Report of -Qualitative Consumer Research on eating outside the home

Final Report August 2019

Commissioned by Food Standards Scotland











Table of Content

1 Executive Summary	3
2 Background	5
3 Research Objectives	5
4 Methodology	6
5 Main Findings	8
5.1 Current Behaviour and Attitudes- Eating Out of Home	8
General Observations Regarding OOH Eating	8
A Summary of Key Positives and Negatives to Eating OOH from the Perspective of the Respondents	9
Key Conclusions in Relation to the Relative Positives and Negative of Eating OOH	11
Do Those Who Eat OOH Want to Eat More Healthily When Out of Home?	12
Attitudes When Prompted with the Reality of the Calorie Implications of Eating OOH as	12
They Are	
Current Behaviour and Attitudes- Eating Out of Home- Summary and Conclusions	15
5.2 Views on Initiatives to Make Eating Healthier OOH Easier	16
Potential Initiatives that Were Broadly Supported	16
Potential Initiatives that Were Received with Little Enthusiasm but were Not Rejected	17
Potential Initiatives Rejected by Most Respondents	17
Summary Observations Relating to Potential Initiatives to Help Consumers Eat More	18
Healthily When Out of Home	
Specific Exploration of Attitudes to Provision of Calorie Information	18
Initiatives to Support Parents and to Encourage Children to Eat More Healthily OOH	22
Summary and Conclusions- Key Issues to Consider When Planning Policy Initiatives	24
Designed to Help Consumers to Eat More Healthily 00H	
6 Appendices	26
6.1 Recruitment Questionnaire	27
6.2 Homework Template	33
6.3 Topic Guide and Showcards	35
6.4 Full breakdown of Audience Segment Profiles	46

1 Executive Summary

Background, objectives and methodology

This qualitative research was undertaken to explore consumer views on eating outside the home. This research complemented the Food Standards Scotland (FSS) public consultation on 'proposals to improve the out of home food environment' which ran between November 2018 and February 2019.

The methodology involved eight 90-minute focus groups, which included a total of 63 respondents. Groups were held in Edinburgh, Glasgow, Dundee and Aberdeen (and involved respondents who lived and or worked in the cities, and out with the cities). The sample was drawn from lower socio economic groups (that is ((C1)C2DEs) who ate out regularly and included younger people in Scotland (17-30 year olds), and parents of young children.

Findings

Views on eating out of the home

It is recognized that eating OOH was historically viewed as a treat that brought positive experiences at key moments. Now eating OOH is seen an opportunity to indulge ourselves or an opportunity to relieve ourselves of the daily stresses and pressures of life. As such, eating OOH is now felt to be something the people of Scotland 'deserve' in life as routines are perceived to be getting more pressured and frenzied.

There are 6 main positives of eating OOH- it is easy to do, there is huge variety and choice, it can be a great treat, foods eaten OOH can be very satisfying, eating OOH is a great way to enhance socializing, and eating OOH can now be done at a lower cost and with greater value than ever before.

The main negatives or drawbacks of eating OOH mirror the positives- the costs of eating OOH are recognized to 'add up', it is perceived to fuel laziness and leads to a loss of cooking skills especially amongst younger people, it can be less social than eating at home, and crucially, eating OOH is recognized as often being a very unhealthy way to eat due to- the types of food on offer, ingredients, cooking methods and portion sizes.

Based on the research, it appears that most people who eat OOH want to eat more healthily when OOH, with the exception of many under 30 years old and those who have a general desire to live without any restrictions on their personal choices for life. That said, beyond the positives of eating OOH, as noted above, the research highlighted that many consumers also feel that healthy food is simply not as satisfying or tasty, not as available OOH and can be more expensive. As a result, at this time, it is felt to be too tempting to eat unhealthy foods when OOH.

When prompted, the research highlighted that consumers found it difficult to assess how healthy foods that can be eaten OOH are in terms of how many calories they contain. This appears to be the case especially for foods that are perceived to be healthy (e.g. salads, yoghurts, vegan dishes). When respondents were presented with the reality of how many calories can be consumed in typical dishes OOH they were clearly shocked.

The way forward

The vast majority of respondents felt that it was a good idea to have calorie information presented at point of sale for foods being sold OOH (including for take away foods, soft drinks and potentially alcoholic drinks). This initiative, it was felt, should be mandatory- with all businesses being required to provide calorie information at POS along with prices.

Having calorie content displayed alongside foods sold OOH was felt to have the potential to be informative, helpful, persuasive and necessary in the long run for the benefit of society. Beyond the direct benefit to the consumer it was felt that calorie information would have the knock on positive of encouraging businesses to reduce typical calories per offering.

To ensure that the calorie provision initiative has the greatest potential impact, consumers feel that the initiative should be supported by an education programme to help them understand and get the most value from the information. In addition, the research showed that consumers feel it is important that the calorie provision system be well policed to ensure credibility.

Beyond calorie information provision, it was felt that more can and should be done to encourage the food industry in Scotland to limit 'the risks' of eating OOH. It was felt that this should be done through four key initiatives:

- The industry should provide more detailed information about the nutritional content of foods sold beyond calories. That would be:
 - Through provision of more information on salt, sugar and fat content
 - With the industry being encouraged to provide this information, potentially in a traffic light format (as used in supermarkets), through a voluntary scheme
- Industry should be encouraged to increase the amount of healthy food they offer and as part of this to reduce the typical levels of fat, salt and sugar in the foods they sell OOH. Again, it was felt any programme that is set up to encourage reduction of unhealthy ingredients and increase the provision of healthy foods should be voluntary
- In addition, industry should be encouraged or incentivised to reduce the cost of healthy foods being sold OOH
 - It should be noted that while respondents felt they have easy access to unhealthy foods in large portions via promotional deals, they also feel that these deals provide good value. As such, respondents were very clear that they felt there should not be any restrictions on promotions of foods, regardless of how unhealthy they are, for adults. Respondents preferred the idea of greater choice and more value being offered via healthy promotional deals
- The research showed that consumers would support the idea of an award system that would encourage OOH eating businesses to be more conscious of the health needs of people in Scotland and to help consumers choose

Beyond these potential policies that could benefit the adult population in Scotland, there is much more openness and support for wide-reaching legislation to force greater controls around what children are exposed to when eating OOH both for young children eating out with parents and for teens who are more independent. This was felt to be required as parental control is perceived to be weakening in modern society in the face of the cleverness and persuasiveness of the OOH food industry. Caving in to their children is often the path of least resistance to keep the peace for many parents.

For children under about 10 years of age, children's menus are currently seen as useful to have but, at the same time, too often unhealthy. It is felt that children's menus too often create poor eating habits and tastes from a very young age.

The initiatives for children which saw strong support as mandatories are:

- Healthier children's menus as standard
- Smaller, children's portions allowed from the adult menu without consumers being penalised on price
- Limiting unhealthy choices, including via promotional offers (such as free ice cream or unlimited dessert etc.)
- Setting controls for businesses around schools to facilitate healthier choices and reduce the accessibility of unhealthy choices for teens

2 Background

Between November 2018 and February 2019 Food Standards Scotland (FSS) undertook a public consultation on proposals to improve the Out of Home (OOH) eating environment for people in Scotland, which included asking views on initiatives to reduce calories and views on children's food available outside the home.

https://consult.foodstandards.gov.scot/nutrition-science-and-policy/proposals-to-improve-the-out-of-home-environment-i/user uploads/fss---out-of-home---nov-2018-pdf.pdf

This report, commissioned by FSS and completed by Jump/ RedTree/ SMG research consortium ('The Research Team'), provides additional contextual information from focus groups to complement the FSS public consultation.

The broad definition of 'Eating Out of Home' used in this report is shown below:

EATING DURING ANY TIME OF THE DAY AND FOR ANY PURPOSE- whether that be- breakfast, lunch, grabbing a snack, having a coffee and cake, or dinner

WITH FOOD BOUGHT FROM ANY TYPES OF BUSINESS:

- Cafes, bakeries, all types of restaurants, takeaways, pubs/bars, vending machines, workplace canteens, hotels, leisure and entertainment venues
- Supermarkets and convenience stores who provide "food on the go"
- Places where one might purchase food when commuting or travelling
- Food delivery services, including online

Food takeaways that may be ordered to eat at home also counted with regards to this study but eating food out of home that had been prepared at home (e.g. for a packed lunch or picnic) did not count.

3 Research Objectives

The objectives for the qualitative consumer research fell into two categories:

- Generate a general, contextual understanding of the relationship between people in Scotland and eating out of home at this time
 - Determine how current behaviour and attitudes to 00H eating will influence reactions to future initiatives to help reduce calorie intake while eating 00H
- Generate an understanding of attitudes to potential initiatives that could encourage the people of Scotland to reduce calorie intake when eating OOH. Specifically looking at:
 - o Attitudes to provision of calorie information
 - Attitudes to provision of other consumer information alongside or instead of calorie information
 - Attitudes to initiatives to improving the way that food is presented to and sold to children

4 Methodology

For the qualitative research part of the consultation 8 group discussions were undertaken between February 19th and 25th 2019. Each group discussion lasted approximately 90 minutes and involved 7 or 8 respondents. All respondents were recruited by professional research recruiters, who lived near to the locations of the groups. All respondents received a cash incentive of £45 to encourage attendance, as a reward for completing a short homework task and to cover travel expenses.

To help them prepare for the group discussions all respondents were given a short homework exercise to complete in the week before the research sessions. This exercise required them to keep a record of the number of occasions they are out of home, when this was, who they were with, the occasion (i.e. which meal), whether they took advantage of any promotional deals and how healthy they regarded the food they consumed. Those eating out with children were also asked if they used children's menus.

A loose topic guide of questions was used to manage the discussions during the groups and to ensure that all areas relating to the project objectives were covered. In addition, three discussion stimulation aids were used during the groups. These were:

- A list of ideas that could be used to help people in Scotland eat more healthily or less unhealthily when OOH
- A calorie guessing exercise that required respondents to determine how many calories they thought were contained in a selection of dishes that are available in OOH eating establishments
 - o Note- this exercise was developed from materials available from Diabetes UK
- A list of common dishes eaten OOH alongside an estimated range of calories that can be contained within the dishes depending on portion size, cooking method and ingredients
 - o Note- this list was generated by FSS and used in their public consultation

The homework exercise template, topic guide and stimulus materials used in the groups are included in the Appendix of this report.

The Sample

The grid below presents a profile of the respondents recruited for each group discussion. As can be seen, the sample was recruited with a deliberate focus on population segments that could be more affected by changes to OOH policy. The key groups included in the sample:

- Those in lower SEGs (that is (C1)C2DEs)
 - All respondents were in these less affluent SEGs, and as such they represented the population segments potentially more likely to be affected by any changes in policy that lead to price increases for OOH foods
- Younger age groups (that is under 30 year olds)
 - Half of the group discussions included at least some respondents under 30 years of age.
 These respondents represented the demographic group that is understood to be the most frequent user of OOH eating establishments
- People eating out with children
 - Four of the eight groups were recruited to ensure they all contained respondents with dependent children. These respondents represented the population sub-group that has particularly relevant views on children's menus and other potential areas of policy development that might influence how and what children eat OOH

Group 1 - Glasgow	Group 2 - Glasgow
Females only	Males & Females (50/50 split)
20-40yrs	36-50yrs
All with kids at home	Mix of kids / no kids
C2DE	C1C2D
Eat out regularly (mix of fast food, takeaways,	Eat out regularly (mix of fast food, takeaways,
coffee shops, bakeries, shops / supermarkets)*	coffee shops, bakeries, shops / supermarkets)*
Group 3 – Edinburgh	Group 4 – Edinburgh
Males & Females (50/50 split)	Males & Females (50/50 split)
51-65yrs	16-25yrs
C1C2D	C2DE
Eat out regularly (mix of fast food, takeaways,	Eat out regularly (mix of fast food, takeaways,
coffee shops, bakeries, shops / supermarkets)*	coffee shops, bakeries, shops / supermarkets)*
Group 5 – Dundee	Group 6 – Dundee
Females only	Males & Females (50/50 split)
16-25yrs	51-65yrs
C1C2D	C2DE
Eat out regularly (mix of fast food, takeaways,	Eat out regularly (mix of fast food, takeaways,
coffee shops, bakeries, shops / supermarkets)*	coffee shops, bakeries, shops / supermarkets)*
Group 7 – Aberdeenshire	Group 8 - Aberdeenshire
Males & Females (50/50 split)	Males & Females (50/50 split)
20-40yrs	36-50yrs
Mix of kids / no kids	All with kids at home
C1C2D	C2DE
Eat out regularly (mix of fast food, takeaways,	Eat out regularly (mix of fast food, takeaways,
coffee shops, bakeries, shops / supermarkets)*	coffee shops, bakeries, shops / supermarkets) *

*all respondents were recruited on the basis that they ate OOH "Frequently" (as defined by themselves) in at least two relevant locations:

- Eat in a restaurant
- Buy lunch from a supermarket / convenient store / Boots / Café/ Bakery etc
- Go to a fast food restaurant
- Go to a coffee shop (Starbucks / Costa / Café Nero etc)
- Buy crisps / sweets / chocolate bar / "a sweet treat" to eat out with your house (e.g. at lunch / on the go / afternoon snack)
- Buy takeaway food to eat at home

A copy of the recruitment questionnaire used for this study is also included in the Appendix of this report.

5 Main Findings

5.1 Current Behaviour and Attitudes- Eating Out of Home

This first part of the report outlines findings relating to the context to any future change to the OOH environment. This includes insights gathered relating to the relationship that respondents stated they have with eating out of home. Significant parts of the insights gathered during this section of the research were based on discussions about the homework exercises respondents had completed in advance of the group sessions. This section also provides insights relating to respondents' attitudes to the health implications of eating OOH, including both front of mind attitudes and attitudes when prompted with data showing the potential implications of eating OOH in terms of calorie consumption.

General Observations Regarding OOH Eating

Across the research sample, a range of frequencies of eating OOH were reported, from those who ate out every day, and sometimes for every meal, to those who ate out approximately three to four times per week. It was very clear from early in the discussions that respondents across all groups felt eating OOH was very normal behaviour for them and for people like them in Scotland. This was clearly the case for all eating occasions but there were four eating out occasions that have, it was felt, become part of the norm for respondents and Scottish society in recent years:

Breakfast

- o Which was regarded as a much more routine purchase when OOH than in the past
- As an example, breakfasts on the go were regarded as an excellent way of saving time and making morning routines easier

Lunch

 It was stated that buying sandwiches or other lunch options when OOH has largely replaced the taking of packed lunches to work. The only exceptions to this trend were felt to be when individuals stated they were on a 'diet' and trying to control their weight, or, when on a tight budget and money was trying to be saved

• Coffee and a snack

- Grabbing a coffee on the go, when shopping or when travelling, was felt to now be a norm for many or most people
- o This type of behaviour was felt to be fuelled by the ubiquitous nature of coffee shops

Evening meals

There was no indication that most respondents regarded eating evening meals away from their homes (other than for 'special occasions' or 'treats') as a new form of common or normal behaviour. However, easy access to food that is prepared OOH, and delivered through companies such as Just Eat and Deliveroo, does make non-preparation of evening meals more of a norm than in the past

It should be noted that despite the general belief that eating OOH was a norm for all respondents (who it should be remembered were recruited as people who eat OOH 'frequently'), the degree of 'commitment to eating OOH' did appear to vary by lifestage. For example:

- Older respondents, that is those over 60-year olds, were the more likely to eat out least frequently. This segment of respondents typically ate out about 3 or 4 times per week
 - The main motives for this segment for eating out appeared to be to treat themselves and/ or to enhance their social lives
- Parents, in the middle of the scale, appeared to be 'conflicted' in their attitudes to eating OOH

- On the one hand they, in the most part, try to still position eating OOH to their younger children as a treat, while conceding that they are often fighting a losing battle with their children, especially as their kids get into their teens, at which time they expect to eat out on a regular basis either for snacks or as full meals
- On the other hand, parents appeared to embrace the opportunities that OOH eating offered them to provide escape from the pressures of life and or to give them a sense of personal freedom
- The population segment that clearly eats OOH most frequently was under 30-year olds
 - This group of newly independent young people stated that they are often eating out pretty much all the time

Beyond lifestage, the only other criteria that appeared to have a significant bearing on levels of eating OOH was location of home. For those living in more rural settings it was clear that they ate out of home less regularly, primarily as a result of having fewer opportunities to eat OOH in comparison to those living in more urban settings.

Despite the variations in commitment to eating OOH it should be noted that there was strong agreement amongst respondents that attitudes to eating OOH have totally changed in society. In the past, it was felt, eating OOH was regarded as a luxury or as a real treat. In contrast, eating OOH now is regarded as an acceptable norm on a far more regular basis. This was the case for all segments in the sample.

To supplement this general description of the relationship that the research sample stated they have with eating OOH, a series of mini pen portraits of each of the key segments represented in the groups is provided in the appendix of this paper. Descriptions are provided of relationships with eating OOH for the following segments:

- Young newly independents 17-30 year olds
- Younger parents 20-35 years of age, with children under 8 years of age
- Older parents c30-50, with children beyond the children's menu years
- Older parents' with teens
 - Note although dependent teens were not included in the sample it was clear that parents
 of children in their early to mid-teens had very clear views on the way their teens eat OOH
 and, in turn, had concerns about how they ate OOH. As such, a mini profile of teens from
 the perspectives of their parents is provided
- Older respondents and empty nesters 50 + years

A Summary of Key Positives and Negatives to Eating OOH from the Perspective of the Respondents

Following a general discussion about how and where respondents eat OOH they were asked to outline what they felt were the main positives for or motives to eating OOH, and to describe the main negatives of eating OOH. As can be seen below, respondents were clearly conflicted with regards to their attitudes to eating OOH with many of the attractions to eating OOH mirrored by an opposite downside.

✓ Positives and facilitating arguments for eating OOH

- It is so easy- for time poor people
 - Eating OOH is convenient at so many levels- options are always close by or can be delivered, there is no mess, and no waiting if required or desired
 - Young people also felt a positive of eating out was that they don't need to learn how to cook
 - o It is great if you are feeling lazy or tired

- The variety and choice of food options available OOH are regarded as massive- with options being available 'almost everywhere', and providing:
 - Different experiences
 - For all tastes
 - It was also felt that OOH food providers are getting better at accommodating for those with specific requirements- including those who want to eat healthily, those who are vegetarian and vegan, and those who have food sensitivities and allergies
 - In relation to this point it is worth noting that the provision of calorie information on menus was spontaneously used as a good example of how some OOH businesses are becoming more conscious that some customers are looking for healthier options. Across many of the groups, in all age categories, there seemed to be quite good awareness that businesses such as Pizza Express, Pizza Hut, Subway, Greggs, McDonald's are putting calories on their menus
- Eating OOH can provide an excellent treat- either as a 'fancy meal' or as an on the go indulgence
- The foods that can be consumed OOH can be very satisfying. That is, it is typically regarded as easy
 to get exactly what is desired and to the quantity that will be very filling
- Eating OOH is also regarded as a great platform to enhance social lives
 - This was regarded as the case for all types of social experience- as couples, with friends or colleagues and with families
- The OOH eating environment provides access to food at low prices and is perceived, often, to provide excellent value
 - Value was felt to be available for many different eating group types from those who are eating alone to families
 - Respondents stated that value is recognised as being delivered through a variety of variables at different times including:
 - Low prices, promotional deals, large portion sizes that provide the opportunity to 'really fill up', quality in the form of good taste, quality in the form of fresh ingredients, and in terms of the overall experience that can be provided when eating OOH as opposed to when eating at home

➤ Negatives and drawbacks to eating OOH

- Costs can 'add up' and be high both for individual eating experiences and for all eating experiences combined
- The knock-on consequence of people eating out more regularly is that many lack the confidence around cooking or simply don't learn to cook in the first place
 - For many respondents, this meant that cooking is perceived as a major hassle in busy lives
 - To amplify this point, it was noted in the groups with younger respondents that many did
 not even understand the 'before eating out was the norm' concept. That is, many young
 people felt that the era when everyone cooked every day from scratch was almost mystical
 or lost in time
- The culture of eating out or buying take-away food is felt to fuel laziness
- In addition, as a contradiction to the perspective that eating out is an excellent platform for socialising it was noted by many respondents, especially for those over 30 years of age, that eating OOH can be actually less social than eating at home, when food is prepared carefully and in a considered way and where the whole experience is shared with family and friends
- Very importantly in relation to this project it was also recognised, spontaneously, that many of the food choices available to them and that they eat OOH are very unhealthy

- This was primarily felt to be because the ingredients and cooking methods used mean food eaten OOH is often not very nutritious and can be highly calorific. One respondents stated, 'it is rubbish'.
 - While most respondents believed they know what is healthy, they find it easy to deflect its relevance to them and justify eating less healthy foods, when eating out of home, based on five perspectives:
 - The 'rubbish' is significantly preferable, tastier and more satisfying than 'healthy stuff' which is regarded as less tasty and bland- "just salad"
 - o "I am not a rabbit" Younger Mum Aberdeen
 - They can trade-off eating unhealthy foods when OOH by 'promising' to eat healthily at home
 - They believe they deserve the more indulgent and less healthy treats within their 'busy lives'
 - Also, eating more healthily is felt to be more expensive. With this being the
 perception for eating both in and out of home
 - It was also felt to be more difficult to find and identify healthier options OOH, even if they are being sought
- Beyond OOH eating options being regarded as often unhealthy due to the lack of nutritional value, eating OOH is regarded as often unhealthy due to the amount of food consumed
 - Respondents spontaneously recognised that for a typical meal or eating experience more calories will be consumed OOH than in home due to the amount of food eaten
 - Many respondents across all segments in the sample recognised that is it too easy for 'us to 'stuff' ourselves' when eating OOH- due to three factors:
 - Portions being recognised as bigger
 - Multiple courses (starter, main and pudding) or multiple component parts (e.g. sandwiches, crisps and chocolate) being taken as a norm
 - And the engrained attitudes of 'eat what you're given' or 'take advantage of deals'- being accepted as 'right'
 - Further to this, occasions for socialising can often be used to justify over indulgence. One respondent recognised that this attitude had been only typically prevalent on Christmas day, but it is now so on many eating out occasions

Key Conclusions in Relation to the Relative Positives and Negative of Eating OOH

It was clear from the groups that, historically, eating OOH was regarded as a treat that gave positive experiences. Now, however, the treat that eating OOH offers is more often about taking away daily stress and pressure- or just indulging. It can be observed that this shift in attitude fits in with the way that people in contemporary Scotland like to (or like to think that we) live our lives now. That is-busier, faster and more furiously based on instant gratification.

It can be observed that the basic direction of travel for eating OOH appears to be based on simple beliefs:

Eating OOH is the norm in modern society

Eating OOH is an excellent way to make life easier

Eating OOH can be done far more often now than ever before-ubiquitous, low cost and good value

Eating out can be justified as a treat that we deserve

Do Those Who Eat OOH Want to Eat More Healthily When Out of Home?

In advance of exploring strategy and policy options to help those who eat OOH eat more healthily, respondents were asked if they wanted to eat more healthily OOH. It was clear, that the majority of respondents did want to eat more healthily and live more healthily in general. This, as would be expected, was to allow them to look better, feel better, do more and live longer lives. The main exception to this general ideal was:

- Amongst respondents who stated that they were happy with who they are and how they live their lives- and in turn, comfortable with how they eat:
 - The young singles segment of the sample was the most likely demographic group to hold this belief
 - In addition, those respondents who held a general belief that they should be able to live their lives the way they want, without social pressure, were also likely to state that they had no immediate desire to live more healthy lives

That all said, it was clear that many respondents, across the whole sample, find it very difficult, despite their 'best efforts', to eat healthily when out of home for the reasons outlined above. That is, eating unhealthily OOH is easier than the alternatives, it can be done everywhere, and they feel they deserve it.

Attitudes When Prompted with the Reality of the Calorie Implications of Eating OOH as They Are

Respondents were taken through three exercises within the groups that allowed them to consider their knowledge of calories in food choices available OOH, and the potential volume of calories that they may consume OOH.

In the first exercise respondents were presented with a series of five dishes that are available in well-known high-street establishments and asked to guess the calories in each dish. (As noted, this exercise was developed from one presented by Diabetes UK.) After having time to consider the calorie content of each dish, respondents were told the actual number and asked to comment.



The second exercise involved respondents being read a few facts about calories consumed OOH. All the facts were provided to the research team by FSS:

FACTS PROVIDED BY FSS

- We eat out around 3 or 4 times a week- on average
- It has been estimated, on average, that up to 25% of our calories may come from eating out
- Many Out of Home options, due to the sizes of the portions can contain far more calories than those bought in supermarkets
 - E.g. Cakes, biscuits, pastries bought out of home have been shown to contain twice as many calories as those from supermarkets (Source- PHE Research)
- A quarter of main meals sold for eating out of home (e.g. in restaurants, cafés etc) contain more than 1,000 calories- which is 50% of the recommended average daily requirement for a woman (Source- OAS Research)

The final exercise involved respondents being given a grid (again based on figures sourced by FSS) that showed a potential scale of calories that can be contained within different dishes often consumed OOH in Scotland. Respondents were asked to comment on the grid and to express why they thought the ranges for the dishes and food types were as they were:

Approximate calorie ranges of common menu items (source- FSS Consultation*)		
Food Type	Approximate calorie ranges	
Cooked Breakfasts	500-1570	
Fish and Chips	650-1900	
Burger and Chips	470-1900	
Pizzas	380-1600	
Starters and Small Plates	140-1730	
Sandwiches and wraps	160-700	
Paninis and Baguettes	220-1000	
Chips/Fries	220-1440	
Sides (excl. regular chips/fries)	70-910	
Desserts	150-1420	
Cinema popcorn	210-1180	
Cakes and pastries	60-760	
Specialty Coffee (excl. black coffee)	50-420	
Milkshakes	200-1030	
Food on the go meal deals	200-1500	

^{*} Food Standards Scotland. Consultation- Proposals to Improve Out of Home Environment (November 2018) https://consult.foodstandards.gov.scot/nutrition-science-and-policy/proposals-to-improve-the-out-of-home-environment-i/user_uploads/fss---out-of-home---nov-2018-pdf.pdf

It was clear, very quickly after these exercises were undertaken, that many respondents were left quite uncomfortable. The realisation of how little they knew about the implications of eating OOH horrified and surprised many respondents as these quotes highlight:



More specifically, respondents were clearly surprised by the information provided within the exercises at 3 key levels:

- How high calorie content is in all dishes and food types that are typically consumed by them OOH
- How far out many of them were when they tried to estimate how many calories were in typical dishes they eat 00H
 - It should be noted that while some respondents did get close to the correct calorie count for some of the dishes presented in the Diabetes UK exercise many, it appeared, were either lucky with their guesses; or were respondents who were or had been more health conscious and had at some point in their pasts undertaken calorie counting diets
 - o It was noted that the average estimate for all dishes was lower than the actual calorie numbers in the dishes. That said, the calorie counts of specific dishes with health signifiers were most surprising for respondents. For example:
 - Coffee Republic Yogurt- typical estimate was 200 Calories (v 411 actual)
 - Wagamama Vegan curry- typical estimate was 500 Calories (v 1094 actual)
 - Pizza Express Chicken Salad- typical estimate was 550 Calories (v 954 actual)
- Respondents were also surprised and shocked by how wide a range of calories can be consumed within the same dishes e.g. chips- 220 to 1440 Calories
 - Most respondents did recognise, spontaneously, that the number of calories were connected to three factors- the ingredients, the cooking method and the portion sizes
 - That said, the exercise with the ranges of calories for specific dishes did make many recognise how difficult it can be to estimate the number of calories that are being consumed in foods being eaten OOH

In general terms, spontaneously, most agreed, on some level, that the information provided about calories was a serious eye-opener and very worrying. In addition, many respondents spontaneously stated that seeing such information on menus and the OOH food they are eating would be a wake-up call and make them stop and think. This was an attitude most commonly expressed by respondents beyond 30 years old.

Current Behaviour and Attitudes- Eating Out of Home-Summary and Conclusions

- Eating OOH is a normalised, every day part of lives today easy, convenient, good value and sociable
- Eating OOH is understood to be less healthy than eating at home and the majority acknowledge that they should eat more healthily when OOH. However some, particularly the younger segments and those who hold personal freedom of choice as a key value, are resistant to doing so
- The majority of our sample don't eat more healthily OOH for a number of reasons healthy food is a bit boring or dull; less flavoursome; more expensive; not a treat and harder to find when OOH
- Portion size, ingredients and cooking method are understood to be the main influences on health of OOH options
- It is acknowledged to often be difficult to determine what is healthy and what is not healthy when buying food OOH. Most respondents significantly underestimated the calories in the foods they perceived to be healthier
- Many acknowledge that their willpower is weak and that they need help and encouragement to make sensible eating choices when OOH- especially when prompted with the reality of the situation regarding calorie intake OOH
- Accessible, quick information at key touchpoints the times that they are deciding what to eat is spontaneously felt to be important
- They are aware that some of the larger food chains are putting calories on menus and they welcome this development as a positive move it does make them think and gives them a choice
- Key Requirements for Policy Development include....
 - Understanding consumers negative perceptions of healthier foods
 - o An understanding that people want tasty and inexpensive healthy choices
 - Help is required to assist people to avoid the worst of OOH eating health risks

5.2 Views on Initiatives to Make Eating Healthier OOH Easier

This second part of this report outlines findings relating to where respondents felt help could be given to consumers to allow them to eat more healthily OOH. First respondents were given a prompting list of potential initiatives for comments. This list was compiled to reflect the same initiatives being explored in the FSS public consultation on 'proposals to improve the out of home food environment'. (A copy of the prompting list used in the group discussions is included in the appendices of this report.) Based on input from the respondents, the list of potential initiative areas presented in the list has been divided into three categories- those that respondents broadly supported, those that they did not reject nor support, and those that they rejected:

Potential Initiatives that Were Broadly Supported

The initiatives supported, broadly ordered from those most favoured across the groups to those supported but least enthusiastically, are presented below:

- Make healthier foods more easily available and decrease the cost of healthy food options
 - The most supported initiatives, across all the groups and for most respondents, related to making healthier food more accessible. As has been noted, respondents typically felt that, even if they wanted to eat more healthily when OOH, it was difficult to either find healthy options or justify the cost
 - o To this end, it was felt that businesses should be worked with and encouraged to ensure that they are doing all they can to increase the variety of healthy foods they offer
- More information provided about unhealthy foods and more information provided to flag up healthier foods
 - The next most popular initiatives related to provision of information that would allow consumers to more easily determine what is healthy and what is not
 - On probing, respondents felt that this information could come in various forms- either with calorie values being provided or with information about fat, salt and sugar content (as it was spontaneously recognised is being done well with the traffic light system for prepackaged foods)
- Businesses made to offer smaller or half portion sizes
 - O Beyond these most supported initiatives, respondents also liked the idea that businesses could provide smaller portions, as standard offerings, alongside the larger portion sizes they already offer. That said, it was clear that most respondents were less keen on the idea that businesses should be 'made to' provide smaller portions through legislation or that businesses should be forced to limit the sizes of portions they offer. Generally, the idea that businesses could see the economic sense or be encouraged to provide smaller portions was preferred to legislation that would move our country, in the words of respondents, to being more of a "nanny state"
 - It should be noted that parents were particularly keen to ensure that businesses, as a standard, provide smaller portions of the dishes sold on adult menus, for their children. It was felt that for businesses that market specifically to children, this could be through legislation
- Change recipes by e.g. reducing fats and sugars and by increasing fruit/vegetable/bean/pulses and fibre content
 - Many respondents also stated that they felt businesses should be encouraged, rather than forced through legislation, to reduce their use of unhealthy ingredients
 - o And, encouraged to use more healthy ingredients in their recipes
- Ensure single serve packs of products are always available

- Many, but not all, respondents were also positive about the idea of encouraging businesses to provide single serving packs and in turn ensure that portion sizes are proportionate for consumption by one person 'on the go'. That said, the two issues that many had about this idea were that, again, businesses should not be forced to provide single portions and also that single portions should not be sold at 'extortionate prices'
- Businesses made to reduce portion sizes generally
 - Again, while respondents were happy with the idea that businesses could be encouraged to provide smaller portions, they were not comfortable with the idea that they should be forced to do this through legislation

Potential Initiatives that Were Received with Little Enthusiasm but were Not Rejected

The initiatives that were typically received with little enthusiasm appeared to be those that required "too much work". As noted, the key reason respondents liked eating OOH was that it was easy for them. Any initiative that was felt to require too much hard work on their side was felt to be unlikely to work.

- Provision of general information and tips on how to find healthy foods when out and about
- Information provided on how to take your own healthy foods with you when out and about

Potential Initiatives Rejected by Most Respondents

All the ideas that were rejected were typically felt to be too dictatorial. As noted above, respondents were often very uncomfortable with the idea that their choices when eating OOH would be limited by legislation.

- Redesign menus to exclude very high calorie menu items
 - Beyond this idea feeling too dictatorial, some respondents were also cynical about how this could work or be implemented with smaller business. As such, many rejected this idea as unworkable
- Apply maximum calorie limits on a meal
 - Again, this idea was rejected for being too dictatorial. That said, while some respondents conceded that they would probably not notice if calories became restricted in meals if the flavour was still good, most, expressed concerns and assumed calorie restrictions would have a major impact on taste and flavour
- Increase the cost of unhealthy foods
 - Again, there was strong resistance to this idea on the basis that it was too dictatorial and that it would impact those on lower budgets most directly, again, affecting their ability to choose
- Impose restrictions on the way that businesses provide unhealthy foods through up-sizing offers
 - o It was strongly felt that there should be no restrictions imposed by legislation on meal deals and other upsizing promotions. While it was acknowledged that these promotions are responsible for significant numbers of calories being consumed, it was felt that other initiatives such as calorie information provision should be enough to make consumers question the value of deals. In addition, it was felt that work can and should be done to encourage businesses to consider offering more healthy foods as part of meal-deals and in general across their menus and offerings

Summary Observations Relating to Potential Initiatives to Help Consumers Eat More Healthily When Out of Home

Themes within the supported ideas

Help Enhance
Informed Choice

Do Not Impose or Restrict Choice Work with the
Industry to Encourage
Positive Change in
Foods Offered

Specific Exploration of Attitudes to Provision of Calorie Information

Following the general discussion about potential ideas for changing the OOH eating environment, respondents were asked for their views specifically on provision of calorie information at point of sale. As respondents across the groups had spontaneously stated that they felt calories should be provided by OOH food businesses it is not surprising that attitudes when prompted were very positive. Calorie information was thought to enhance consumers' ability to make informed choices, which was universally felt to be a good idea. This, it was noted, was especially felt to be true after respondents had undertaken the prompting exercises where they were able to see how many calories can be in foods they typically eat OOH.

There were six reasons given across the research groups for feeling calorie information should be provided at point of sale:

- Calorie information is familiar
 - Most respondents were aware that calories information is already being provided by several food chains and that it is broadly understood by all, or that calorie counts are easy enough to explain to people who are not familiar with them
- Calorie information would be informative and help them to understand what they are eating better and to understand what is genuinely healthier and less healthy
- Calorie information facilitates the ability to make personal choice as desired while not being an initiative that restricts choice or is too intrusive
- Calorie information is likely to facilitate healthier choices
 - Based on the exercises in the groups, respondents believed that calorie information at point of sale will be persuasive. That is, many accept that we, at individual levels, are inherently emotionally weak and lack willpower around food OOH. It was felt that this weakness can potentially be overcome by hard facts about calories
 - "It would make me stop and think"
- At a general level, many felt calorie information was necessary in our society
 - At a society wide level, it was acknowledged that we are often our own worst enemies and that this is reflected in the growing numbers of people who are suffering with diabetes, heart problems and obesity. From this, it was felt that provision of calorie information may result in positive society wide changes in attitudes and behaviour regarding eating OOH
- Beyond this, it was felt that the provision of calorie information on menus and shelves will have a
 positive knock-on effect on businesses who, it was hoped, would want to reduce calories offered
 by them. Thus, providing healthier options with smaller portions being offered, and potentially also
 with better cooking techniques and with better ingredients

Beyond these positive reasons for calorie information being provided by OOH food businesses some respondents did express concerns about calories being provided at point of sale. These broadly fell into two categories- personal concerns and practical concerns.

Personal concerns about calorie information being provided related to individuals' beliefs that calorie information would either be of no use, would not be understood or would not provide the most important or relevant information to help people eat more healthily OOH. More specifically:

- Some respondents stated that they don't use calorie information and had doubts that they would
 in the future
 - For these respondents, eating OOH is about enjoyment and treats and as such they felt that calorie information would not be relevant to them in OOH situations. Specifically, the younger segment appeared least interested in the idea of calorie information being provided right now but they acknowledged that it would still make them think about their choices more carefully
- Many respondents were not totally clear about the relative numbers of calories that were acceptable for individuals and as such felt that they would not be able to determine how many calories can and cannot be consumed when OOH
 - When asked what they felt was the recommended number of calories for an average person, respondents stated that they felt an average woman should consume anything from 1200 to 2500 and an average man anything from 1500 to 3000. These wide ranges indicate that many consumers would need guidance to understand the general meaning of calorie information if it is to be provided at point of sale
- Many felt it was important to acknowledge that recommended average calorie requirements were
 not relevant to all and varied depending on age, relative levels of activity, and individuals' 'nature
 builds' (that is the build that many respondents perceived they were genetically predisposed to be)
 - While this was accepted as being true by respondents it was also felt, on this basis, to be important to ensure that people understand what calorie information means if published by OOH food suppliers. It was clear that if this does not happen then many consumers in Scotland will simply deflect calorie information as being irrelevant to them because they are 'too big', 'too active', 'not an average age', etc.
- Finally, in relation to concerns about calorie information at a personal level, many felt it was important to acknowledge that calorie information does not tell the whole story about the healthiness of foods
 - For many, information about fat, sugar and salt were felt to be as important as calorie information

Practical concerns about calorie information being provided related to respondents' doubts that a system could work that would be credible

- Some respondents had doubts that calorie information provided would always be accurate.
 Respondents felt that misleading mistakes could easily be made or that figures could be easily manipulated
- Beyond this, some respondents questioned how calorie information provision would be policed to
 ensure that it is accurate and fair. This was a particular concern in relation to businesses where
 menus are changed regularly
- A third practical concern for some respondents related to how smaller businesses would cope with the administrative pressures of providing calorie information. Some felt that undue pressure would be put on small business who are required to keep up with legislation
- In addition, some respondents wondered whether some businesses (particularly those who rely on the sale of unhealthy foods) might struggle if they are made to be transparent about the high

numbers of calories in their offerings. A few respondents even joked that some businesses might go out of business if the calorie content reality is made more obvious

It should be noted that none of these concerns were felt to be insurmountable obstacles to providing calorie information or big enough arguments against providing calorie information to mean it should not happen. That said, many respondents felt, as a result of these concerns, that several measures needed to be taken.

First, it was felt to be vital to educate the public about the way calories work and how calorie information can help us all. With information being needed about:

- Recommended daily amounts
- How these can vary by different criteria- age, size of person
- How these can vary depending on the amount of exercise or manual work done
- How calorie information can help guide us even when other nutrient information is not provided

Second, it was felt that there needs to be a clear and transparent system introduced to ensure that businesses can give required calorie information and to significantly reduce or eliminate the possibility of mistakes or manipulation. Only through this, it was felt, would a calorie information provision system be credible.

To help clarify the way that the general public would like to see calorie information provided by OOH food businesses, a series of questions was asked. These questions and the consensuses of views are outlined below:

Should calorie information provision be mandatory?

Yes, practically all respondents were comfortable with the idea that calorie information provision should be mandatory. This was felt to be so because it is both the right thing to do and because it is the natural direction of travel in a world that is fighting with obesity.

'It is the way the world is going anyway'

Should any business type or food type be exempt, or should there be a roll out via priority businesses?

No, it was felt that all businesses should be required to provide calorie information. This, it was felt, would be the only way to make the system fair and of universal value. Beyond this, some respondents expressed a belief that, to be of most value, calorie information should also be required to be provided in relation to drinks. With this being especially so for soft drinks, and potentially also alcoholic drinks, where it was acknowledged that a lot of calories are consumed unknowingly

Where should businesses be required to present calorie information?

To allow calorie information to be accessible it was generally accepted that the information should be provided- on menus, on shelves and/ or on line. That is, at the places that the purchase choices are being made, alongside price information.

A small minority of respondents felt that calorie information could be required, by law, only if requested and or on line, but these respondents were typically those who were the least interested in adopting a healthier lifestyle.

Finally, when asked, it was accepted that advertising for food being sold for OOH consumption and takeaways should be required to contain calorie information.

Should additional information be provided beyond that relating to calories?

As noted above, when respondents were asked for their views on calorie information being provided by OOH food providers, some across all segments felt it was important to acknowledge that calorie information provided only a limited picture of the 'healthiness' of any food. While some respondents acknowledged that calorie variations are linked directly to portion size, ingredients and cooking methodology, and as such provide a good 'catch all indicators of impact on health', there was also discussion across the groups about the idea of good calories and bad calories.

Other factors including salt, sugar and fat content were regarded as important to know in general and specifically for those with relevant health issues such as diabetes. As noted, the traffic light system was acknowledged by some respondents, across all segments in the sample, as a good system that could be used alongside calorie information in all OOH eating situations.

All that said, on probing, most respondents were comfortable with the idea that it was important to find a balance when giving consumers information that allows informed choice, but without making menus and shelves too cluttered and complicated. It was felt that too much complexity of information provision will lead to many consumers shutting off and ignoring all the information. This was especially an issue as it was accepted that vegetarian, vegan and dietary requirement and allergy flags were still important for many. As such, a good balance was felt by many respondents to involve mandatory, at POS, provision of calorie information, but with the food industry being encouraged to provide more details on salt, sugar and fat content for access on-line or at least on request.

What else can be done or should be done to support the provision of calorie Information?

As noted, in general, respondents felt they would want help to make informed decisions about what they eat, and they are happy to have legislation dictate that calorie information should be provided. That said, they were not happy with businesses being overly dictated to by government in terms of what they sell and how much they charge. Instead most respondents felt it was far better to work with industry and to encourage businesses to offer more healthy options, to reduce the amount of sugar, salt and fat in foods they offer and to provide information beyond calorie information about sugar, salt and fat content

Beyond this, respondents across some of the groups were asked if they thought the idea of industry awards would be a good way to encourage and support businesses that are committed to helping reduce the impact of OOH eating on the health of people in Scotland. Generally, an award programme was felt to have real potential to incentivise businesses to work towards becoming 'healthy OOH food suppliers'. On probing, it was felt that an award programme should:

- Be voluntary not mandatory
- Require food business to meet a number of healthier food award criteria e.g. offer choices and meals with healthy, nutritious ingredients, healthy cooking methodology, featuring calories and sugar, fat, salt content, maximum calorie and low-calorie options always on the menu for consumer to choose from
- Have clear consumer facing signifiers (e.g. an award brand) to show that a business is a memberand to indicate that the shop/ restaurant/ takeaway has met the basic criteria to join
- Have a star system or other ranking icon symbolising 'healthiest' establishment status, which businesses can aspire to qualify for

Initiatives to Support Parents and to Encourage Children to Eat More Healthily OOH

As a final topic within the group discussions, respondents, especially those with children, were asked what they felt should and could be done to help their children eat more healthily OOH. Discussions focused on specific initiatives felt to be best to support children who are a relevant age for children's menus (typically regarded as about 8 to 10 years or younger); and older (typically teen) children who have started to be more independent when eating OOH.

As a general theme parents recognized that, to a large degree, they have lost control of what their children eat. This was the case for young children whose parents often feel pressured to let them eat unhealthily when OOH. It was also the case for older children, especially when they are in their teens, who many parents feel it is almost impossible to encourage or influence to eat healthily when they are OOH, especially when they are eating without them (e.g. while on lunch breaks from school).

Initiatives for younger children

Parents do feel that, at this time, menus specifically for young children are typically unhealthy, with too much reliance on items such as fish fingers, burgers, nuggets, dippers, chips, ice cream or fattening desserts (often in very large portions) and on sugary drinks. From this, it was hoped that things would change. That noted, there was acknowledgement amongst parents that there is some positive movement within the OOH food industry to provide more healthy options for their children. Examples given included:

- In Frankie and Benny's, where the order system for children's foods requires a mandatory vegetable to be chosen
- Or in McDonalds where Happy Meals can be ordered with fruit and or vegetables

That said, it was felt that more should be done by the industry to ensure that more healthy options are available for children and fewer unhealthy options are available to temp children. As such, there was strong support for a range of initiatives (as presented to respondents on a prompting list) that could help young children eat more healthily OOH. In addition, there was reasonably strong support for the idea that many of these ideas should be mandatory.

The initiatives presented were divided into three categories by parents in the groups. The most positively received were those that allowed more healthy options to be available to their children within the current format of children's menus, followed by providing greater choice by adapting adult menu choices for children, and then to limit availability of unhealthy options:

- More healthy options available in children's menus:
 - In simple terms, respondents felt there should be more use of vegetables and fruit for children's menus. In addition, it was felt that water and milk should be offered as standard options
- Greater choice of healthier options for children- through provision of healthy adult dishes in sizes relevant to children:
 - Very few parents in the groups thought that children's menus should be removed from OOH eating establishments. They were felt to still be useful for parents who are looking for places to feed their children OOH. In addition, it was felt, if done right, menus dedicated to children still have an important role- to attract families and to offer value. Instead of removing children's menus it was agreed that healthier options available to adults should be made available to children in relevant sizes and adapted to be of more obvious appeal for young children. This, it was felt, could be done via children's menus and or as options presented in standard menus
- Limit availability of unhealthy options- including putting restrictions on unhealthy foods being sold to children through promotional offers

- o In contrast to beliefs held about the limited role law changes should have to restrict choices to them as adults, respondents felt that there could be controls imposed to limit the promotion or selling of unhealthy foods directly to children. These controls could relate to:
 - The restricted selling of key food types- less breaded or fried products, fewer drinks with added sugar, a reduction of high sugar dessert
 - These controls could also include restrictions on portion size of the unhealthiest of food options- in general and specifically within promotional offers
 - Beyond these controls being potentially introduced for businesses that specifically
 market to children, it was felt to be important to introduce controls on businesses
 around schools that are set up to sell primarily unhealthy foods to children at lunch
 times

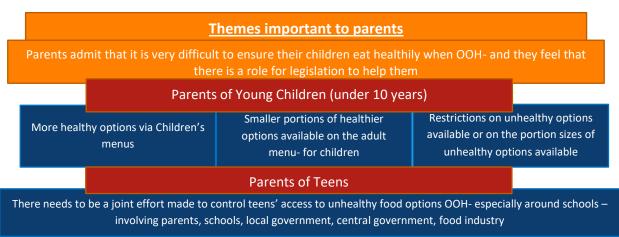
Initiatives for teen children

While exploration of initiatives aimed at helping and encouraging teen children eat more healthily OOH was not a stated aim of the research it was clearly important to many parents for no other reason than they recognise controlling teenagers, especially at lunchtimes around schools, and preventing them from eating very unhealthily, is increasingly difficult.

Some respondents stated that they try to stay in control of their children's diets for as long as possible with packed lunches but others conceded that they have totally given up. These parents admitted that they, more often than not, 'just hand over the lunch money' and all responsibility to their children despite knowing that they are likely to eat very poorly at lunch times.

Specifically, businesses around schools are often seen as cynically tailoring unhealthy, cheap foods in adult portions plus providing easy access to fizzy, sugary drinks and crisps in the knowledge that they have a profitable market in school age teens. That said, parents admit that controlling children at lunchtime is difficult as once they become teenagers, it is 'not cool' to stay at school and eat in the canteen. In addition, it is acknowledged that schools themselves have largely stopped taking responsibility for pupils during breaks.

As a result of these issues, most parents agreed that teen children need more protection, especially during lunch breaks. While the issue of developing initiatives to help teens eat less unhealthily OOH was not explored in depth within the research it was clearly an important issue for parents. Many of whom felt it would be ideal if initiatives could be developed to limit access of unhealthy foods for teens through cooperation between schools, local authorities and government and the food industry.



<u>Summary and Conclusions- Key Issues to Consider When Planning Policy Initiatives Designed to Help</u> Consumers to Eat More Healthily OOH

Adults

- Any initiatives or policy plans to help encourage more healthy OOH eating will need to be undertaken on the basis that OOH eating is regarded as a norm in our society
 - With this norm being based on the fact that eating OOH makes lives easier and can be done more often than ever before (due to ubiquitous offerings and low costs)
 - That said, despite being regarded as normal behaviour in our society, eating out is still justified as a treat
- Consumers recognise that they typically eat less healthily when they eat OOH. This is known to be because of the influence of cooking methods, ingredients used and portion sizes
- Most consumers would like to eat more healthily when OOH
- The research showed that consumers generally support the idea of calorie information for food being bought OOH being provided at the POS - and that this should be mandatory
 - This initiative, it was felt, would provide a positive platform for informed choice while not crossing the line to restricting personal choice
 - o It was felt that a calorie information provision law would have a positive effect on both consumers and businesses who would want to reduce typical calories per offering
 - Consumers feel that the initiative should be supported by an education programme to help them to understand and get the most value from the information
 - And the mandatory programme of calorie provision should be well policed to retain credibility
- Beyond calorie information provision for adults, it was felt that more can and should be done to encourage the food industry in Scotland to limit 'the risks' of eating OOH. It was felt that this should be done through three key initiatives:
 - Industry should provide more detailed information about the healthiness of foods sold beyond calories. That would be:
 - Through provision of more information on salt, sugar and fat content
 - With industry being encouraged to provide this information, potentially in a traffic light format (as used in supermarkets), through a voluntary scheme
 - o Industry should be encouraged to reduce the typical levels of fat, salt and sugar in the foods they sell OOH- again, it was felt any programme that is set up to encourage reduction of unhealthy ingredients should be voluntary
 - And industry should be encouraged or incentivised to reduce the cost of healthy foods being sold OOH
- The research showed that consumers would support the idea of an award system that would encourage OOH eating businesses to be more conscious of the health needs of people in Scotland and to help consumers choose

Children

- There is a greater appetite for a wider range of mandatory initiatives to help parents
- While there were perceptions that the industry is moving in the right direction it is still felt to be too hard to feed children healthy food when OOH
- Key initiatives that were supported by parents would be based around:
 - Development of much healthier children's menus and offerings for children
 - These developments should focus on ensuring more fruits and vegetables and non-sugary drinks (milk and water) are provided for children eating OOH

- Ensure smaller, children sized and children relevant portions of healthier adult menu options are widely available as standard when eating OOH
 - With these being offered with no price penalties
- It was felt there should be restricted access to unhealthy foods in general and specifically within promotions and meal-deals which encourage unhealthy behaviours from a very young age (e.g. free ice cream or as much as you can eat offers)
- In general, while the research was not able to develop any specific initiative recommendations, it was felt that more work should be undertaken to ensure school age teens are eating more healthily during lunch breaks

6 Appendices

- **6.1** Recruitment Questionnaire
- **6.2 Homework Template**
- 6.3 Topic Guide and Showcards
- 6.4 Full breakdown of Audience Segment Profiles

6.1 Recruitment Questionnaire

Classification

Age		Occupation of chief wage earner			
16 – 19 years	1	Position			
20 – 25 years	2				
26 - 35 years	3				
36 – 40 years	4	Industry			
41- 50 years	5				
51 – 65 years	6				
Please write in exact age					
		Social Class			
		AB	CLOSE		
Gender		Cl	1		
Male	1	C2	2		
Female	2	D	3		
		E	4		
		ı			
Interviewer's Declaration					
I confirm that I have carried out this and briefing material from Jump Res		w in full, in accordance with the instrutd.	ctions		
Interviewer's Signature:					
Print Name:		_ Date:			

Respondent details Name: Address: Phone: Postcode: _____ Email address: Introduction: Good morning/afternoon I am...... from Jump Research, an independent research company, who are conducting focus group discussions to about how people eat, and the types of food they eat, and why, when they are out and about (e.g. eating out in restaurants, fast-food, snacks, lunches, coffee-shops). I was wondering if you would like to take part. At this moment, I just need to ask a few profiling questions to find out about you, as we want to invite a broad spectrum of people who live in the area. The discussions are happening on _____ and would last 90 minutes. As a thank you for your time you would receive £40. You would also receive a further £10 for the completion of a small homework exercise to be done the week prior to the discussion group. All answers you give are confidential and will not be used for any other purpose than this research. CODE SQ1

Do you or does any of your close family or friends work in any of the following industries?

	CODE
Advertising	1 T&C
Marketing	2 T&C
Public Relations	3 T&C
Market Research	4 T&C
Nutrition	5 T&C
None of the above	6 SQ2

SQ2 How frequently do you do each of the following?

	Frequently	Occasionally	Rarely	Never
Eat in a restaurant	1	2	3	4
Buy lunch from a supermarket / convenient store / Boots / Café/ Bakery etc	1	2	3	4
Go to a fast food restaurant	1	2	3	4
Go to a coffee shop (Starbucks / Costa / Café Nero etc)	1	2	3	4
Buy crisps / sweets / chocolate bar / "a sweet treat" to eat out with your house (e.g. at lunch / on the go / afternoon snack)	1	2	3	4
Buy takeaway food to eat at home	1	2	3	4

ALL RESPONDENTS MUST CODE FREQUENTLY FOR <u>AT LEAST</u> 2 OF THE ABOVE, and please gain a mix of things being done frequently in your groups.

SQ3 Do you have any children living at home?

	CODE	ROUTE
Under 5 years	1	SQ4
5 – 12 years	2	SQ4
13 – 15 years	3	SQ4
15+ years	4	SQ4
No children	5	SQ4
		1

CHECK QUOTA SHEET (GROUPS 1 /2 / 7 / 8)

SQ4 How would you describe the area you live in?

	CODE	ROUTE
Urban (town / city)	1	Q1
Suburban (on fringe of town / city)	2	Q1
Semi-rural (village)	3	Q1
Rural (Hamlet / isolated dwelling)	4	Q1

CHECK QUOTA SHEET - Gain a mix

Q1 Which, if any, of the following applies to you?

	CODE	ROUTE
Completely vegetarian	1	Q2
Partly vegetarian	2	Q2
Vegan	3	Q2
Allergic to certain foods or ingredients	4	Q2
On a diet trying to lose weight	5	Q2
On a diet trying to gain weight	6	Q2
On a diet due to diabetes	7	Q2
Reducing the amount of fat in my diet	8	Q2
Reducing the amount of sugar in my diet	9	Q2
Reducing the amount of starchy foods in my diet	10	Q2
Increasing the amount of protein in my diet	11	Q2
Increasing the amount of starchy foods in my diet	12	Q2
Avoid certain food for religious or cultural reasons	13	Q2
Avoid certain food for medical reasons other than a food allergy e.g. diabetes	14	Q2
Avoid certain foods for other reasons (e.g. foods that don't seem to agree with me)	15	Q2
None of the above	16	Q2

Recruiter note: this question is for information only. No quotas set.

Q2 How well served is the area you live each of the following?

	Very well	Quite well	Not very well	Not at all well
Fast food restaurant	1	2	3	4
Places to buy simple lunches like sandwiches	1	2	3	4
Bakeries	1	2	3	4
Coffee shop	1	2	3	4
Restaurants	1	2	3	4

Recruiter note: this question is for information only. No quotas set.

Q4
Which of the following statements do you agree or disagree with?

		Agree	Disagree
Α	I enjoy going out and meeting people	1	1
В	I would describe myself as outgoing and enjoy chatting to people even if I don't know them well I am not afraid to express my opinions in front of a group of	2	2
	people	3	3
D	I am a bit shy and get embarrassed easily	4	4

ALL RESPONDENTS MUST AGREE WITH A,B OR C AND DISAGREE WITH D

Q5

Have you ever attended a group discussion or taken

part in a market research study recently?

	CODE	ROUTE
Yes	1	Q6
No	2	Recruit

CODE

ROUTE

IF CODED 2 ABOVE CHECK QUOTA AND RECRUIT IF ELIGIBLE

Q6

How long ago did you attend this group discussion?

In last 6 months	1	Q7
In last 6-12 months	2	Q7
More than 12 months ago	3	Recruit

Q7

What was the subject matter?

IF SUBJECT SIMILAR TO EATING HABITS, CLOSE

CHECK AND CLASSIFY

6.2 Homework Template

Research in Relation to EATING OUT OF HOME Respondent Homework Exercise

Thank you so much for agreeing to take part in our research. As you know the research will be used to explore how people eat, and the types of food they eat, and why, when they are out and about.

To help prepare you for the discussion we will have when we meet it would be great if you can complete this homework task.

All you need to do is fill in one of the grids below for <u>every time</u> you eat food out of home over the next 7 days....(each grid will only take a minute or two)

....whether it's having something for breakfast, buying a sandwich for lunch, grabbing a snack, having a coffee and cake, or having a meal out, it all counts....as does ordering a takeaway to eat at home

We are interested in your experiences of buying food from any of the following types of business....

- Cafes, bakeries, all types of restaurants, takeaways, pubs/bars, vending machines, workplace canteens, hotels, leisure and entertainment venues
- Supermarkets and convenience stores who provide "food on the go"
- Places where you might purchase food when commuting or travelling
- Food delivery services, including online

Please note, as mentioned, takeaways that you may order to eat at home count....but eating food out of home that you prepared at home (e.g. for a packed lunch) does not count.

The 7 day period can be any consecutive period of 7 days in advance of the research meeting.

Please complete this form and BRING IT ALONG ON THE DAY OF THE MEETING. In return for completing this homework task, you will be given an extra £10 as a thank you.

As you will see, there are 14 grids....if you fill all the grids before the end of the 7 days that is fine-you do not need to do any more grids....thank you.

Day- (circle one):	Time:	What did you eat?	Where did you buy the food?-
Momday			
Tuesday			
Wednesday	Cost of food and drinks you bought- £		
Thursday			
Friday		What did you drink?	
Saturday			
Sunday			
Why did you buy food there?-	Occasion- tick one - Breakfast - Morning Snack - Lunch - Afternoon Snack - Evening meal/dinner - Late Snack	Who were you with? - Alone - With friends or adult family members - With children under 12 years - With children 13-16 years - With work colleagues - Other	Did you take advantage of any promotions when you made your purchase? IF YES PLEASE GIVE DETAILS e.g.: - Upsizing deals - Meal deals - Other
How healthy would you say the food you ate on this occasion was? (give a score of 1 to 101 is 'totally unhealthy' and 10 is 'very healthy'):	Were there healthier options available to you in the same place?- tick one - Yes definitely - Yes, I think so - Not sure - No, I don't think so - No, definitely not	Were you aware of any calorie labelling when you bought the food?	Was the number of calories in the food important to you when you made your choice?
IF YOU WERE RESPONSIBLE FOR FEEDING CHILDREN AT THE TIMEPLEASE FILL IN THE QUESTIONS IN THESE GREY BOXES	Were there options available specifically for children where you ate (e.g. children's menus or smaller portion sizes from adult menu)? - Yes - No	Were you happy with the choices available to the children you were feeding? - Yes - No	How healthy would you say the food was that your children ate on this occasion? (give a score of 1 to 101 is 'totally unhealthy' and 10 is 'very healthy'):

6.3 Topic Guide and Showcards

FSS Research in Relation to EATING OUT OF HOME Topic Guide

Introductions

- Moderator- name and neutrality
- Explanation of group discussions process
- MRS code of conduct and confidentiality- TAPE and VIEWING FACILITY as relevant
- Topic of research- eating when you are out and about....
 - As you know the research will be used to explore how people eat, and the types of food they
 eat, and why, when they are out and about....
 - This can be....having something for breakfast, buying a sandwich for lunch, grabbing a snack, having a coffee and cake, or having a meal out, it all counts....as does ordering a takeaway to eat at home
 - We are interested in your experiences of buying food from any of the very wide range of places you can go to when out and about....
 - Cafes, bakeries, all types of restaurants, takeaways, pubs/bars, vending machines, workplace canteens, hotels, leisure and entertainment venues
 - Supermarkets and convenience stores who provide "food on the go"
 - Places where you might purchase food when commuting or travelling
 - Food delivery services, including online
 - o So.... take aways that you may order to eat at home count....but eating food out of home that you prepared at home (e.g. for a packed lunch) does not count
 - NOTE (AS RELEVANT)- IF YOU ARE A PARENT OR HAVE A RESPONSIBILITY TO FEED CHILDREN INCLUDING WHEN OUT OF HOME PLEASE GIVE, IN RELATION TO ALL THE QUESTIONS, VIEWS ON YOUR OWN PERSONAL BEHAVIOUR AND ON OCCASIONS YOU ARE WITH YOUR CHILDREN
 - So you know....this project is running as part of a PUBLIC CONSULTATION being undertaken just now....(are you aware of this going on?).....it is about the same issues we are going to discuss today....WITH THE RESULTS BEING FED BACK TO POLICY MAKERS....so thank you for your help
- Key thing to be aware of- need you to be honest please- about your views and your behaviour- SAFE SPACE
- You:
 - o Name, family/ who share your home with?

General chat- the place eating out plays in your lives- QUICK SECTION ONLY

- How much do you do it?
 - Did your homework throw up any surprises regarding how often you eat out of the house- or was it as expected?
- Has the amount you eat out of home changed in recent years?
 - o Why?
- Have your attitudes to eating out of home changed in recent years?
 - o Why?
- Have the occasions you eat out of home changed in recent years?
 - o How....who with, for what purpose?
- What, for you, are the plus sides to eating out of home?

- What are the negatives of eating out of home?
 - MODERATOR- Listen out for reference to- cost, health, variety, experience, social, convenience, necessity, etc.
- Do you think you get good value for money when you eat out of home?
 - o How do you judge that?
 - Taste, healthiness, convenience, satisfaction, ability to fill you up, treat factor, portion size
 - Probe- how much of a trigger to buying OOH comes from the price/ cost?

Attitudes to eating healthily out of home-QUICK SECTION ONLY

- Do you eat more or less healthily in home or out of home?
 - Quick check- what is <u>healthy eating or are healthier eating options</u>....for you....specifically in relation to eating out of home?....that is, how could you spot them or choose them?
 - MODERATOR- Listen out for- calorie intake or count, portion size, content (fat, sugar, salt), other
 - o Probe by eating occasions- snacks, breakfast, lunch, dinner
 - What did your homework tell you about how healthily you eat out of home?
- HONESTLY- do you want to eat more healthily out of home?
 - o Why?
 - Where are the key areas of how you eat out of home that you think you could eat more healthily? Probe in relation to:
 - Occasions- who you are with.... and the purpose of buying the food from functional (e.g. quick lunch or snack) to social (coffees or meals with people)
 - Location
 - When you are out and about in a place you are familiar
 - Travelling
 - In a place you are not so familiar- e.g. visiting another town or city in Scotland or elsewhere in the UK

Barriers and motivations to eating more healthily out of home-QUICK SECTION ONLY

- Prompted views **MOVING FORWARD....**
 - TWO QUESTIONS AT ONCE....ask both to gauge spontaneous reactions....then quickly show SHOWCARD 1....NOTE- KEEP FOCUS OF DISCUSSION ON OUT OF HOME EATING
 - YOUR TASK NOW IS TO THINK BIG AND THINK POSITIVELY....WITH REGARDS TO MOVING OUR SOCIETY FORWARD....IN TWO WAY....
 - What might help you (or people like you) stop eating unhealthily or as unhealthily as we are....when out and about (in relation to snacks, meals, take aways....in any location)?
 - What might encourage you/ people like you to eat more healthily (in relation to snacks, meals, take aways....in any location)?
 - o SHOWCARD 1
 - What might help you (or people like you) stop eating unhealthily or as unhealthily as we are....when out and about (in relation to snacks, meals, take aways....in any location)?
 - Increase cost of unhealthy foods
 - Reduce portion sizes- make smaller portion sizes more available (NOTE FOR MODERATOR FOR PROMPT IF RELEVANT- and through this reduce the way society has moved to bigger and bigger portions being offered to try to give the sense that better value is being offered)

- Businesses that sell us food should be required to make small and half portions widely available- to give better balance of offerings
- Ensuring single serve packs of products such as soft drinks, confectionery
 and savoury snacks are available as an alternative to large packs containing
 multiple servings (e.g. Standard size packets of crisps rather than 'grab
 bags')
- More information about the foods we eat out of home- e.g. about calories, salt, sugar
 or fat content
- Less unhealthy foods easily available- Snacks, Meals (on the go, sit down), Treats
 - Changing recipes e.g. By reducing fats and sugars and increasing fruit/vegetable/bean/pulses and fibre content
 - Applying maximum calorie limits
 - Redesigning menus to exclude very high calorie menu items
- Other....?
- What might encourage you/ people like you to eat more healthily (in relation to snacks, meals, take aways....in any location)?
 - More information about the healthy foods we can buy
 - More healthy foods easily available
 - Snacks
 - Meals- on the go, sit down
 - Treats
 - Pricing- to encourage healthy eating out of home
 - Tips and ideas on how to take your own healthy foods with you when out and about
 - Other....?
- PROBE- just to check....do you want to eat healthier when out and about....or do you want to eat less of the unhealthy stuff....or neither?

Detailed Exploration of Key Issues

- Probe on thoughts and perceptions re Calories intake 00H....discuss:
 - o Do you think about Calories much?
 - How serious or important an issue is calorie intake for you?
 - How many calories do you eat.... and what is the average person recommended to eat? (Probe- 2000/ 2500)
 - Are you knowledgeable about calorie content of foods you eat?
 - Do you think about or pay attention carolies more for particular types of foods at particular times....and ignore others?
 - IF TIME- PLAY WITH THE DIABETES UK TEST....guess each meal....
 - SEE PICTURES ONE AND THEN TWO
 - O Do you consume, relatively, more or fewer calories in or out of home....e.g. for the same types of food e.g. muffin or a carry out curry v a supermarket curry?
 - Probe on attitudes in relation to recent research....
 - We eat out around 3 or 4 times a week- on average
 - It has been estimated on average that up to 25% of our calories may come from eating out
 - Many Out of Home options- due to the sizes of the portions can contain far more calories than those bought in supermarkets
 - E.g. Cakes, biscuits, pastries bought out of home have been shown to contain twice as many calories as those from supermarkets (Source-PHE Research)

- A quarter of main meals sold for eating out of home (e.g. in restaurants, cafes etc) contain more than 1000 calories- which is 50% of the recommended average daily requirement for a woman (Source- OAS Research)
- SHOWCARD 2- calorie count research....discuss....

Approximate calorie ranges of comm	on menu items (source- online research)
Food Type	Approximate calorie ranges
Cooked Breakfasts	500-1570
Fish and Chips	650-1900
Burger and Chips	470-1900
Pizzas	380-1600
Starters and Small Plates	140-1730
Sandwiches and wraps	160-700
Paninis and Baguettes	220-1000
Chips/Fries	220-1440
Sides (excl. regular chips/fries)	70-910
Desserts	150-1420
Cinema popcorn	210-1180
Cakes and pastries	60-760
Specialty Coffee (excl. black coffee)	50-420
Milkshakes	200-1030
Food on the go meal deals	200-1500

- Probe- what does this card say to you....anything surprising?
 - What are your thoughts regarding relative number of calories for certain types of food in comparison to our daily recommended intake of calories? (2000/2500)
- o From this card- what factors, do you think, influence whether the item bought and eaten is nearer the bottom or top end of the scale?
 - Probe- for you which are the more important factors- portion size, ingredients, cooking technique
- As a general question....what, if any, rights should we have regarding food we eat when eating out?
 - Do you think we should have the right to be able to get healthier food when we are eating out of home?
 - Right to have information that allows us to choose?
 - Right to have options offered that allow us to have foods at the lower end of these scales?
 - Other....?
 -Or should this not be about our rights?
- Should there be new laws to force businesses to make it easier for us to reduce our calorie intake when we are eating out of our homes?

Information provided for consumers

- QUICK INTRO QUESTION- Specifically....is there any information you would like to see provided for consumers by places you can buy food for eating out of home?....what would that be?
- Calorie information presentation
 - Just to clarify- do you think it is a good idea for places you buy food to show calories
 - on menus, labels on shelves, online menus
 - online or in printed materials- that are provided by the business
 - Probe- why do you think that?
 - Probe for objections
 - Arguments for
 - What would you say if I said that there is evidence to suggest that, when calories are shown, consumers naturally consumer fewer calories and business try harder to reduce the calorie supply?

- Do you use calorie information now, when it is available?
 - When? Where?.... e.g. in shops or in cafes/restaurants, or online
- Which types of places where you buy food should have calories presented more clearly?
- Do you think there should be laws that insist that companies show the calories of foods they sell?
 - o Why?/ Why not?
 - Should any business you buy food for out of home not have to provide Calorie information? Why?
- Beyond calories....What other information do you think should or could be provided by businesses that sell us food out of our homes?....if any? (DON'T PROBE- but listen out for references to carbohydrates, fat content, traffic light system)

Promotions and Marketing for OOH food

- Can you tell me whether you are conscious of any type of promotions or selling tactics that maybe encourage you to eat more unhealthy than you intended?
 - Gather spontaneous thoughts
 - Probe for thoughts on:
 - Upselling tactics
 - Go large meals
 - Big size snacks
 - Meal deals that encourage us to eat more
- What do you think of these types of promotions?....Are you happy with these?
- Do you have any ideas for promotions that might encourage people to eat more healthily?
 -Should the industry be encouraged to introduce these sorts of promotions on healthy foods?
 - Should the industry be required to limit the promotions on less healthy foods they employ? HOW?
 - Is there any type of promotion that you think should be controlled?

- AS RELEVANT FOR PARENTS GROUPS- Children Eating Out of Home

- O What do you think about children's menus?
 - Pros and cons? PROBE....e.g. Including value for money, children's health and the culture of children's food
- Do specific initiatives need to be employed in Scotland to help your kids eat more healthily when they are out and about....either with you or on their own?
 - Why yes?
 - Why no?
- o Probe- where is the priority? Probe....
 - Types of food businesses?- fast food, supermarkets/ mini-marts, bakers, newsagents, etc?
 - Locations- near schools, near leisure centres, etc?
- o What, specifically, do you think can be done to help our children eat healthily when OOH?
 - SHOWCARD 3
 - Less reliance on menus specifically for children
 - Provision of children's portions from adult menu items
 - Increased use of vegetables and fruit in dishes, sides and desserts
 - Reduced reliance on breaded/fried products
 - Reduced reliance on chips
 - Reduction of drinks with added sugar

- Plain water and milk offered as standard options
- Reduction of high sugar dessert options
- Reduction of confectionery and crisps
- Anything else?
- What specific initiative do you think could be undertaken to make it easier for you to give healthy food to your kids when out and about....and/or make it less easy for them to get unhealthy foods?
 - Again, should there be laws introduced to help this process?

Summary

- What one idea have you heard today that you think should be taken forward by the people at Food Standards Scotland and across the Government?
 - What one initiative do you think would have a real impact on the amounts of unhealthy foods that YOU eat out of home?....and your kids?

Thank and Close

SHOWCARD 1

- What might help you (or people like you) stop eating unhealthily or as unhealthily as we are....when out and about (in relation to snacks, meals, take aways....in any location)?
 - Increase cost of unhealthy foods
 - Reduce portion sizes- make smaller portion sizes more available
 - Businesses that sell us food should be required to make small and half portions widely available- to give better balance of offerings
 - Ensuring single serve packs of products such as soft drinks, confectionery and savoury snacks are available as an alternative to large packs containing multiple servings (e.g. Standard size packets of crisps rather than 'grab bags')
 - More information about the foods we eat out of home- e.g. about calories, salt, sugar or fat content
 - Less unhealthy foods easily available- Snacks, Meals (on the go, sit down), Treats
 - Changing recipes e.g. By reducing fats and sugars and increasing fruit/vegetable/bean/pulses and fibre content
 - Applying maximum calorie limits
 - Redesigning menus to exclude very high calorie menu items
 - Other....?
- What might encourage you/ people like you to eat more healthily (in relation to snacks, meals, take aways....in any location)?
 - More information about the healthy foods we can buy
 - More healthy foods easily available
 - Snacks
 - Meals- on the go, sit down
 - Treats
 - Pricing- to encourage healthy eating out of home
 - Tips and ideas on how to take your own healthy foods with you when out and about
 - Other....?



Pizza Express





Wagamama

Yasai Katsu Curry, Contains sweet potato, aubergine and butternut squash in a curry sauce (vegan).



Zizzi

Lasagne. Contains mince, onions, pasta and cheese.



Large popcorn chicken, regular fries, coleslaw and regular soft drink.



Coffee Republic

Strawberry Yogurt Granola -Contains low fat yogurt, granola and fruit compote.



SHOWCARD 2

Approximate calorie ranges of common menu items			
Food Type	Approximate calorie ranges		
Cooked Breakfasts	500-1570		
Fish and Chips	650-1900		
Burger and Chips	470-1900		
Pizzas	380-1600		
Starters and Small Plates	140-1730		
Sandwiches and wraps	160-700		
Paninis and Baguettes	220-1000		
Chips/Fries	220-1440		
Sides (excl. regular chips/fries)	70-910		
Desserts	150-1420		
Cinema popcorn	210-1180		
Cakes and pastries	60-760		
Specialty Coffee (excl. black coffee)	50-420		
Milkshakes	200-1030		
Food on the go meal deals	200-1500		

SHOWCARD 3

- Less reliance on menus specifically for children
- Provision of children's portions from adult menu items
- Increased use of vegetables and fruit in dishes, sides and desserts
- Reduced reliance on breaded/fried products
- Reduced reliance on chips
- Reduction of drinks with added sugar
- Plain water and milk offered as standard options
- Reduction of high sugar dessert options
- Reduction of confectionery and crisps
- Anything else?

6.4 Full breakdown of Audience Segment Profiles

Young Newly Independents- 17-30 years

- Eating OOH is the new normal, everyday in many instances
- Generally rare for this segment to consciously think about eating more healthily
- They feel invincible, particularly young men
- They are busy working, studying, out doing various activities or socialising food is a long way down their agenda of things to worry about and they grab what they want, on the go or as a takeaway at home
- If they still live with their parents, not eating their parent's food is a conscious sign of independence too
- Cooking any meal is essentially a waste of time (which they feel they don't have)
- Many would feel seriously denied if they couldn't eat OOH most of the time
- Cooking from scratch is a bit scary, particularly to young men no skill, little inclination and no time
- Quite resistant to changing their behaviours....happy as they are

Younger parents, c20 - 35 years, kids under 8 years old

- Love eating OOH because it's quick, convenient, sociable and often cheaper than cooking from scratch
- Eating OOH considered a 'treat' but behaviours reflect that it is more of a way of life- eating OOH is to a large degree about escaping responsibilities of life- 'If I'm out, I'm just going to enjoy myself'
- The perceived 'treat' is more for taking the children out at the weekend for a full meal
- Eating OOH with small children can be very stressful so they tend to select OOH venues for kids
- A lot of on/off 'dieting' amongst women in this segment but life often gets in the way
- Health issues are still a distant concern so they find it hard to resist instant gratification and justify this with a range of emotional drivers
- Some demonstrate a real lack of knowledge and confusion around nutrition and health
- Whilst they do try to encourage their kids to eat more healthily, they themselves often don't know how to make healthier choices and take the path of least resistance - for themselves and for their kids
- And....once kids get a taste for unhealthier choices, it is hard to wean them off it

Older parents, c30-50, kids beyond the children's menu years

- This segment also likely to perceive eating OOH as more of a 'treat' rather than the norm but behaviours again suggest far from unusual
 - Majority eating OOH at least 3-4 + x a week
- Motivations to eat OOH very similar to younger parents easy, less hassle than cooking/prepreparing food, fun, sociable and convenient (and convinced themselves that it is cheaper than cooking for a family)
- Solution driven quick and easy is the main reason to go out as everyone can pick something different and less arguments
- But this segment is slightly less hassled and stressed than parents of very young children. They have more time to go out with their partners and friends
- With older children on the cusp of or actually rejecting children's menus, it can become prohibitively expensive to eat OOH more frequently than they do, as they feel their children eat much more OOH than at home, 'like gannets', and many would eat nothing else but 'fast food' if allowed to
- Control over what their children will or won't eat is slipping often take path of least resistance to keep the peace

Older parents' views on their teens

- Teens can go either way they can become healthier than own parents
 - Fitness + weight 'phase' at a self-conscious age
 - More likely- they will not eat anything but fast food and 'rubbish'
 - It is recognised that it is extremely hard to control eating habits of this challenging age group and parents can give in or give up
- Eating rubbish at school lunchtime key danger point but many parents in this segment just give them the lunch money and let them get on with it. Some try to give packed lunches but, at some point in teens, this will be deemed seriously uncool
 - · Other key danger points regarding diet- when their teens are socialising with friends
 - Or, when left to own devices at home
- Choosing own food to eat- especially when going out at lunchtime seen as kids flexing independence muscles and 'being with their mates'
- Many parents of teens feel that they are fighting a losing battle against the mighty force of the market place and ubiquitous/availability of fast food – it is everywhere and their control is weak if non-existent

Older/empty nesters, 50 + years

- Eating OOH is, for many, regarded as a central part of this segment's social world
 - · With entertaining family and meeting friends being key motives to eating out
 - This segment retains, more than others, a genuine perspective that eating OOH is a treat that should be done when deserved rather than as a norm
 - But the occasions that this 'treat' is taken, for many, are quite common- as temptations are difficult to resist
- Regarding their health- this segment is more inclined to be stuck in their ways, entrenched and resigned to how they are
 - And with this, many are content with how they are- both in terms of how they look and the 'negative influences on their health'
- Motivation (a challenge for everyone) particularly prevalent with this group who may say 'why bother to change now?'
- Albeit, many recognise the need to be very conscious of their health and, with this, their diets- as they are getting to "that age"
- The main barrier to changing behaviour for this audience is the accumulative layers of inertia and diet failures