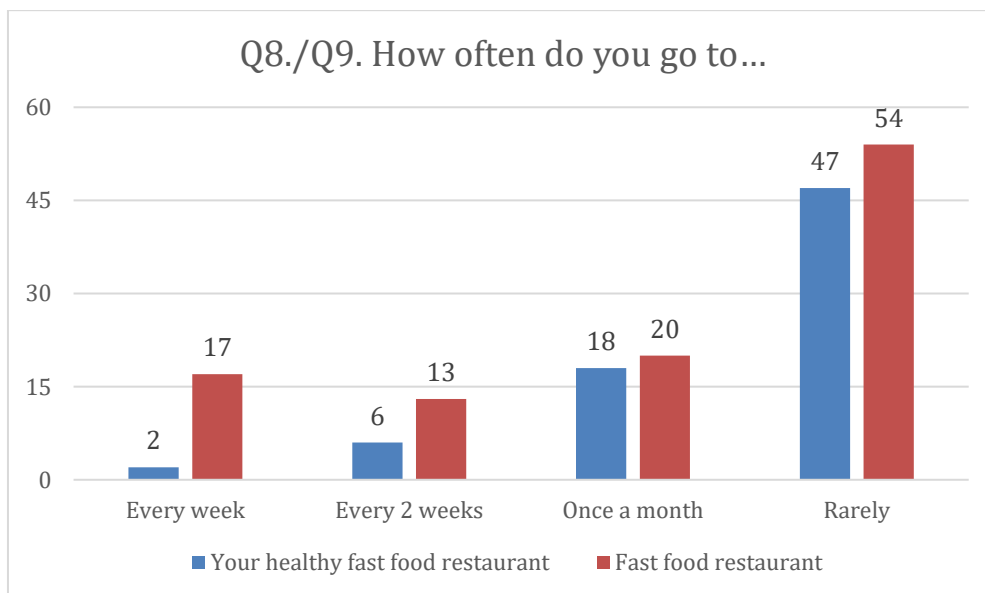
Table 9 – Q8. How often do you go to your healthy fast food restaurant? If you have any favourite.

Table 9. How often do you go to your healthy fast food restaurant? If you have any favourite.

Row Labels	Women	Men	Total
Every week	0	2	2
Every 2 weeks	2	4	6
Once a month	12	6	18
Rarely	22	25	47
Not applicable	14	17	31
Total	50	54	104

When analysing the frequency respondents visit a traditional fast food restaurant there is different scenario since there was an increase of visit frequency. As can be seen in Graph 10, the higher increase was among respondents who go “Every week”, from 2 respondents (healthy fast food restaurant) to 17 respondents (traditional fast food restaurant). For those who answered “Every 2 weeks” the number of respondents was doubled. Among respondents who go “Once a month” there was an increase of 11%. Finally, for those who answered “Rarely” the increase was of 15%.

Graph 10 – Q8. How often do you go to your Healthy Fast Food restaurant versus Q9. How often do you to a Fast Food restaurant (traditional)



The next analysis investigate for any correlation between income and the frequency people visit healthy fast food restaurant and fast food restaurants (traditional). Because 45%

respondents (47 people), answered that “Rarely” go to a healthy fast food restaurant, this was the group chosen for a better analysis. Of this group, 30% of respondents have income of €50,000 or more. Same pattern happened for traditional fast food restaurants, which 54% of respondents answered that “Rarely” go to this type of restaurant. As observed in Table 10, of this group, 33% also have income of €50,000 or more. See Table 10

Table 10 – Q3. Annual Personal Income and visit to healthy fast food restaurant (Q8) and traditional fast food restaurant (Q9)

Annual Personal Income	Respondents who rarely go to...	
	Your healthy fast food restaurant	Fast food restaurant
Less than €20,000	21%	19%
€20,000 to €29,999	26%	24%
€30,000 to €49,999	23%	24%
€50,000 or more	30%	33%

When crossing Question 4. “I follow a healthy and balanced diet” and Question 8. “How often do you go to your healthy fast food restaurant? If you have any favourite”, is possible to see that of 61 respondents who “follow a healthy and balanced diet most of the time”, 46% (17 women and 11 men, in total 28 people), “rarely” go to a healthy fast food restaurant, and 20% (7 women and 5 men, in total 12 people), go “once a month”. Thirty one percent (9 women and 10 men, in total 19 people), do not go to a healthy fast food restaurant (not applicable). See Table 11. These findings suggest that there is a market opportunity for the healthy fast food industry.

Table 11 – Q4. Frequency of respondent follow a healthy and balanced diet versus Q8.

Frequency of respondents go to a healthy fast food restaurant

Q4. Frequency of respondent who follow a healthy and balanced diet	Q8. Frequency of respondents who go to a healthy fast food restaurant				
	Every 2 weeks	Every week	Not applicable	Once a month	Rarely
Always	0	0	2	2	2
Most of the time	1	1	19	12	28
Sometimes	5	1	7	3	10
Rarely	0	0	3	0	7
Never	0	0	0	1	0

The same analysis was done considering visit to traditional fast food restaurant (Table 12) By crossing Question 4. “I follow a healthy and balanced diet” and Question 9. “How often do you go to a fast food restaurant?”. As seen in Table 12, of 61 respondents who “follow a healthy and balanced diet most of the time”, 66% of respondents (25 women and 15 men, in total 40 people) “rarely go to a fast food restaurant”, and 23% of respondents (7 women and 7 men) go “once a month”. Therefore, it is possible to say that women eating behaviour falls more into a healthy diet compared to men.

Table 12 – Q4. Frequency of respondent follow a healthy and balanced diet versus Q9. Frequency of respondents go to a traditional fast food restaurant

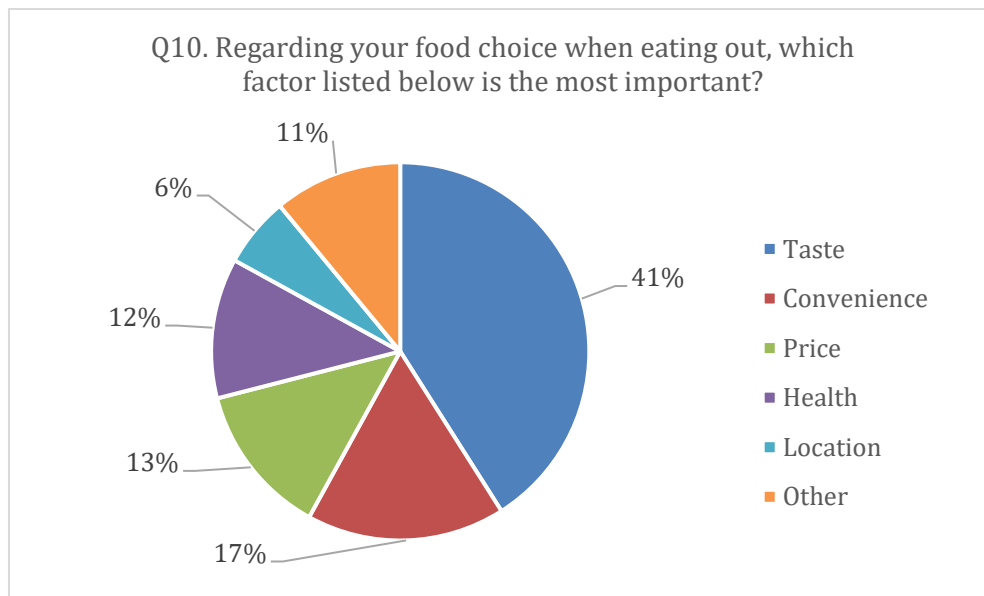
Table 12 Q4 - Frequency of respondent follow a healthy and balanced diet	Q9 - Frequency of respondents go to a traditional fast food restaurant			
	Every 2 weeks	Every week	Once a month	Rarely
Always	1	1	0	4
Most of the time	4	3	14	40
Sometimes	1	0	0	0
Rarely	2	5	1	2
Never	5	8	5	8
Total	13	17	20	54

By comparing the two tables, findings show that respondents who follow a healthy and balanced diet, go with more frequency to healthy fast food restaurants than the traditional fast food options. Finally, by crossing Questions 4, 8 and 9 data show that those respondents who “follow a healthy and balanced diet most of the time”, 34% of them (13 women and 8 men, in total 21 people), “rarely” go to either fast food restaurants.

4.2.2.5 Fast Food: factors that can influence consumers’ food choice when eating out.

After analysing the frequency of visit to fast food restaurants the next two analysis offers a picture of some factors that can influence consumers’ fast food choice. Respondents were asked to choose among 5 factors (convenience, health, location, price or taste) which one was the most important when considering eating out (Question 10). They also had a possibility to give a different reason. As seen on Graph 11, “Taste” was the factor that most respondents, 43 people in total (20 women and 23 men) said they would be influenced by it, which represented 41% of respondents.

Graph 11 – Q10. Regarding your food choice when eating out, which factor listed below is the most important?



Among those who gave an “Other” answer, most were women, and age between 51-64 years old. Some illustrative quotes follow:

“It varies, depending on the people I am eating out with (2 people)”. (Female, 51-64 years old)

“Type of food served, for example non-standard Irish/English food”. (Male, 51-64 years old).

“Value for money (quality of food and service for the price charged)”. (Male, 51-64 years old)

“Vegan options”. (Female, 18-35 years old)

“Value for money”. (Female, 51-64 years old)

Looking in detail at the respondents, there was no significant difference between women and men, as can be seen in Table 13.

Table 13 – Q10. Regarding your food choice when eating out, which factor listed below is the most important? and Gender (Q1)

Q10. Regarding your food choice when eating out which factor listed below is the most important?	Women	Men	Total
Taste	20	23	43
Convenience	7	11	18
Price	8	6	14
Health	5	7	12
Location	3	3	6
Other	7	4	11
Total	50	54	104

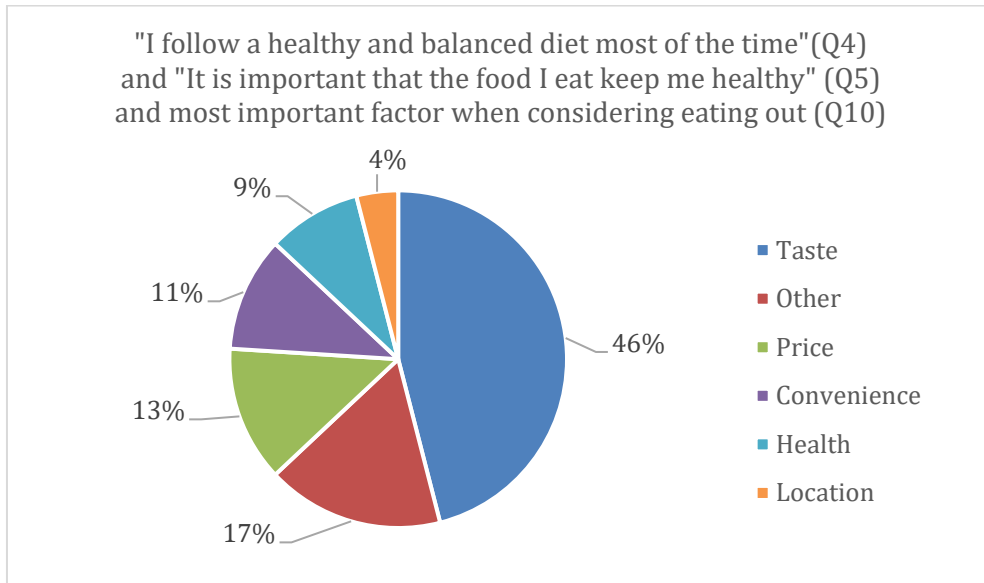
When analysing the correlation between those factors and income, data show that “Taste” was the most important factor for respondents with annual personal income between €30,000 and €49,999 (37%). Table 14 show in detail the number of respondents for each income group and corresponding factors. Another finding is that “Taste” appeal more to respondents with higher income.

Table 14 – Q10. Regarding your food choice when eating out, which factor listed below is the most important? and Income (Q3)

Q3. Annual Personal Income	Convenience	Health	Location	Other	Price	Taste	Total
Less than €20,000	4	2	3	1	3	6	19
€20,000 to €29,999	3	5	0	1	4	8	21
€30,000 to €49,999	6	3	1	3	4	16	33
€50,000 or more	5	2	2	6	3	13	31
Total	18	12	6	11	14	43	104

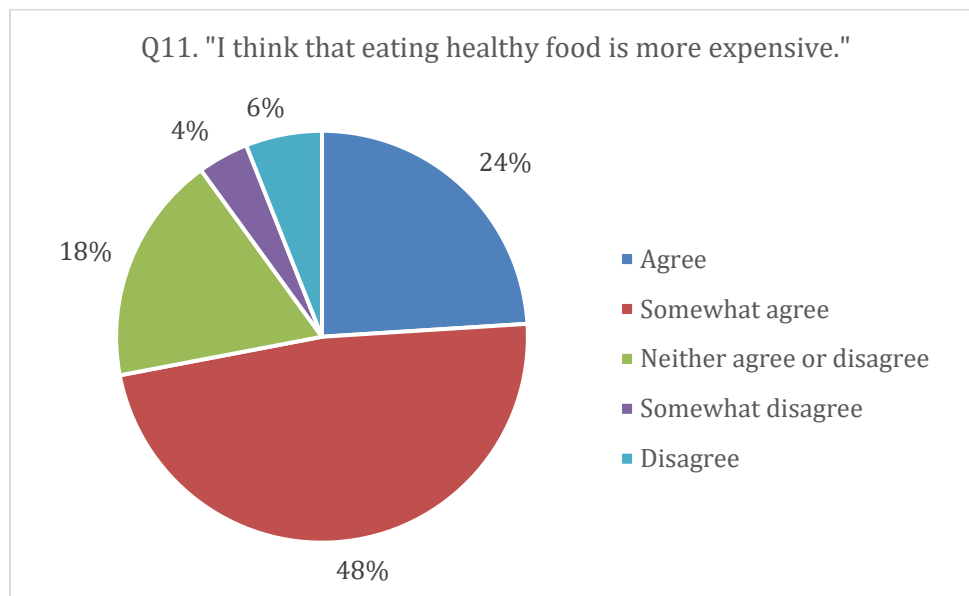
To a better analysis Questions 4, 5 and 10 were crossed. Considering respondents who “follow a healthy and balanced diet most of the time” (Q4) and “It is important that the food they eat keep them healthy” (Q5) there were 46 respondents (44% of total) from this group the analysis show that Taste was also the most important factor when considering eating out. See Graph 12.

Graph 12 – "I follow a healthy and balanced diet most of the time"(Q4) and "It is important that the food I eat keep me healthy" (Q5) and most important factor when considering eating out (Q10).



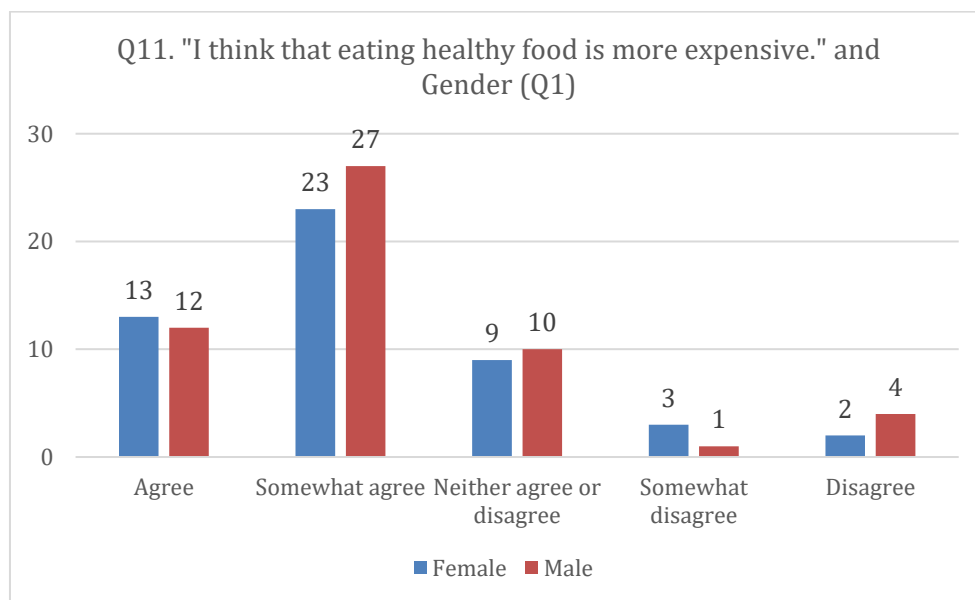
In order to get more data about the influence of money has on consumers' food choice, in Question 11 respondents were given the following statement: "I think that eating healthy food is more expensive", once they had to specify their level of agreement or disagreement. See Graph 13.

Graph 13 – Q11. "I think that eating healthy food is more expensive."



As seen in Graph 13, 48% of respondents “Somewhat agree” that “Eating healthy food is more expensive (23 women and 27 men, in total 50 people). By adding the 24% of respondents who “Agree” with this statement (13 women and 12 men, total of 25 people), the total percentage of agreement increases to 72% of respondents (36 women and 39 men, total of 75 people). When looking for any gender bias, the Graph 14, shows that there was no significant difference in relation to gender.

Graph 14 – Q11. "I think that eating healthy food is more expensive." and Gender (Q1)



Another analysis to investigate the influence of income on food choice was relating the respondents believes about healthy fast food being more expensive and their personal income. The analysis across all income groups is presented in Table 15.

Table 15 – Q11. "I think that eating healthy food is more expensive." and Income (Q3)

Q11. "I think that eating healthy food is more expensive	Less than €20,000	€20,000 to €29,999	€30,000 to €49,999	€50,000 or more	Total
Agree	6	9	8	2	25
Somewhat agree	8	9	13	20	50
Neither agree or disagree	4	2	9	4	19
Somewhat disagree	0	1	1	2	4
Disagree	1	0	2	3	6
Total	19	21	33	31	104

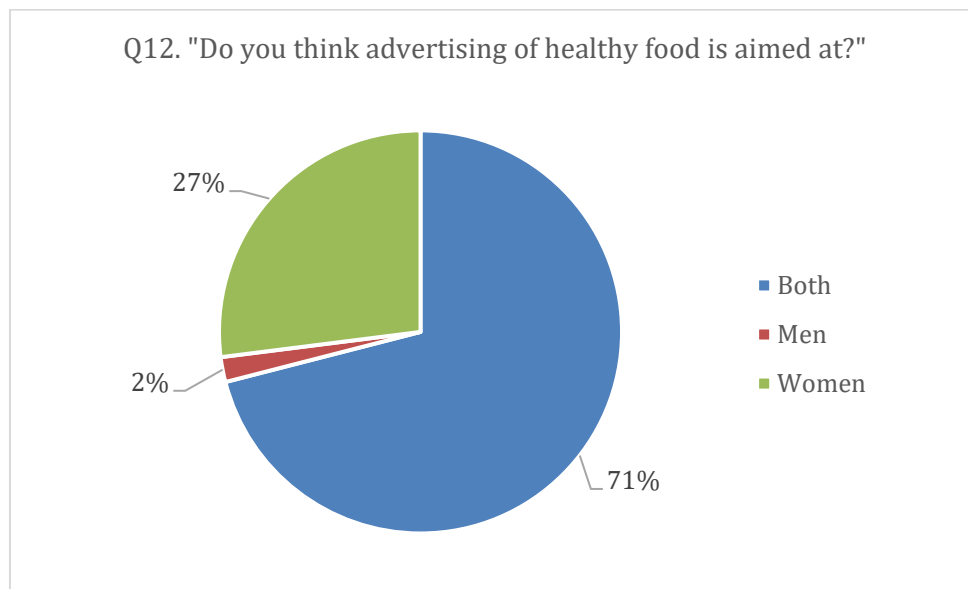
Data show that in general respondents with higher income is biased towards an agreement that healthy food is more expensive, in special those respondents with income of €50,000 or more, who “Somewhat agree” with that statement.

4.2.3 Fast Food Advertising

This last section of the findings has its focus on influence of advertising on consumers' food choice, in special the healthy fast food advertising. Of 110 respondents 103 of them (49 women and 54 men), have completed this section (94% of completion rate).

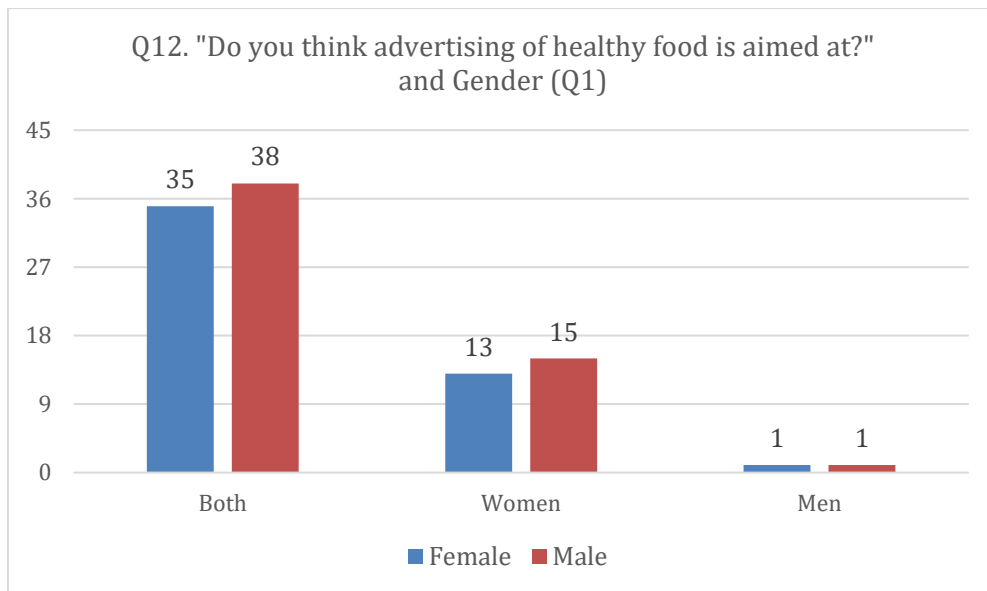
The first of the three questions was done to get an insight of consumers first thought about advertising of healthy food. They were asked if they think advertising of healthy food is aimed to men, women or both, (Question 12). As seen on Graph 15, 71% of respondents (35 women and 38 men, total of 73 people), believe that advertising of healthy food is aimed at both gender. Followed by 27% (13 women and 15 men) who believed is aimed at women. Only 2% of respondents (1 woman and 1 man) think that advertising of healthy food is aimed only at men.

Graph 15 – Q12. "Do you think advertising of healthy food is aimed at?"



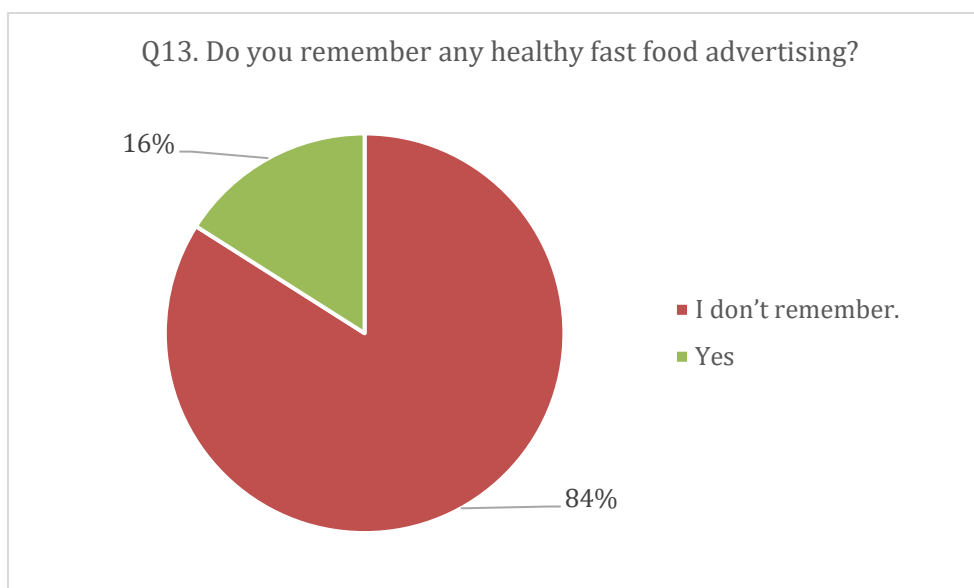
When analysing how women and men think about the adverting of fast food, there was no significant difference between both gender, as seen on Graph 16.

Graph 16 – Q12. "Do you think advertising of healthy food is aimed at?" and Gender (Q1)



The next question it was: "Do you remember any healthy fast food advertising? (Question 13). Greater part of respondents, 84% of them, answered that they did not remember any healthy fast food advertising, which were in total 87 respondents (42 women and 45 men). See Graph 17.

Graph 17 – Q13. Do you remember any healthy fast food advertising?



In Table 16, as presented next, data show no gender bias.

Table 16 – Q13. Do you remember any healthy fast food advertising? and Gender (Q1)

Q13 - "Do you remember any healthy fast food advertising?"	Female	Male	Total
I don't remember.	42	45	87
Yes	7	9	16
Total	49	54	103

Most of those 16% respondents who answered "Yes" mentioned the fast food restaurant McDonald's (7 times) followed by Freshly Chopped (4 times). Is relevant to say that it was possible to mention more than one restaurant. The list of all restaurants mentioned is present as follow.

Table 17 – Fast Food Restaurants that respondents remember seen an advertising of healthy food

Fast Food restaurants mentioned by...	
Women	Men
Burger King	Burger King
Coconut Water	Flora Proactive
Freshly Chopped	Freshly Chopped
McDonald's	McDonald's
O'Brien's	Probiotic yoghurts
	Subway

Of those answers, one respondent expressed their opinion about McDonald's advertising as follow:

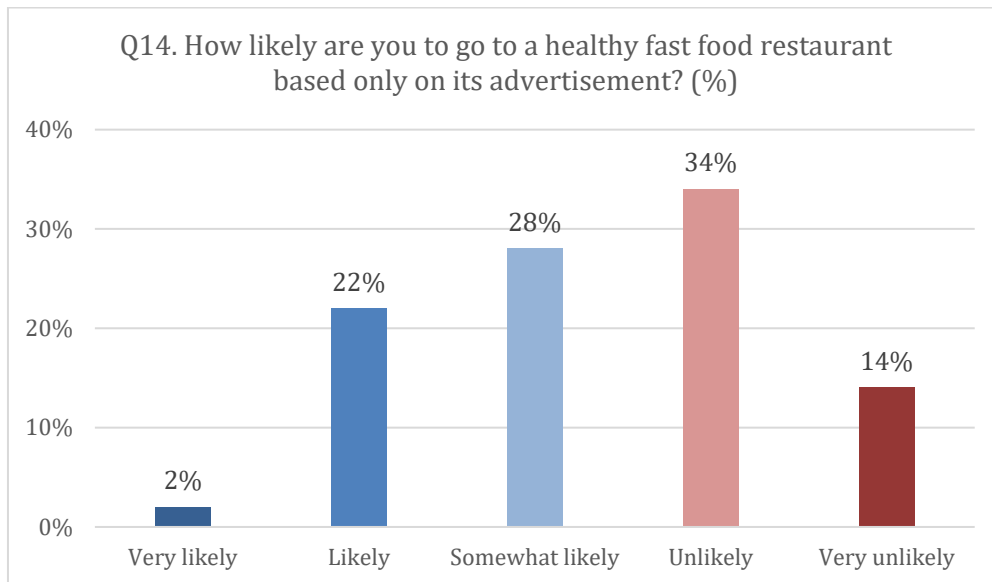
"McDonald's, even though I do not think it is healthy. Its advertising sells healthy".
(Female, 18-35 years old)

Although only 16 respondents (7 women and 9 men), mentioned seen a healthy fast food advertising (16%), the number of respondents who named a healthy fast food restaurant (Question 7) was almost four times higher with 58 respondents (29 women and 29 men).

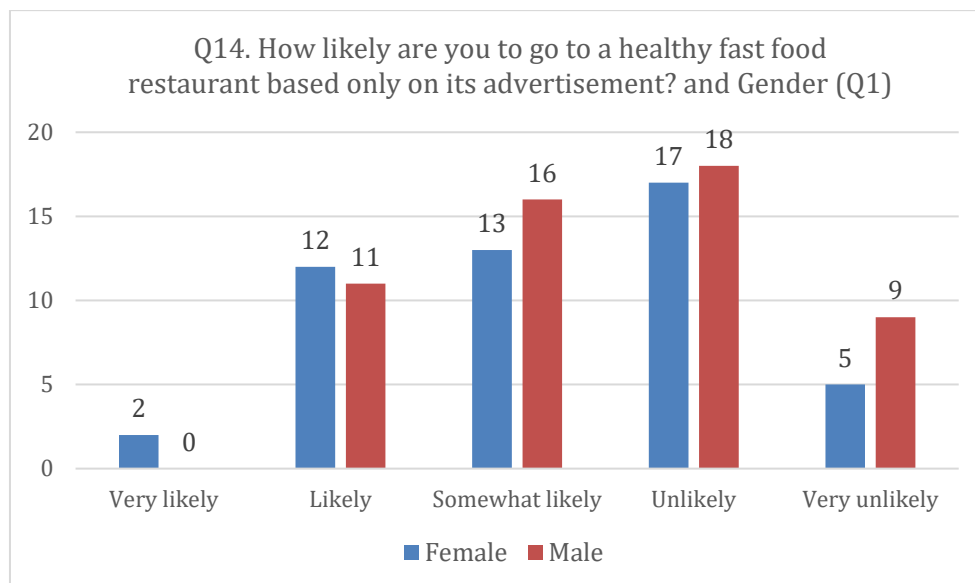
The last question was giving to evaluate the likeability of respondents to visit a healthy fast food restaurant after seen an advertisement (Question 14). The analysis show data respondents were slightly keen to go to a healthy fast food restaurant based on its advertisement with 52% (Very likely 2%, Likely 28% and Somewhat likely 22%), which represented 54 respondents. And 48% (Unlikely 34% and Very unlikely 14%), as seen on

Graph 18. However, the largest group with 34% (35 people), were “Unlikely” to go to a healthy fast food restaurant based on its advertisement. In Graph 19 and 20 is presented a comparison to investigate the behaviour between women and men.

Graph 18 – Q14. How likely are you to go to a healthy fast food restaurant based only on its advertisement? (%)

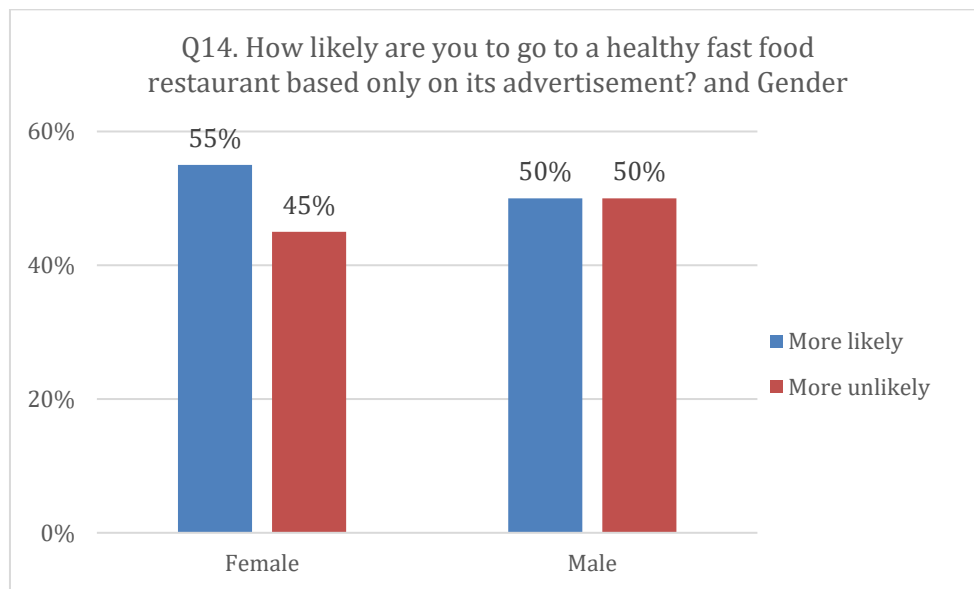


Graph 19 – Q14. How likely are you to go to a healthy fast food restaurant based only on its advertisement? and Gender



When analysing respondents' attitude regarding their gender, data show that female respondents were more likely (Very likely / Likely / Somewhat likely) to go to a healthy fast food restaurant based only on its advertisement, compared to men.

Graph 20 – Q14. How likely are you to go to a healthy fast food restaurant based only on its advertisement? and Gender (Q1)



As mentioned before, income can influence consumers' food choice when considering going out. Because of that, another analysis was done to see for any correlation between advertising of healthy food and income.

Data show that respondents with income between of less than €20,000 and income between €30,000 and €49,000 were more likely (Very likely / Likely / Somewhat likely) to go to a healthy fast food restaurant based only on its advertisement, which was 63% and 64% of respondents in this income group). On the other side, respondents less influenced by advertisement (Unlikely / Very Unlikely) have income of €50,000 or more, which correspond to a 67% of respondents in this income group, (9 women, 11 men). The Table 18 present respondents' overall likeability.

Table 18 – Q14. How likely are you to go to a healthy fast food restaurant based only on its advertisement? and Income (Q3)

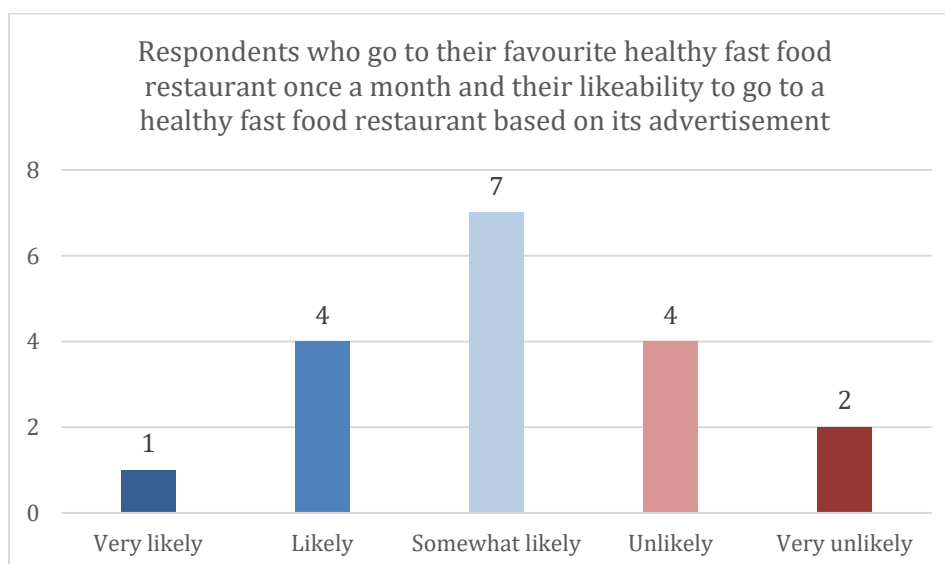
Q14. How likely are you to go to a healthy fast food restaurant based only on its advertisement? and Income (Q3)

Likeability	Less than €20,000	€20,000 to €29,999	€30,000 to €49,999	€50,000 or more	Total
Very likely	2	0	0	0	2
Likely	5	4	12	2	23
Somewhat likely	5	7	9	8	29
Unlikely	5	9	8	13	35
Very unlikely	2	1	4	7	14
Total	19	21	33	30	103

The next analysis investigate respondents' behaviour when regarding going to a healthy fast food restaurant and the influence of advertisement. For this analysis the three higher frequencies were taken into consideration, those were respondents who go "Once a month" (17%), "Rarely" (45%) and "Not applicable" (30%), which means respondents who "Do not have a favourite healthy fast food restaurant" or "Do not eat at healthy fast food restaurants".

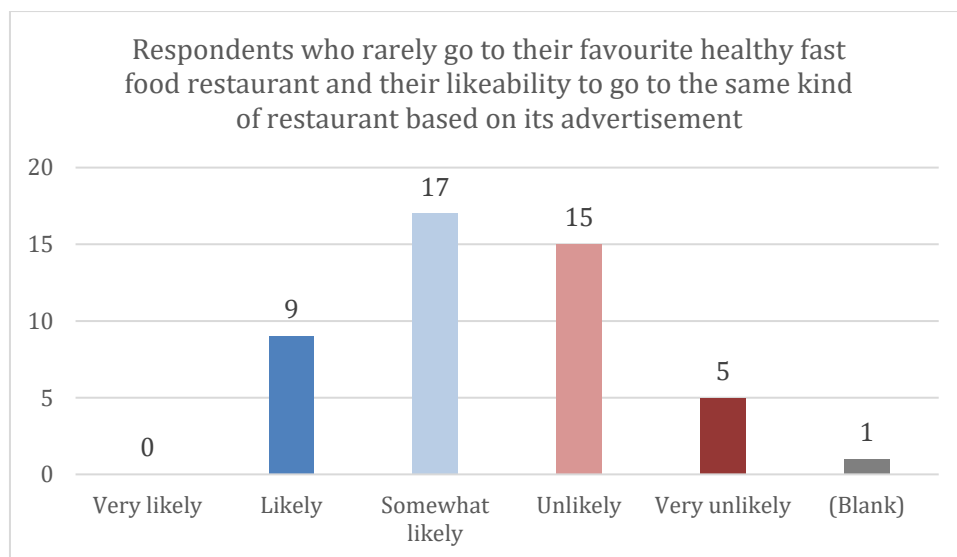
As seen in Graph 21, as follow, respondents who go to their favourite healthy fast food restaurant once a month are more likely (Very likely / Likely / Somewhat likely) to go to the same kind of restaurant based on its advertisement, which was 67% of respondents. There were 12 respondents with a positive response to advisement and 8 respondents demonstrating not influenced by advertisement.

Graph 21 – Respondents who go to their favourite healthy fast food restaurant once a month and their likeability to go to a healthy fast food restaurant based on its advertisement



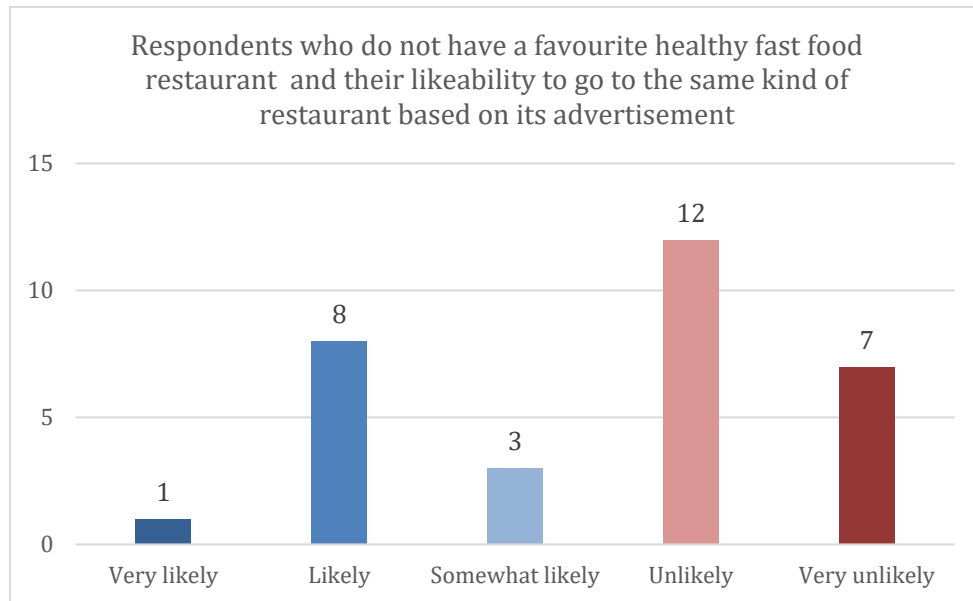
The next analysis investigate respondents who rarely go to their favourite healthy fast food restaurant and the likeability to be influenced by advertisement. In total were 47 respondents, one of them did not answer this question (blank). As observed in Graph 22, 15 respondents were “Unlikely” and 5 respondents were “Very unlikely” to go to a healthy fast food restaurant based on its advertisement. Together, it correspond to 55% of respondents who had a negative positive response to healthy fast food advertisement. The other 45% of respondent had a positive response to advertisement (Very likely / Likely / Somewhat likely). With 26 respondents in total, 58% of them were men.

Graph 22 – Respondents who rarely go to their favourite healthy fast food restaurant and their likeability to go to the same kind of restaurant based on its advertisement



In Graph 23, is possible to see how respondents who do not have a favourite healthy fast food restaurant behave in relation to exposure to advertisement. Different than the previous two groups, those respondents had a negative response to advertising. More than 60% of them were unlikely (Unlikely / Very unlikely) to go to a healthy fast food restaurant based on its advertisement.

Graph 23 – Respondents who do not have a favourite healthy fast food restaurant and their likeability to go to the same kind of restaurant based on its advertisement



4.2.4 Summary of Findings

As final considerations of this chapter, the findings described in each of the 3 sections can offer relevant data, from what will be crossed and discussed with secondary data (Chapter 2). The overall completion for the research was 94%, since 7 respondents have not completed the 14 questions. However, the percentage of respondents who did not complete will not affect the results.

As seen in a number of single and correlated analysis, in general respondents were keen to a healthy option of food and by consequence, healthy fast food. Other analysis show that gender, age and income does influence how respondents behave when it comes to fast food choice, and to some extent, as well advertisement. These and other relevant findings will be discussed in depth in the next chapter.

5. Discussion

In this chapter the findings of the survey will be discussed with different research from literature review and the thoughts of some experts involved in the food industry. The objective is to examine for any agreements or disagreements comparing to previous studies, also the possibility of bringing new knowledge. The overall aim of this research was to investigate the influence of advertising on consumer's fast food choice, and answer the research question: "Is Irish adults' food choice influenced by advertising of fast food?" (Chapter 1). The specific research objectives were:

1. Better understand consumer behaviour and the motivation behind healthy eating.
2. Assist fast food restaurants, specially healthy fast food business enhance their advertising.
3. Discuss how healthy food and food safety legislation can affect the present fast food business.
4. Propose marketing strategies that deal with the negative aspects of the unhealthy connotations of fast food.

This section is divided in 4 sub-sections, each one corresponding to the four research objectives. At the end will be presented a summary of what was discussed in light of the literature review. The previous chapter – Survey Findings: Description, Analysis and Synthesis – was an extensive work and for this reason needed to be summarised. Final conclusions and recommendations for future research will be discussed in Chapter 6 and Chapter 7.

5.1 Consumer behaviour and the motivation behind healthy eating

Literature has identified a number of elements that can influence consumer food-related behaviour. Some of them are flavour, aroma and appearance, and others with more strength such as Culture, Advertising, Health and Time (King, 2018). Gender, Weight and Food Habits also are described as influencers (Mills *et al.* 2013). Marketing elements as Social Media, Word-of-Mouth, Television and Celebrity Endorsement are likewise seen as responsible for influence consumers' food choice (Tuder, 2016).

This research approached some of the elements listed in previously and others, for instance, Healthy Habits, Gender, Age, Income, Price, Taste and Advertising, the main focus of this research

The literature identified that individuals with motivation to eat healthy are more likely to make healthier food choices (Naughton *et al.* 2015). The survey findings give evidences falling in the same direction. As presented in Graph 3 (Section 4.2.21), 72% of respondents who said that follow a healthy and balanced diet most of the time and believe that is important that the food they eat keep them healthy were the group that go to fast food restaurant with less frequency.

Findings from a research by Crofton *et al.* (2013) revealed that Irish consumers expect a healthy snack to contain low levels of calories, fat, salt and sugar. Similar interpretation can be done for fast food, where Irish consumers are demanding healthier options of food.

5.1.1 Gender

Another analysis was done to verify for any correlation between healthy eating habits and gender. Previous studies has shown that women are more likely to comply with dietary guidelines (Bogue *et al.*, 2005 cited in Crofton *et al.* 2013, p. 1131) and they are more likely than men to be positively motivated towards eating a healthy diet (Naughton *et al.* 2015). The findings of this research also confirm that women are more likely to adhere to a healthy eating habit, as summarised in Section 4.2.2.1. The Graph 6 (Section 4.2.2.1) show that among respondents who follow a healthier dietary profile, 67% were women.

5.1.2 Age

When comes to Age, the literature show that older consumers have shown to be more diet conscious and more likely to make healthier snack choices when comparing with younger adults (Irish Universities Nutrition Alliance, 2001; Wansink *et al.* 2003 cited in Crofton *et al.* 2013, p. 1131). A study by Naughton *et al.* (2015) revealed that healthy eating motivation becomes stronger with increasing age. The results of this research also go in the same direction, as can be seen in Table 6, Section 4.2.2.3. So, when looking at respondents who follow a healthy and balanced diet most of the time and believe food plays an important role on their health, most of respondents were between 51 and 64 years old.

5.1.3 Income versus Social Class

Added to the factors that can influence food choice there are Income and Social Class. Naughton *et al.* (2015), did not find a significant relation between social class healthy eating in contrast to previous studies. Because of the small size of its sample, this research did not approach Social Class, but investigated the influence of Income. The results presented in section 4.2.2.2 shown that respondents with higher income were keener to a healthy diet (Graph 7 and 8)

From other analysis about income and food choice, results shown that most of respondents who rarely go to fast food restaurants (traditional), have income of €50,000 or more (30%). Another relevant finding is that as income gets higher, also increases the number respondents with concerns about the food they eat. (Table 10, Section 4.2.2.4). So from an overall analysis, findings suggest that income does influence food choice.

5.1.4 Price

Another factor that can effect consumer's food choice is Price, which is closely related to Income. Healthy snacks are strongly associated with a higher price (Crofton, *et al.* 2013). When compared to eating healthy food, also there was a high assumption that healthy food is more expensive, as can be seen in Graph 12. This belief was stronger among respondents with higher income, especially those with income of €50,000 or more (Table 15). Results did not show any significant difference between genders, as seen in Graph 13. Frances Adgey, Marketing Manager for Subway Ireland, also believe that price influences consumer's food choice, and mentioned a number of other factors, such as, trend, value and taste, which is the next influencer studied.

5.1.5 Taste

Literature shows that Taste appeared to be decisive when choosing a snack (Crofton *et al.* 2013). As can be seen in Table 13, Section 4.2.2.5, the results of this survey show that Taste appealed as most important factor for most of respondents (41%), especially those with higher income (Table 14, Section 4.2.2.5). Same as price, data show no significant difference between women and men.

An interesting result was observed when considering respondents who declared that follow a healthy and balanced diet most of the time as well consider food was an important element

to keep them healthy. At first thought, Health would be the most relevant factor when considering eating out, yet, Taste was the highest important with 46%. Health only held the fourth place (not considering respondents who gave Other factor), with 9%, as can be seen in Graph 12, Section 4.2.2.5.

5.1.6 Fast food: Healthy versus Traditional

Another set of analysis investigate consumer behaviour towards healthy fast food *versus* traditional fast food. No literature regarding the same analysis was found. Possibly because healthy fast food can be considered a new market comparing to traditional fast food.

There is general and wide perception that fast food is not healthy. Thus, in order to understand consumer's view of the healthful of fast food, respondents were asked if fast food restaurant sell healthy food. The results were not surprising, as shown in Graph 9, (Section 4.2.2.4), the majority of respondents (69%), do think only some of fast food restaurants sell healthy food. Other 24% of respondents believe that none of them provides healthy food. So is possible to imply that a conception that fast food is not healthy is sustained.

The analysis about the frequency respondents go to healthy and traditional fast food show that traditional still the favourite kind of food. However the number of respondents who rarely go to either restaurants is higher for traditional fast food (Graph 8, Section 4.2.2.4). Which can be explained by a more health consciousness of Irish consumers.

Regarding consumers who go to a fast food restaurant every week, McDonald's consider those consumers as 'heavy users' ("Supersize me!" 2004). The survey revealed that 16% of respondents are 'heavy users'. Even though most of consumers presented a healthy eating habit, only 2% of respondents go to a healthy fast food restaurant every week. As declared by Frances Adgey, Marketing Manager for Subway Ireland, "Consumers want choice both healthy and indulgent". Here is important to consider that Ireland has the fourth highest prevalence of overweight and obesity in men and the seventh highest prevalence among women in the EU (Irish Department of Health, 2017). At this rate is difficult not to see the Irish Department of Health raising the red flag concerning about unhealthy eating.

Because this study was carried out in Ireland, respondents were asked to name a healthy fast food restaurant in the Irish market. A positive result is that most of respondents could indicate at least one company. As mentioned in Section 4.2.2.4, Freshly Chopped was cited

by most of respondents (63%), of that group, 60% were women. As a matter of context, Freshly Chopped is an Irish company found in 2012 by Brian Lee and Andy Chen. Also known as Chopped, the brand stands for health and fresh fast food. Today there are more than 50 outlets across Ireland and Cyprus (Freshly Chopped, 2018).

5.2 Consumers response to fast food advertisement – enhancing advertising of fast food business.

5.2.1 The influence of Advertisement

In this section, will be discussed the findings about consumer's food choice and the influence of fast food and healthy fast food advertisement. The main objective is to assist fast food restaurants, specially healthy fast food business enhance their advertising. Investigate the influence of advertising on consumer's food choice is quite a challenge. And the literature is not conclusive. No literature regarding the influence of healthy fast food advertising was found, therefore, the secondary research covered the literature of traditional fast food advertising.

Some researches argue that the insufficient number of studies does not support evidence that food advertising increases food consumption in adults (Boyland *et al.* 2016). Or, if food advertising affects adults' food-related behaviour (Mills *et al.* 2013).

On the other side, distinct studies suggest the opposite. Some researches provide evidence to suggest that cumulative exposure to television food advertising is linked to adults' fast-food consumption (Scully *et al.* 2008; Kemps *et al.* 2014;). Results from a number of articles show evidence that price promotions and retail displays increase food expending of high sugar foods (Boyland and Whalen 2016, p.7). Advertising not only increases market share, as well expanding demand for fast food (Richards and Padilla, 2007, p. 25),

Although there is insufficient literature available to examine in contrast with the findings, yet, is possible to draw some results and fill this gap in knowledge. By adding valuable knowledge to the field of advertising and consumer food-related behaviour this research positively contribute to the academy, the food industry and consumers.

This discussion start with an understanding of consumers' opinion about advertising of healthy food. Literature review that men believe that healthy snack alternatives available is aimed at women (Crofton *et al.* 2013). Relevant to say that this survey offers a wider analysis, (Section 4.2.3). Foremost, respondents were asked if advertising of healthy food is

aimed at men, women or both. Twenty seven percent of respondents think that fast food advertising is aimed at women. Of this group 54% were men (Graph 16). So for this particular view the results are in line to the literature. However with majority of respondents (71%), thinking that advertising of healthy food is aimed at both gender, show evidence that point in another direction. (Graph 15).

When considering that fast food companies spend billions on advertisement campaigns (Boyland and Whalen 2016), is expected that such investment convert into consumers' purchase. However an advertisement campaign is not effective if consumers cannot remember seen an advertising, or even remember the name of the brand. The survey shows what can be considered as an alarming result, only 16% of respondents mentioned that remembered a healthy fast food advertising. As mentioned in the previous section, Chopped was cited by 39 respondents as a fast food restaurant that sell healthy food. However only 10% did remember seen an advertisement from the company. Subway, which was cited 6 times, had its advertising remembered by one consumer. Even more surprisingly was seen McDonald's on the top of the list. Even though only 4 respondents mentioned McDonald's as a fast food restaurant that sell healthy food, 7 other respondents remembered seen McDonalds' advertising its food as healthy, in that case their range of salads.

In Section 4.2.3 were presented the investigation of the influence of advertisement on consumer's food choice when considering going out, and results show that consumers were slightly keen to go to a healthy fast food restaurant based on its advertisement. A higher likeability were found among women, which can be explained since they are more likely to adhere to a healthy eating habit. When considering Income, results show that consumers who earn of €50,000 or more (the highest income group in the survey) are the least influenced by advertising.

Because the number of respondents who rarely go to a healthy fast food restaurant it can be considered quite high (45%), the influence of advertisement on this group was also investigated. The result show that respondents had a slightly positive response to fast food advertisement. When asked about the increasing market for healthy fast food, Frances Adgey (Subway Ireland), believe that the growing market is more due to advertising. "However, like all purchase behaviours, there are also trends". She emphasized.

However when comparing with respondents who do not have a favourite healthy fast food restaurant there is different scenario. Those respondents had a negative response to advertising. More than 60% of them were unlikely to be influenced by fast food advertisement.

5.2.2 Other influencers

As mentioned previously in the introduction of this chapter, Celebrity Endorsement is one of the factors that can influence consumers' food choice. The association between celebrity and product creates value in the consumer's mind and that one in question can be translated in credibility, brand recognition and trust (Tuder, 2016). Domini Kemp, Director and Co-founder of Itsa, as well mentioned that other than advertising, Influencers and Celebrity diets can impact on who consumers choose their fast food choice. Itsa is an Irish company which operates in the industry of cafés, restaurants and catering. For Frances Adgey (Subway Ireland), else than value, price and taste, some other factors as, convenience, trend, season, peer pressure, social responsibility, and time can also influence consumers' decision when considering eating outside their homes.

5.3 The “side” effects of healthy food legislation to the fast food market

Every single market is regulated by government institutions and supported by the employment of legislation and guides of practices. The aim is to protect all stakeholders, especially consumers. In the food industry is not different, notably in these days, where not only governments are concern about unhealthy eating (Story and French, 2004; Naughton, *et al.* 2015; Freeman *et al.*, 2016; Public Health England, 2017; Irish Department of Health, 2017), as well consumers (Food Safety Authority of Ireland, 2009; Magnusson 2010; Crofton *et al.*, 2013; Forbes, 2015).

5.3.1 Food Research & Development

Regulations such as the Voluntary Codes of Practice, which is part of the 'A Healthy Weight for Ireland - Obesity Policy and Action Plan, 2016 - 2025' and the ASAI Code of Standards for Advertising and Marketing Communications, not only changes the way of fast food restaurants advertise their products, as well make them revise their core business.

There is a large number of products with a healthy appeal from “reduced sugar”, “no added sugar”, “zero calorie”, “fat free” “no artificial flavours or colouring” to “extra” or “enriched” with vitamins and other nutrients. Those new products only can be offered as a result of investment on research and development. Which could be the only alternative to have a sustainable and profitable business, maintain or increase market share. Even though some products still finding its market, for example, donuts, Domini Kemp (Itsa), believe will increase in the near future, as she mentioned that there will be an “increasing demand for

extremes – e.g. donuts and “free-from” ranges”. However some of the companies will not *survive* in a market which demand more and more healthy food, and by it means, healthy fast food.

Food research also involve watching the market, looking for new trends. As declared by Frances Adgey, Marketing Manager for Subway Ireland, “...like all purchase behaviours there are also trends”. She also believes that a demand for healthy fast food and traditional fast food “will continue to grow, with people’s taste developing they will demand more varied ingredients and cultural alternatives as a fast food offering like the rise in Mexican and a direction in more of a Street food offering”.

5.3.2 Sports Sponsorship

Another marketing activity that has been topic of discussion is fast food companies sponsoring sports events. Some researches argue that there is a lack of legislation (Igumbor *et al.* 2012; Herron, 2014; Boyland and Whalen, 2016). To tackle this issue, a multi-sectoral group was established by Simon Harris, Minister of Health. This group has by mission to develop a Code of Practice for sponsorships by the food industry (Irish Department of Health 2017).

The Code of Practice for Marketing Communications for HFSS Food on Non-Broadcast Media, Out of Home Media, Print Media and Cinemas contain a series of rules. One of the rules stated that “HFSS food sponsorship of sports pages or sports supplements is not allowed” (Irish Department of Health 2017).

In Ireland, sports events play an important role nationwide, especially Gaelic Sports (GAA). To have your brand attached to a local club or a county team, means that the company not only creates brand awareness, also progress to next stages of consumer making decision: as purchase and repurchase. In other others, sponsorship does stimulate consume. However one of general rules for all Codes of Practice creates an immense wall between fast food restaurants and consumer, and by all means, almost unbreakable: “Locations primarily used by children shall be free from all forms of marketing communication for HFSS foods. Examples of such settings include registered crèches, pre-schools, nurseries, family and child clinics, paediatric services, schools, dedicated school transport, playgrounds and youth centres (Irish Department of Health 2017). One alternative would be setting partnership agreement with local council and assist adults sports centres, organizing programs that encourage a healthy lifestyle and a healthy and balanced diet.

5.4 Proposed advertising guide: overcoming obstacles

The last theme to be discussed aim to propose marketing strategies that deal with the negative aspects of the unhealthy connotations of fast food. As shown in the survey results, the number of consumers who think that fast food restaurants do not sell healthy food was more than 25% which is considerable high. Especially thinking that most of respondents (65%) do follow a healthy and balanced diet.

Consumers of today are showing good judgment about false or misleading healthy claims. In addition all marketing activity of HFSS food and drinks are monitored by the Department of Health. As Domini Kemp (Itsa), defined "... Most large food companies market heavily processed foods under veil of "health". New evidence is disrupting the traditional beliefs that fat is bad. Focus is now on sugar becoming the new tobacco. Social media cuts through claims being made. Consumers becoming more savvy". Because of that, any marketing communication must be transparent in such way that consumers will not be deceived or mislead.

Another strategy to reduce or eliminate the negative perception of fast food was suggested by Frances Adgey (Subway Ireland). As she concerns about the various interpretation an individual can make over a product, a "thorough testing of a consumer message before it goes live can help".

5.5 Summary of Discussion

Because the extent of what was discussed, this section summarizes the discussion around the four research objectives, the research question, the literature review and the general results.

The first objective was to better understand consumer behaviour and their motivation behind healthy eating. Literature and survey findings, both show that consumers are more likely to make healthier food choices. For them is relevant that the food they eat keep them healthy. The findings also revealed that the consumer of today expects a healthy snack to contain low levels of calories, fat, salt and sugar, and they are demanding healthier fast food options. Other than advertising, the discussion also involved some particular influencers as, Gender, Age, Income, Price, Taste and a comparison between food choice behaviour for healthy fast food and traditional fast food with some interesting facts.

Literature from previous studies show that women are more likely to follow a healthy and balanced diet. They are more motivated towards eating a healthy diet. Which has been confirmed by this study. Regarding Age, literature and data from this survey, show evidence of same behaviour: middle-age adults (36-50 years) and older adults (age older than 51 years) are more healthy conscious. The investigation about the influence of Income show that respondents with higher income were keener to a healthy diet. This same group have a high assumption that healthy food is more expensive.

Surprisingly was the finding that Taste appeal as most important factor for most of respondents, especially the ones with higher income. As mentioned before, considering that most people are following a healthy and balanced diet, assumes that Health would be the first factor to consider when deciding for a fast food meal. Still, Healthy was placed far behind in fourth place. Not surprisingly, was the fact that majority of respondents (69%), believe that just some of fast food restaurants sell healthy food. And a good number of respondents (24%) are convinced that none of the food sold by fast food restaurant can be healthy. For that, the general concept that fast food is not healthy still inside consumer's mind.

The second research objective aim to assist fast food restaurants, specially healthy fast food business enhance their advertising. The literature already showed evidence that marketing activity and so advertising of traditional fast food has an impact on consumer's food choice. When it comes to advertising of healthy fast food the results show two distinct food-related behaviour: Behaviour 1: respondents who rarely go to a healthy fast food restaurant presented a slightly positive response to fast food advertisement. Behaviour 2: respondents who do not have a favourite healthy fast food restaurant or do not go to this kind of restaurant had a negative response to advertising. More than 60% of them were unlikely to be influenced by fast food advertisement.

Because the group of respondents who rarely go to a healthy fast food restaurant represented 45% of total sample, this group could be the chosen target audience for healthy fast food restaurants. However this type of consumer would employ so much effort and money expending that sound like an unsuccessful marketing strategy by starter.

This research also showed that old adults, especially women with income of €50,000 or more is the consumer group with a more healthy conscious. Or a company can decide to target the young generation, since could extend the life cycle of the product. No matter which

audience a healthy fast food restaurant aim to target, it is highly important to have a “picture” of its consumer profile, and the best advertising channels to reach them.

Knowing from this survey findings that 27% of consumers think that advertising of healthy food is aimed at women is another important data. If a company decided to target men, the challenge for marketers to influence this group by advertising would be even higher.

Another finding is the consumer belief of healthy food being more expensive. To tackle this issue healthy fast food restaurants should show to consumers the advantages of a healthy eating habit and the relation between cost and benefit. Consumers are willing to pay more for healthier options. (Forbes, 2015).

The third research objective proposed a discussion on how healthy food and food safety legislation can affect the present fast food business. During the course of the research, only healthy food legislation was approached seen that would make more sense considering the focus of the study. Since there is a considerable number of restrictions for fast food advertisement, one of the proposed alternatives is to invest in research and development for healthier food and healthier options of fast food. This will not solve the problem, but at least meet some of consumer expectations. Another problem faced by traditional fast food is the restriction regarding sponsorships. Fast food companies still can advertise in locations where children and young adults are not the primary users. It would be very important that a partnership between fast food restaurants and local councils include programs to encourage a healthy lifestyle and a healthy and balanced diet.

The fourth research objective aims to propose marketing strategies that deal with the negative aspects of the unhealthy connotations of fast food. As commented before, the general concept that fast food is not healthy is still inside consumer’s mind. As a result of that all marketing communication must be transparent in such way that consumers will not be deceived or misled. The use of Social Media can enhance their advertising channel mix, which can be combined with Celebrity endorsement to increase the credibility of the company’s message.

By understanding the behaviour and social media usage by your consumer target, enable healthy fast food restaurant to maximize resources and minimize advertisement costs. According to Google Consumer Barometer, Social Media is on the top activities on internet (Digital Media), only behind of search engines. In addition is relevant to mention that 85% of Irish people go online for personal internet usage every day. Another tool that can be used

by healthy fast food restaurant to improve their marketing activity is the Electronic Word-of-Mouth (eWOW). The eWOW allow consumers and fast food restaurants to interact to each other, by sharing of information and opinions. This interaction can happen via Social Media such as Facebook, Instagram and Twitter or Online Consumer Reviews via websites or apps. According to Hennig-Thurau, *et al.* (2004), the eWOW apply to positive or negative statement made by consumers about a product, service or company. An Online Consumer Reviews works as an informant and a recommender, and same as eWOW, involve positive or negative statements made by consumers (Park *et al.* 2007). Both tactics are helpful during the process of food choice decision.

6. Conclusion

The overall aim of this research was to investigate fast food advertising and health consciousness in Ireland, in relation to the influence of advertising on consumers food choice. The specific research question was: "Is Irish adults' food choice influenced by advertising of fast food?". The research were within the context of food market to four objectives: 1 – Better understand consumer behaviour and the motivation behind healthy eating; 2 – Assist fast food restaurants, specially healthy fast food business enhance their advertising; 3 – Discuss how healthy food and food safety legislation can affect the present fast food business; and 4 – Propose marketing strategies that deal with the negative aspects of the unhealthy connotations of fast food. This chapter presents the main conclusions drawn from the discussion based on the literature review, survey findings and interview.

The findings of this study confirmed that Irish consumers were more likely to follow a healthy and balanced diet, and shown a positive and significant association between everyday food and the importance to keep them healthy (p. 35-37). Findings also confirmed that this healthy eating behaviour was higher among women (p. 37 and 38), who demonstrated to be more likely to adhere to a healthy eating habit.

As illustrate on pages 40 and 41, a healthy eating habit was also associated with aging. As observed, middle-age adults and older adults were more likely to choose healthy food options, which was evidenced in distinct studies (p. 60). This behaviour can be explained as people try to reduce the effects of aging by eating healthier.

A tendency for eating a healthy diet could be seen along respondents with higher income, as our finding illustrate on page 39 and 40. In general, people had a strong assumption that healthy food is more expensive (p. 49 and 50), especially respondents with higher income as highlighted on page 50.

When considering eating out, Taste appealed as most important factor for most of respondents, as the findings illustrates on pages 47-49. This behaviour was seen especially among respondents with higher income (p. 48). Taste also appeared as decisive factor for food choice in a different research, by Crofton et al. (2013), who examined consumers' perceptions and expectations towards healthy snacks (p. 61).

This survey has shown that people were skeptical about fast food restaurants selling healthy food as illustrated on page 42. Thus, it is possible to assume that people still have the conception that fast food is not healthy, which makes a challenge for healthy fast food restaurants market their product as healthy. In spite of that, respondents who follow a healthy and balanced diet, go with more frequency to healthy fast food restaurants than the traditional fast food options, as explained on pages 45 and 46.

As focus of this research, findings showed that advertising of healthy fast food was not seen as a strong factor over people's food choice as illustrated on pages 53-58. And some people believe that advertising of healthy food is aimed at women (p. 52).

Relating to food advertising, restrictions with respect to advertising of HFSS food and drinks, limits some marketing activities for traditional fast food restaurants. As an example, sports sponsorship in locations primarily used by children and young adults. To tackle this issue, a strategy of approaching community centre, focus on middle-age adults and older adults and by establishing partnership that include programs to encourage a healthy lifestyle and a healthy and balanced diet can be incorporated to the marketing mix. Social Media, Celebrity Endorsement and Online Consumer Reviews can increase company's credibility and diminish the negative aspects of the unhealthy connotations of fast food.

On account of the results of this research, different advertising strategies should be taking into consideration due different behaviour between women and men, distinct age groups and different levels of income; and the fact that consumers consider Taste as more important factor than Health when it comes to eating out (p. 47-49).

7. Recommendations

Some recommendations can be made for future research. The focus of this research was to investigate the influence of fast food advertising and healthy consciousness in Ireland.

Because of the sample size of this survey, was not possible to draw an analysis the relationship between Social Status and eating behaviour. So, the first recommendation is to consider a bigger sample size that represent the population. For a greater analysis the findings can be crossed with two other factors: Income and Price. A more detail demography would benefit fast food restaurants since they could target distinct social classes with different message or different approach.

Findings show that people think that healthy food is more expensive, and that fast food is unhealthy. For a depth investigation of why people have these assumptions, a future research could consider approaching focus group. This recommendation would help healthy fast food restaurants mitigate those beliefs, and as consequence, increase their market share by reaching potential customers.

Literature has shown that television exposure does increase food consumption. However people are now spending more time on Internet than watching TV. Another recommendation is the investigate the influence of television comparing to internet exposure, considering that each channel has its peculiarity and customer experience is different for both touchpoints. By understanding better the target audience food companies can enhance its marketing strategies.

Because income affect families' food choice, it is recommended to investigate the influence of healthy food advertising among families with kids and families with no kids, and for a broad study, this future research could consider the two situations: eating at home and eating out. This recommendation would benefit healthy food companies understand better their target audience thus, enhancing its marketing strategies.

General findings show that Irish consumers were more keen to a healthy eating habit, especially women. A more healthy consciousness were seen among middle-age adults and older adults, it is recommended to apply a similar research in countries with different culture, as different backgrounds often are related to distinct life style and eating habits, would suggest distinct results.

People had a strong assumption that healthy food is more expensive, especially respondents with higher income. These groups also had higher likeability to follow a healthy and balanced diet. Since findings show that Income can influence food choice, it is recommended an investigation considering population with distinct income per capita, e.g., countries from West versus East Europe. Same as the first recommendation, this approach would benefit international fast food companies.

8. Reflections

I would like to start my reflection by giving a brief of the significant academic events in my life that lead me to this day. I am 37 years old, and I am originally from Brazil. I've been in Ireland for 5 years, and currently living with my partner in Mountmellick, Laois. I graduated as Administrator at Universidade Estadual Paulista – UNESP (University of Sao Paulo State) in 2007, and after 4 years I got my MBA in Human Resource at Uni-Facef a university from my. Currently finishing my Master of Science in Marketing at Dublin Business School, Dublin, Ireland.

I studied General English for 3 years, which really improved my language skills. So, I felt I was ready to apply for a third level course in Ireland. I always have interested in Marketing and its subjects. After considering a number of colleges I have decided for Dublin Business School.

This master's Marketing program has contributed to develop a wide range of skills, from broad knowledge including techniques about writing academic paper and how to enhance personal and professional skill to specific and technical skills, in the area of consumer behaviour, marketing innovation and digital media. In this era, where consumer behaviour is a complex process and is in continual change, the amount of information is provided from every single interaction with brand, product or service is so extent, This program has enhanced my thinking ability to understand the present, act with ethic, respecting all individuals and institutions I interact with, also enhancing the ability of reading present facts and events that can build foundation to be prepared for the future.

About the contribution of this dissertation, although it was a requirement of the program, it was also a learning process for me. I really enjoyed the experience of writing this academic paper. The one in question, was my first written in English, which I can describe as one the biggest challenges I ever faced. It is a complete different and formal way of writing, and that increased my vocabulary and improved my reading and writing skills. The life cycle of this dissertation was subject to frustration, anxiety but also full of excitement and joy.

The first hurdle to overcome was finding an industry that I would enjoy studying about it. That was not difficult. Since I came to Ireland I started to show interest for the food industry, especially working in the environment. However that was too broad, the difficulty really started when I had to decided which specific area of Marketing I would approach, taking into

consideration that I had to find a problem or issue to be explored. And not only any problem, but one that was valuable and reflecting a gap in knowledge. After spending a few weeks I finally decided to approach the fast food industry and health conscious market, which by the end of my first proposal (Research Methods I), I have decided to investigate the fast food advertising and health consciousness.

Then I had another obstacle. When I started Research Methods II, my focus was to build a strong and solid literature review. When I finally started my dissertation phase my initial challenge was to revise and polish my research objectives, that I did with my supervisor's guide and advices.

One other obstacle was getting access to the industry. Some of them did not reply my emails. I even have tried contacting them on online communities such as, Twitter and LinkedIn. Others did agree in participating but never returned to make an appointment for interview. That was frustrating, as I knew it those responses would give exponential contribution to my research.

But life goes on. I had to work with data I had in hands. And thanks to all 110 respondents of my questionnaire and the two companies that participate by answering my "written interview" (Itsa and Subway), I started doing my analysis. From there I started putting in practice my analytical skills, and I got more excited when it came the time for discussions and then conclusions. But I have to say, I was so relieved when I have completed the abstract, as I only had four days to left to submit my dissertation.

After all this hard work I closure my dissertation cycle assured that my work did significant contribution to the food industry as well to the academy. I do not feel I would change a thing during this process. And my advice for other students would be to choose a topic that they honestly would love work with and to give their best.

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Appendix

Appendix 1 – Questionnaire Consumers

Questionnaire – Consumers

You have been asked to participate in a research study about advertising of fast food and food choice in the Irish market. I ask you to read and answer the questionnaire below. Your participation is voluntary, and you can withdraw anytime. I assure any personal information will be share as an individual and confidentiality will be preserved. At the end of the survey please click 'DONE' to send it. Thanks for your participation.

Section 1 - Demographics

1. Gender

- Male
- Female

2. Age

- 18–35 years
- 36–50 years
- 51–64 years
- 65+ years

3. Annually Personal Income

- less than €20,000
- €20,000 to €29,999
- €30,000 to €49,999
- 50,000 or more

Section 2 - Food Choice

For the following questions, please tick the box that matches your view most closely

4. I follow a healthy and balanced diet.

- Always
- Most of the time
- Sometimes
- Rarely
- Never

5. It is important that the food I eat...

- Keeps me healthy
- Contains vitamins & minerals
- Helps me control my weight
- I do not worry about healthiness of food

6. Do you think Fast Food restaurants sell healthy food?

- All
- Most
- Many
- Some
- None

7. Can you name a healthy fast food restaurant?

- Yes _____ (please name it)
- I don't know any.

8. How often do you go to YOUR healthy fast food restaurant? If you have any favourite.

- Every week
- Every 2 weeks
- Once a month
- Rarely
- Not applicable

9. How often do you go to a fast food restaurant?

- Every week
- Every 2 weeks
- Once a month
- Rarely

10. Regarding your food choice when eating out, which factor listed below is the most important?

- Convenience
- Health
- Location
- Price
- Taste
- Other

_____ (please describe)

11. I think that eating healthy food is more expensive.

- Agree
- Somewhat agree
- Neither agree or disagree
- Somewhat disagree
- Disagree

Section 3 - Fast Food Advertising

12. Do you think advertising of healthy food is aimed at?

- Men
- Women
- Both

13. Do you remember any healthy fast food advertising?

- Yes
_____ (please name it)

I don't remember.

14. How likely are you to go to a healthy fast food restaurant based only in its advertisement?

- Very likely
- Likely
- Somewhat likely
- Unlikely
- Very unlikely

Appendix 2 - Questionnaire - The Fast Food Industry

1. For decades fast food have been associated as unhealthy food and one of the main causes of health public problems such as obesity and heart diseases. But in the recent years we have seen a change in the landscape and new form of fast food were introduced in the market - the healthy fast food. How do you see the future demand for both markets?
2. Do you believe the increasing market for healthy fast food is due to advertising or consumer's demand?
3. In a society where healthy eating is becoming a global concern, how advertising can drive consumer behaviour?
4. Other than advertising, which other factors you believe most influence consumers' food choice, when eating out?
5. Some research argues that there are some advertisements with false or misleading health claims. How companies can deal with this issue and reduce or eliminate any negative perception of its products?

Appendix 3 – Ethics Checklist

Ethics Information – Business Postgraduate Studies

Student Details	
Student Identifier:	Carlos Eduardo Rezende e Souza
Submission Date:	15/01/2017
Proposal Research Title:	An investigation into the advertising of fast food and a healthy conscious market in Ireland.
Brief Description of the research:	Understand the health fast food advertising, communication and message and how consumers behaviour towards food choice.

Sampling	
Population of interest: (brief description)	Adults consumers, male and female, aged 18 years old and over living in Ireland.
Sample of interest: (brief description of size and how it is chosen)	Expect to reach 100 participants chosen through snowball sampling technique.

Primary Research - Data Management	
Is the data anonymised – how is this done?	Yes, the data is anonymised. This will be done by removing personally identifiable information from data sets, so that the people whom the data describe remain anonymous.
How is data confidentiality maintained/	As researcher I agree to handle, store, and share research data to ensure that information obtained from and about research participants is not improperly divulged.
Where will the data be stored/	Data stored in my personal computer and on the clouds, will be protected by password which I am the only one with access.
When will the data be destroyed/	The day after the time period for appeal-of-grade period has expired. Or, the day after any grade appeals have been finalized and closed.

Specific Ethical Considerations	
Detail any aspects specific to your proposal that will require further ethical approval e.g. interaction with under-18-year-olds, experiments requiring deception, anything that might cause respondents any distress, etc.	This research has no ethics conflicts and does not offer any physical or psychological harm.

Student: Carlos Souza / Student number: 10348397

Date: 15/01/2018

Signature: Carlos Souza

Signed: _____

Appendix 4 – Support Documentation – Information Sheet for Participants

PROJECT TITLE

An investigation into the marketing advertising of healthy fast food in the Irish market

You are being asked to take part in a research study on healthy fast food advertising, and consumer behaviour towards food choice. I am Carlos Souza, master student at Dublin Business School and my research supervisor is the lecturer Shakeel Siddiqui.

WHAT WILL HAPPEN

In this study, you will be asked to participate with an interview where questions regarding fast food and healthy fast food market, advertising and consumer behaviour.

TIME COMMITMENT

The interview typically takes 45 minutes.

PARTICIPANTS' RIGHTS

You may decide to stop being a part of the research study at any time without explanation required from you. You have the right to ask that any data you have supplied to that point be withdrawn / destroyed.

You have the right to omit or refuse to answer or respond to any question that is asked of you.

If you have any questions as a result of reading this information sheet, you should ask the researcher before the study begins.

CONFIDENTIALITY/ANONYMITY

The data I collect does not contain any personal information about you except such as revenue neither the company's strategy. My intentions regard the use of data for my dissertation. Ultimately, this research may be presented at conferences, presented as a paper or published as part of a book. For what I extent to which your individual participant might be identifiable.

FOR FURTHER INFORMATION

I or / and Shakeel Siddiqui will be glad to answer your questions about this study at any time. You may contact my supervisor at shakeel.siddiqui@dbs.ie or +353 1 417 7500.

Informed Consent Form

PROJECT TITLE:

An investigation into the marketing advertising of healthy fast food in the Irish market

PROJECT SUMMARY:

This interview is part of the dissertation for my master's degree in Marketing at Dublin Business School. This research aims to understand the fast food advertising in Ireland regarding the increasing trend of healthy fast food and its advertising and the influence on consumer's food choice.

By signing below, you are agreeing that: (1) you have read and understood the Participant Information Sheet, (2) questions about your participation in this study have been answered satisfactorily, (3) you are aware of the potential risks (if any), and (4) you are taking part in this research study voluntarily (without coercion).

Participant's signature

Participant's Name (Printed)

CARLOS SOUZA

Student Name (Printed)

Student Name signature

Date