Evaluating Saudi Arabian Fathers as Key Socialisation Agents in Children's Healthy Eating and The Implications for Healthy Food Marketing Policy Development

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I. Author's Declaration

This thesis is submitted in fulfilment of the requirements of the Ph.D. Project, and except where duly acknowledged or referenced, it is entirely my work. It has not been submitted, either in whole or part, for any other award at Oxford Brookes or elsewhere.

Signed ....   Date 20/09/2021

II. Project Supervisors' Declarations

We confirm that we have read this Project Report and that the work it describes was

undertaken under our supervision.

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III. Abstract

This doctoral thesis aims to explore the parental role in children's food socialisation. Despite the current consumer socialisation literature demonstrating that parents are the most influential socialisation agent for children, little is known about the role fathers play in shaping and forming their children's (un)healthy habits early in life. To address this gap, this doctoral thesis explores the role of the male heads of the family – fathers – as key agents of socialisation who influence their children's (un)healthy food consumption in the culturally distinctive nation of Saudi Arabia.

To seek understanding of how fathers shape food socialisation process for their children, I collected qualitative and interpretative data from 32 fathers from Saudi Arabia adopting combination data collection tools, namely, food choice diaries, in-depth interviews, and accompanied shopping trips.

The findings from the primary research indicated that fathers transfer certain skills, knowledge, and attitudes to their sons regarding food choices in food stores through overt communications and observations, and thus they have a great influence on the development of their sons' consumer skills, knowledge, and attitudes. Moreover, the findings suggested six factors shaping fathers' socialisation of their children's food habits. While social, economic, and religious factors were the most powerful, physiological, nutritional knowledge and beliefs, as well as marketing factors were less influential. Furthermore, the findings stressed that fathers perceived their roles and responsibilities as food socialisation agents for their children, for example (1) food availability, (2) role modelling, (3) teaching children about food, (4) restricting and controlling children's unhealthy food consumption, and (4) encouraging children to consume healthy food and rewarding them for doing so. Overall, fathers encounter different and diverse challenges balancing healthy and unhealthy food choices and socialisation for their children.

This doctoral thesis makes several substantial contributions to the present consumer socialisation literature. My research is the first study to adopt consumer socialisation theory in family food consumption, specifically fathers' food choices for their children, in the context of Saudi Arabia culture. Furthermore, it contributes to understanding the phenomenon of father's roles in food consumption practices with reference to the epidemic of childhood obesity. Moreover, it contributes to understanding father-son interaction with respect to why and how fathers teach their sons not daughters about (un)healthy foods in the context of food stores. Additionally, it contributes to understanding how different factors form or limit fathers' efforts to socialise their children into (un)healthy food consumption. Lastly, it contributes to knowledge about how fathers' feeding practices are shaped by responsibilities.

The primary research has important implications for healthy food marketing policies. Based on the data, the implications could be classified into three categories, namely, health education campaigns, marketing campaigns, and suggestions for policymakers.

IV. Acknowledgements

"Who doesn't thank others will not thank his God" (The Prophet Muhammad)

Ph.D. research is a long-term journey. My study at Oxford Brooks University has been an elegant and challenging experience. Looking back over the past four years, various problems and hardships have been overcome. Nevertheless, the experience also contains many invaluable memories for me. For me, the doctoral research journey was not only about obtaining a degree but was also inspirational in building a robust base for my future life. Accordingly, I would like to express gratitude to those people who have kindly offered me their assistance during my study.

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Ammar Alawadh, 20th September 2021

For non-English speakers, I would like to translate my acknowledgement to them.

شكر وتقدير ♣

"من لا يشكر المخلوق، لا يشكر الخالق"

مرحلة الدكتوراه رحلةٌ طويلة. كانت دراستي في جامعة أكسفورد بروكستجربة جميلة وثرية، لكنها مليئة بالتحديات. بالرجوع إلى أوج سنوات ماضية، كانت فاكالعديد من المشاكل الصعوبات التي واجهتها. ومع ذلك فهي ذكريات قيمة ومفيدة في حياتي.

بالنسبة لي، لم تكن رحلة الدكتوراه تقوم على الحصول على الدرجة العلمية فحسب بل كانت مهمة في بناء قاعدة صلبة في حياتي المستقبلية. وبناءً على ذلك، أود أن أعرب عن امتناني وشكري لأولئك الذين قدموا لي المساعدة أثناء دراستي للدكتوراه.

في البداية، أبدأ بالشكر لله سبحانه وتعالى الذي منحني القوة والإرادة والرغبة والعزيمة من إكمال أطروحة الدكتوراه بنجاح.

كما أود أن أعرب عن امتناني العميق في حقي لإشرافي والتمثيل بالصورة جميلين بير مودي، والدكتورة سارة كويتون. إشرافهم ودعمهم نصائحهم وتوجيهاتهم وتعليقاتهم كانت في غاية الأهمية ساعدتني بشكل أساسي وفعلي في إكمال هذا العمل بنجاح. سأكون ممتنًا لهم.

أودكذلك أن أغتنم هذه الفرصة لأقدم تقديرًا خالصًا للدكتور فيديبون مير للدكتوراه التي إدارة الأعمال بجامعة أكسفورد بروكس على دعمها طيلة الدكتوراه.

كما أوجه الشكر الجزيل إلى المشاركين في معي في الدراسة (لجنة البحث) على مشاركة وقتهم وخبراتهم ووجهات نظرهم حول موضوع الأطروحة. حيث هم الأساس الذي بنيت عليه هذه الأطروحة التي استمتعت في دراستها بشكل كثير من خلال النقاش معهم.

كما أوجه خالص الشكر والامتنان إلى جامعة أكسفورد المتاحة (جهة عملي) على فرصة في التعاون لدراسة الدكتوراه في الحركة المتحركة بريطانية.

شكراً جزيلاً لأمي على صبرها وتحملها في غيابي عن فترة امتدت لأكثر من عشر سنوات خارج الوطن لقد حان الوقت التي أحضنها وأرتوي من حنانها. كما أشكر إخواني وأخواتي على دعمهم لي ومعي وبدون هذا الدعم كان من الممكن أن تستغرق هذه الأطروحة وقتاً أطول.

أخيراً وليس آخراً، أن ممتن للغاية لزوجتي الدكتورة على الحجاب لدعمها اللامحدود وصبرها وتضحيتها خلال مرحلتي الحياة "رحلة الألم التي لتحكِ"، والأب الذي بناكِ على الخير بالصلاح وسمو الأخلاق الطفلة الصغيرة "هاجر" تعلم لكل أفراد في قلبي، حتى وإن كانت في بعض الأوقات قطع واستيسؤلها للعمل دوما"بابا متكتبعبمعي"؟، أستطيع لئها وأترك ابنتي في قلبي وأتمنى ترسم الابتسامة في معاي. شكرا لك هاجر. أحكيا هاجر، وأتمنى لكِ الصحة والعافية والحياة المستقبلية المليئة بالنجاحات.

عمار العوض

حرر في 2021/09/20

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1   Chapter One: Introduction

1.1   Introduction

The thesis is based on doctoral research conducted between September 2016 and August 2021. This first chapter begins by introducing the research background. Then, the study's aims, and objectives are presented. This is followed by an explanation of the rationales for this doctoral research. The chapter concludes with a brief outline of the structure of this study.

1.2   Research Background

Experts and laypersons alike would presumably agree that there are some healthy food groups, e.g. vegetables and fruits, which one should consume more, and others which should be eaten in moderation, e.g. sugary, fatty, and salty foods as well as those that have a high energy density (Bucher, Müller and Siegrist, 2015). However, the definition of what may be categorised as healthy or unhealthy foods has changed over the last century, even becoming more complicated due to improvements in nutritional science (Lobstein and Davies, 2009; Paquette, 2005). In the case of people's perceptions of what shapes healthy eating, Mai and Hoffmann (2015), Werle, Trendel and Ardito (2013) and Jalleh and Donovan (2001) have described healthy eating based on certain foods and food groups such as fresh fruit and vegetables. One study by Bisogni *et al.* (2012) examined consumers' perceptions of healthy foods and underlined an important variety and complexity that is related to the concepts of healthy and unhealthy eating. The authors determined 26 meanings that people associate with healthy foods and healthy eating. These are referred to with respect to the category of food itself (fruit and vegetables, animal food, safe food, and functional food), and to nutrients or other components found in foods such as general nutrients, fibre, vitamins, and minerals. Similar results have been reported by the World Health Organisation (WHO, 2019).

According to Lusk (2019), based on the kind of food, a food labelled as "healthy" must comprise at least 10% of the recommended daily amounts of one or more of these items, namely, vitamin A, vitamin C, calcium, iron, protein, or fibre. Thus, following the definition of (un)healthy food in Lwin *et al.* (2017), this study defines healthy food as food that have a greater nutrient density (e.g., fruits and vegetables), whereas unhealthy food are those with a lower nutrient density (e.g., sugary drinks, sweets, chocolates, and fast food).

Childhood obesity has come to be one of the most significant public health challenges of the 21st century (Liu et al., 2020). Globally, according to the World Health Organization (WHO, 2020), in 2019 378 million children and adolescents were overweight or obese. This doctoral study is located within this unfolding health crisis. Specifically, it focuses on the rise in children's obesity in Saudi Arabia and the recent and ongoing controversy this has triggered. According to the WHO (2018), Saudi Arabia has a high prevalence of obesity compared with other countries in the WHO Eastern Mediterranean Region. For example, among children aged < 5 years, the highest annual rates of rise were noticed in Saudi Arabia (37.1%), Libya (11.1%) and Tunisia (10.4%) respectively (Nasreddine, Ayoub and Al Jawaldeh, 2018). This is supported by Al-Hussaini *et al.* (2019) who found the overall prevalence of overweight and obesity in Saudi Arabia was 13.4% and 18.2% for girls and boys, respectively. El Mouzan *et al.* (2012) report that the obesity rate has doubled over a 10-year period in Saudi Arabia when compared with the World Health Organisation (WHO)-based national prevalence rate of obesity indicated in 2004 (= 9.3%). Accordingly, Saudi researchers have emphasised the need to raise awareness of obesity (Habbab and Bhutta, 2020; Al-Raddadi et al., 2019; Alqarni, 2016; Hammad and Berry, 2016). Hence, they have sought to design research frameworks, approaches, and specific

policies to combat obesity throughout the country (e.g., Alsukait et al., 2020, 2019; Al-Dhaifallah, Mwanri and Al-joudi, 2015).

Studies suggest the family is one of the key problems in childhood obesity in Saudi Arabia (Aljassim and Jradi, 2021; Al-Hussaini et al., 2019). It has an overarching influence on the child's future in the form of developing diet patterns that will protect against or increase obesity risk (Hammad, 2017; Alqarni, 2016; Hammad and Berry, 2016; Al-Dhaifallah, Mwanri and Al-joudi, 2015). Researchers in consumer behaviour and marketing have long been interested in understanding how family members, especially parents, impact children's consumption behaviour (e.g., Dotson and Hyatt, 2005; Ward, 1974). Such studies perceive the family as the domain of consumption and socialisation (Moore, Wilkie and Desrochers, 2017), whereby it functions as the main consumption and socialisation unit (Grønhøj and Gram, 2020a; O'Malley and Prothero, 2006). Accordingly, the family operates as a socialisation agent from early in a child's life, with the propensity to influence their consumption patterns throughout their lifetime (Kharuhayothin and Kerrane, 2018; Judd et al., 2014; Kerrane, Bettany and Hogg, 2014).

With respect to family socialisation of food consumption, Kharuhayothin and Kerrane (2018) stress the importance of understanding how the family effects children's socialisation into specific patterns of consumption. Researchers agree parents play a significant role in advancing children's consumption behaviours because they are the most influential socialisation agents for young children, particularly surrounding food practices (Grønhøj and Gram, 2020a; Peters *et al.*, 2014; Dotson and Hyatt, 2005; Marshall, O'Donohoe and Kline, 2007). Indeed, Hughner and Maher (2006) maintain food consumption is the very first consumer skill that parents advance in their children. However, two issues emerge from this scholarship. Firstly, it is orientated towards

mothers (Vollmer, 2021; Davison *et al.*, 2016; Vaughn *et al.*, 2016). As Moore, Wilkie and Desrochers, (2017) observe, there is a large research gap on how fathers shape food consumption decisions. Secondly, much of this research evidence is Western-orientated. There is limited research attention focused on exploring this aspect of choice-making in non-western cultures (Roudsari *et al.*, 2017), and even less in cultures where fathers play a vital role in most family decisions, including patterns of food consumption (Hammad and Berry, 2016; Yavas, Babakus and Delener, 1994). Therefore, while understanding how parents shape children's food consumption has been identified as a significant research topic for further exploration (Moore, Wilkie and Desrochers, 2017; Russell, Worsley and Liem, 2013; Marshall, O'Donohoe and Kline, 2007), this importance is maximized in non-western, male-dominant cultures with an obesity pandemic, such as Saudi Arabia.

Such a culture is quite distinctive from western cultures. For example, Alharthi (2017) notes Saudi women are exceedingly dependent upon their male family members when it comes to food purchasing. Thus, they may be compelled to eat whatever their male family members (i.e. husbands and fathers) purchase (Al Dossry, 2012; Tuncalp and Yavas, 1990). This is reflected in Arab countries high score on power distance, as a result of which people accept a hierarchical order in which everyone has a place and which needs no additional justification (At-Twaijri and Al-Muhaiza, 1996). This also suggests that children in the Arab culture, in which children have a religious obligation to obey parents, are comparatively submissive and have a tendency to obey their parents' selections (Chaudhary, Ghouse and Durrah, 2018). This dominant role of the male member of the family in feeding his family stems from Islamic law. This law stipulates that father must be the breadwinner for their families, entailing taking responsibility for education, finding a house, discipline, medication, clothing, and food

and drink consumption. This raises interesting questions on Saudi Arabian fathers as a consumer socialisation agent influencing the (un)healthy food consumption of their children. Hence, my doctoral research focuses on how Saudi Arabia fathers influence their children's' food consumption.

In terms of the child's gender, the gender effect can be understood by taking into account what parents sometimes attach great importance to, plus the fact that they are more thoughtful about the eating habits and behaviours of girls than boys (Bouhlal *et al.*, 2015). Dolwick and Persky (2021), Persky *et al.* (2018), and Bouhlal *et al.* (2015) have demonstrated that the child's gender affects eating behaviour in that parents tend to select more calories for boys. Consumer researchers have long examined the impact of consumption on children and may perhaps extend this to parents' choice of dietary control strategies in terms of the child's gender (Moore, Wilkie and Desrochers, 2017). Therefore, far too little attention has been paid to the food choices that fathers make on behalf of their children in the early stages of growing up. More specifically, it is unclear how a father's food selections vary when made for his son or daughter (Bouhlal *et al.*, 2015).

Food socialisations do vary with age. Wang *et al.* (2016) have shown that snacking patterns differ by age. John (2008, 1999) argues that these changes are especially widespread until 14 years of age, by which time more adult-like perceptions would have arisen. Roach *et al.* (2017) show that while mothers talk food less overall among school-aged children, they talk more to pre-school-aged children. Studies of children's food socialisation suggest alterations in abilities and perceptions across different ages as a result of cognitive and social development (Yee, Lwin and Ho, 2017). Accordingly, this doctoral thesis focuses on younger children in the socialisation process of (un)healthy food consumption.

Several food policies have been established in Saudi Arabia for general health purposes (e.g., Al-Jawaldeh *et al.*, 2020; Milaat, 2014) and, specifically, for addressing childhood obesity in particular (e.g., Al Eid *et al.*, 2017). Nevertheless, these policies suffer from significant weaknesses. For example, the government of Saudi Arabia has levied an excise tax on soda (50 per cent) and energy drinks (100 per cent) (Saudi Vision 2030, 2016). Yet Alsukait *et al.* (2019) revealed that grocery retailers have reported only a slight decline in the sales of taxed sugary and energy drinks, a drop they linked to the overall Saudi economy in recent years. In addition to excise taxation, Saudi scholars such as Habbab and Bhutta (2020), Al Eid et al. (2017), Alqarni (2016) and Al-Dhaifallah, Mwanri and Al-joudi (2015) have proposed applying various strategies such as an education health program and improvement of parents' health awareness to combat obesity issues in Saudi Arabia. Therefore, my doctoral data research will contribute to the development of such strategies by offering data-informed insight to develop healthy food marketing policy.

1.3   Research Aims and Objectives

The aims of my research are:

1. To explore the role of the male heads of the family – fathers – as key agents of socialisation who influence their children's (un)healthy food consumption in the culturally distinctive nation of Saudi Arabia.

2. To identify salient issues from the data to inform more efficacious healthy food marketing policy to address the obesity problem in Saudi Arabia.

To fulfil these aims, my research objectives are:

a. To critically review the literature on consumer socialisation theory and family food choices.

b. To explore how and why Saudi fathers make (un)healthy food choices for their

children, and the implications for the child obesity problem in Saudi Arabia.

c. To explore how fathers in Saudi Arabia perceive their roles and responsibilities as socialisation agents for the food they choose for their children.

d. To contribute to consumer socialisation theory on male heads of family as key socialisation agents on their children's food consumption within the cultural context of Saudi Arabia.

e. To identify the salient issues from the data to inform a more efficacious healthy food marketing policy to address the child obesity problem in Saudi Arabia.

1.4   *The Rationale for this Doctoral Research Study*

The first rationale for my research stems from the fact that children's obesity is a huge issue globally, and it is essential to understand why obesity rates continue to rise among children in Saudi Arabia. Prior research shows that obesity among children - both boys and girls - is widespread in most areas of Saudi Arabia, the Eastern Province shows higher rates than other regions (Hammad and Berry, 2016). Economic growth has led to apparent changes in food consumption patterns in Saudi Arabia (Azzeh et al., 2017). For instance, after conducting a cross-sectional observational study in the cities of Makkah (western region), Dammam and Qatif (eastern region), Al-Kutbe et al. (2017) and Darwish et al. (2014) found that children who are obese usually have the highest energy, fat, carbohydrate and protein intake. This is supported by Al-Dhaifallah, Mwanri and Al-joudi (2015), Horaib et al. (2013), and Al-Rethaiaa, Fahmy and Al-Shwaiyat (2010) who found that Saudi diets are rich in carbohydrate, fat and protein and lead to obesity and that obese children had a lower intake of fruit, milk and breakfast than non-obese children.

The second rationale for this study is to address some of the notable gaps in the consumer socialisation literature. Research on family roles in childhood obesity have predominantly focused on other domains of behaviour, such as paediatric medicine, public health, nutrition, developmental psychology, family studies, genetics, and physiology (Moore, Wilkie and Desrochers, 2017). Hence, more research is recommended on the family as a consumption unit and its role in childhood obesity as a consumer socialisation process (Moore, Wilkie and Desrochers, 2017; Tarabashkina, Quester and Crouch, 2016). Furthermore, there is also a need to increase the evidence on the impact of the family, fathers particularly, on children's (un)healthy eating. Previous studies have identified a number of variables contributing to obesity, such as dietary patterns, physical activity, and demographics. However, they do not take into account the significant role of the family (Moore, Wilkie and Desrochers, 2017), especially *fathers*, as consumer socialisation agents (Moore, Wilkie and Desrochers, 2017; Khandpur *et al.*, 2014). Consequently, this doctoral research adds to consumer socialisation theory as it relates to fathers as socialisation agents of children's food consumption (Minahan and Huddleston, 2010; John, 1999).

Thirdly, this doctoral study helps to address the contextual limitations of consumer socialisation theory. Specifically, current evidence is culturally limited. Thus, although food socialisation studies in developed countries have reported many interesting findings (e.g. Grønhøj and Gram, (2020) [Denmark], Kharuhayothin and Kerrane (2018) [UK], Judd *et al.* (2014) [Australia], and Hughner and Maher (2006) [USA]), there is a serious knowledge-gap on food socialisation in non-western countries and cultures, for example, in the Middle East region, and the child obesity problem in Saudi Arabia specifically. Additionally, earlier socialisation studies did not typically include the wider context of food socialisation (Grønhøj and Gram, 2020a),

i.e. gender, and cultural influences, and a real-time unfolding health crisis. For example, the Islamic culture of Saudi Arabia has a robust effect on all facets of life. This will significantly influence how fathers act as socialisation agents for their children. This doctoral study therefore helps to address some of the current contextual research limitations by contributing a rich macro perspective to consumer socialisation theory in the current epidemic of childhood obesity in Saudi Arabian society.

The final rationale stems from my personal interest in the topic. Namely, that my family history includes cases of obesity and its health consequences, such as strokes, hypertension, cardiac arrest, and knee replacements operations. In addition to this, I have observed throughout my life that there is obesity among all different age groups, especially children, in the social environment in which I live. Hence, these experiences and observations influenced my choice of this doctoral study. As a result, I view it as a kind of 'moral duty' to help to address this problem and assume responsibility for highlighting the extent of childhood obesity in my home country.

1.5   *Structure of the Thesis*

The thesis is structured as follows:

- *Chapter One* presents the academic background and presents the research aims and objectives. It also highlights the personal motivation for this research.

- *Chapter Two* reviews the academic literature concerning three research fields. This chapter starts by reviewing and evaluating the empirical studies that investigate parents as key agents of socialisation and co-shopping. Then, the chapter reviews and evaluates the empirical studies that investigate the factors affecting parents as key agents of socialisation influencing food choice. Next, the chapter reviews and evaluates the empirical studies that investigate parents as key agents of socialisation and their roles/responsibilities on food choice. The

chapter ends by reviewing the consumer socialisation literature. The chapter sets the broad framework for the ensuing empirical study, emphasising the gaps in the literature.

- *Chapter Three* provides a comprehensive explanation of the research methodology, the study's research design, and the rationale for choosing it. It begins by setting out the research aims and objectives and the research philosophy that underpins them. This is followed by a comprehensive account of the data collection tools and analysis processes. Next, the chapter discusses the transferability, credibility, dependability, and confirmability of the study. The chapter ends by highlighting methodological limitations of the study.

- *Chapter Four* presents the findings obtained from 32 food choice diaries, 32 in-depth interviews, and 32 accompanied shopping trips with fathers. This chapter introduces the eight themes that emerge from the data.

- *Chapter Five* discusses the results with respect to the existing literature.

- *Chapter Six* highlights the theoretical and practical contributions of my research. The research limitations are highlighted and some suggestions for future study are also pointed out. The study concludes with some final reflections on my doctoral journey experience.

2   Chapter Two: Critical Literature Review

2.1   Introduction

The purpose of this chapter is to review the existing scholarly literature on family food consumption, particularly male heads of the family – fathers – as key agents of socialisation influencing the (un)healthy food consumption of their children. To explore this issue, I reviewed: (1) parents as key agents of socialisation and co-shopping (section 2.2); (2) factors affecting parents as key agents of socialisation influencing food choice for their children (section 2.3); (3) parents as key agents of socialisation and their roles/responsibilities in food choices (section 2.4); (4) consumer socialisation theory (section 2.5); and (5) consumer socialisation and culture (section 2.6). Figure 2.1 presents my research framework.

Marketing researchers have long been interested in understanding how family members, particularly parents, effect children's eating behaviour (Ward, 1974). Davis *et al.* (2018) and Moore, Wilkie and Desrochers (2017) argue that family is one of the key problems in childhood obesity with its overarching influence on the child's future by developing diet patterns. This will protect against or increase obesity risk—hence this concerns the domains of consumption and socialisation (Moore, 2018). As noted in section 1.4, this doctoral research falls under the umbrella of consumer socialisation theory. In this study consumer socialisation theory is used in the context of the food socialisation process. To date, little attention has been paid to understanding male heads of the family – fathers – as key agents of socialisation influencing the (un)healthy food consumption of their children, especially in the culturally distinctive nation of Saudi Arabia. I identified the gaps around the three themes of the literature review with respect to consumer socialisation and family food consumption. Limited food socialisation studies have been conducted in other countries and cultures such Saudi

Arabia, constituting a serious gap in the literature. In addition to this, so far, there has been very little research directly identifying the salient issues in order to inform the development of a healthy food marketing policy aiming to address the obesity problem in Saudi Arabia.

Figure 2.1 Study framework
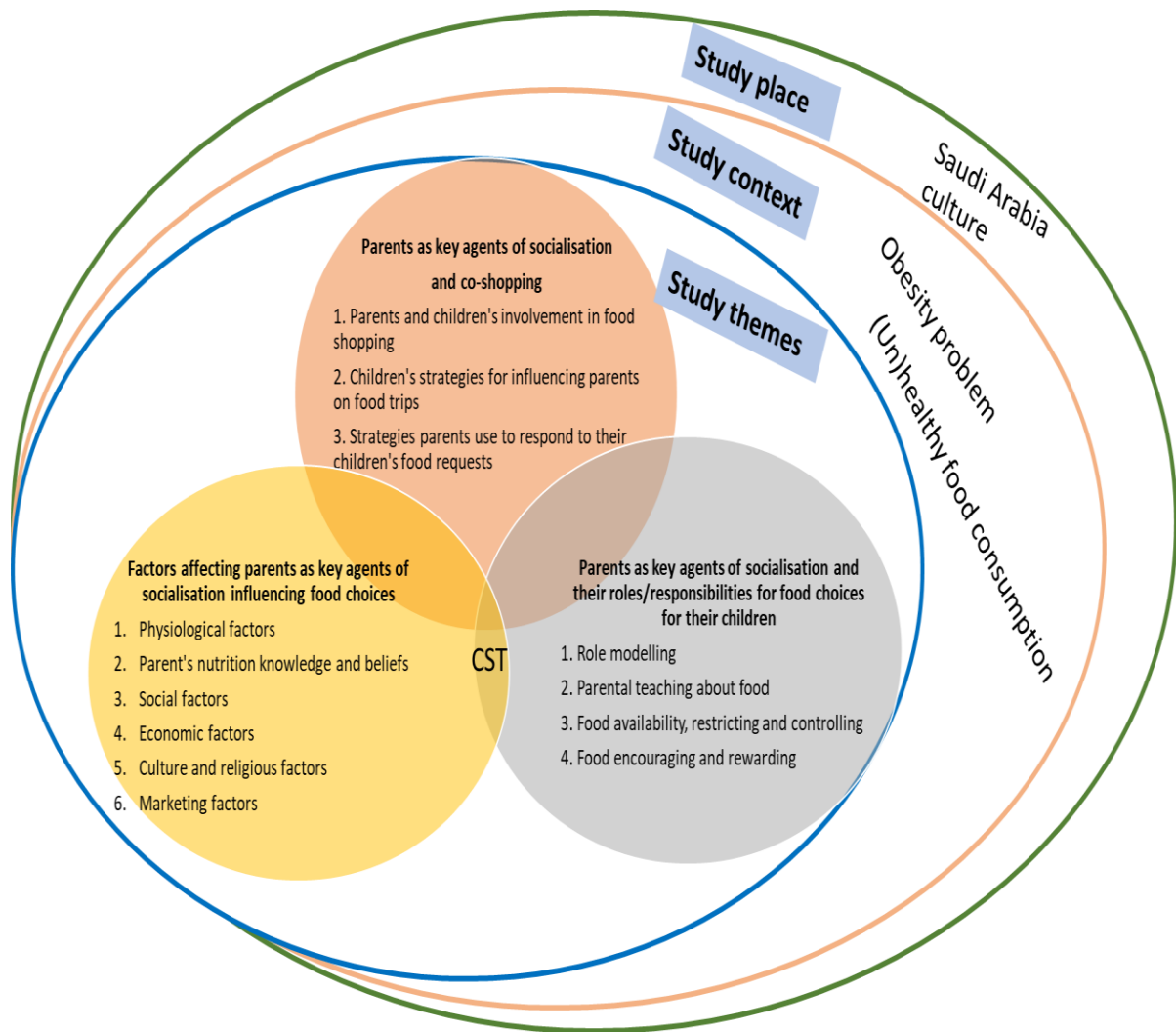
2.2 Parents as Key Agents of Socialisation and Co-shopping

A critical review of previous studies on parents as key agents of socialisation and their interaction with children in food stores can be divided into three groups: (1) parents and children's involvement in food shopping; (2) children's strategies for influencing parents; and (3) strategies parents devise to respond to their children's food requests.

2.2.1 Parents and Children's Involvement in Food Shopping

Previous research has suggested that parents refer to children's participation as a food socialisation strategy by letting them participate in food shopping trips (Grønhøj and Gram, 2020a; Owen *et al.*, 2010; Wilson and Wood, 2004; Carruth and Skinner, 2001; Grossbart, Carlson and Walsh, 1991). While not all children frequently go shopping with their parents (Gram and Grønhøj, 2016), parents often take their children to shop in order to impart marketplace attitudes and behaviours to deliberately instruct and teach their children about consumer roles (Keller and Ruus, 2014; Marshall, 2014; Gaumer and Arnone, 2009; Marshall, O'Donohoe and Kline, 2007).

A study by Gram (2010) shows that parents use store visits to teach their children, for instance, by letting the child touch the healthy food such as vegetables to make them realise how fresh vegetables feel. Grønhøj and Gram (2020a) reveals that fathers are perceived to play a significant role in children's food related consumer socialisation outside the boundaries of the home, where vital choices about healthy and unhealthy food are made. Some parents firmly believe they are the people who educate their children about food choices and decisions and provide them with the skills and knowledge when shopping (Ek *et al.*, 2020; Allirot, Maiz and Urdaneta, 2018; Turner, Kelly and McKenna, 2006; Pettersson, Olsson and Fjellström, 2004). Similarly, around half of the time parents respond positively to offspring's in food store requests, especially where children are being urged to improve their own skills and capabilities (O'Dougherty, Story and Stang, 2006). Whilst the density of and closeness to convenience stores to children are positively linked with unhealthy eating behaviours (Xin *et al.*, 2019), convenience stores can be considered as a chance to give younger consumers some accountability and freedom in their food buying (Marshall, 2016). Hence, regular shopping together between parents and their children tend to be more

concerned with their children's consumer socialisation and place more significance on educating their children's consumer skills (Ayadi and Muratore, 2020; Grønhøj and Gram, 2020a; Gram, 2015; Ebster, Wagner and Neumueller, 2009) and explain and address children's questions and requests (Grossbart, Carlson and Walsh, 1991). Ultimately, this might have a noteworthy influence on children's food choices later in life (Sutherland *et al.*, 2008).

On the other hand, it has previously been shown that parents face issues when accompanying their children in food stores (Page *et al.*, 2018; Pettersson, Olsson and Fjellström, 2004). It is likely that co-shopping levels relate to overall socioeconomic factors. By conducting focus groups and in-depth interviews, Wilson and Wood (2004) explore the influence of children on supermarket shopping. They reveal that eight out of ten parents felt that they spent more money on food shopping when their offspring were existing. Therefore, whilst parents who take their children to stores generally have lower incomes (Krcmar *et al.*, 2017), lower income levels might make it harder to buy the food that children request (Pettigrew *et al.*, 2017; Ebster, Wagner and Neumueller, 2009).

In addition, it has been noted that the speed of co-shopping declines as the number of children accompanying the parents on shopping trips declines (Carruth and Skinner, 2001). Page *et al.* (2018) show that shoppers accompanied by children buy groceries 15% faster for the same number of products than shoppers unaccompanied by children (Page *et al.*, 2018). Shopping without children at all was associated with the quickest shopping trips (Grønhøj and Gram, 2020a; Thomas and Garland, 1993).

Furthermore, taking children food shopping could contribute to unhealthy food choices for them (Gram, 2015, 2010; Gaumer and Arnone, 2009; O'Dougherty, Story and Stang, 2006; Atkin, 1978). For example, Castro, Calderon and Ayala (2017)

unobtrusively observe parent-child dyads for the duration of brief shopping trips. They revealed that although parents initiated healthy food choices, the majority of products requested by their children were recognised as calorie dense. Likewise, Larson *et al.* (2006) reveal that girls who were more involved in food shopping chose more fried food. Therefore, children have the power to influence their parents to request unhealthy food during shopping trips (Vohra and Soni, 2015; Basu and Sondhi, 2014; Nørgaard *et al.*, 2007; Turner, Kelly and McKenna, 2006).

2.2.2 Children's Strategies for Influencing Parents on Food Trips

When it comes to shopping for food, children are a constituent part of family practices, and significant attention has been paid to parenting practices in consumer socialisation (Moore, Wilkie and Desrochers, 2017; Grønhøj and Gram, 2020a; Keller and Ruus, 2014). It has been documented in the literature that children exert influencing strategies ('pester power') in supermarkets to get the food they want (Gram and Grønhøj, 2016; Dallazen and Fiates, 2014; Marshall, 2014; Marshall, O'Donohoe and Kline, 2007). These pester power strategies are classified into six categories: (1) bargaining, (2) persuasion (begging, cajoling, pestering, and whining), (3) directed assertion, (4) emotional strategies (involving anger, crying, withdrawing, pouting, and sweet talk, as well as simply asking directly or expressing a need or a want, (5) reasoning, and (6) legitimising (Gaumer, Arnone and Ashley-Cotleur, 2013; Palan, 2001). Similar pester power strategies used by children have been found in the Indian context (Aluvala and Varkala, 2020; Malik and Shah, 2016). These influence tactics are utilised to some degree by all children in their interactions with their parents (Gaumer, Arnone and Ashley-Cotleur, 2013). In general, these strategies are deployed to influence their parents to choose unhealthy food compared to healthy products (Huang *et al.*, 2016; McDermott *et al.*, 2006).

From one perspective, empirical research on pester power has observed that the presence of children in food stores and their participation were viewed negatively by the parents (Krcmar *et al.*, 2017; Baldassarre, Campo and Falcone, 2016; Dallazen and Fiates, 2014). Ellis and Maikoo (2018) highlight children have a relatively deep understanding of how to impact their parents by employing various negative methods. These include emotional appeals, product requests, purchase justifications, and bad behaviour such as sulking. When children merely ask for food items without nagging, this is referred to as 'simple requests' (Askelson *et al.*, 2019; Ellis and Maikoo, 2018). Kerrane, Hogg and Bettany (2012) point out that continually pleading for food products, nagging and pestering are deemed methods of persuasion. Lawlor and Prothero (2011) indicate that some children go so far as to say they 'bully' their parents, demonstrating a more aggressive nagging tactic in food stores. In addition to persuasion, bargaining is another influencing tactic applied by children to get the food items they want (Marshall, O'Donohoe and Kline, 2007). Other strategies involve the child simply putting the chocolate product in the shopping cart or touching chocolate products (Calderon *et al.*, 2017; Taghavi and Seyedsalehi, 2015).

Previous research has argued that children use emotional strategies to influence their parents to choose food healthy and/or unhealthy (Askelson *et al.*, 2019; Gaumer and Arnone, 2009). Calderon *et al.* (2017) and Taghavi and Seyedsalehi (2015) conclude that children influence their parents by using emotional methods such as pointing. Similarly, Ellis and Maikoo (2018) show emotional appeal strategies such as sadness, love, and affection were used by children to get their parents to buy sweets, chips, and fast food. More recently, Page *et al.* (2019) observe through the use of video and audio recording of shopping trips that a third of children show a whining approach to nag their parents to get what they want. Another study suggested that children use

strategies aimed at their parents' emotions to ask their parents to choose certain food items (Marshall, O'Donohoe and Kline, 2007).

From another perspective however, several authors have observed that children often deploy favourable tactics in family co-shopping in food stores instead of using negative pester power (Grønhøj and Gram, 2020a; Gram and Grønhøj, 2016; Gram, 2015; Dallazen and Fiates, 2014; Haselhoff, Faupel and Holzmuller, 2014; Keller and Ruus, 2014; Marshall, 2014; Pettersson, Olsson and Fjellström, 2004; Wilson and Wood, 2004). Together, these studies illustrate those children enjoy shopping with their parents and are cooperative at least some of the time. Several cooperative steps during shopping were identified, such as carrying foodstuffs, guarding and pushing the trolley, testing the quality of products, locating, fetching and carrying products, placing products on the counter, filling and carrying shopping bags (Nørgaard *et al.*, 2007). Children use these positive influencing strategies to get what they want 'politely' (Haselhoff, Faupel and Holzmuller, 2014; Nadeau and Bradley, 2012). To illustrate, Gram and Grønhøj (2016) and Ebster, Wagner and Neumueller (2009) conclude that when children ask for things politely, they can be successful in their food requests. McDermott *et al.* (2006) note that this kind of request strategy might be seen as negative strategy pester power apparent as a series of nagging requests emerging from exposure to commercial marketing.

Thus, the studies suggest children's ability to influence familial food buying – the negative strategy of 'pester power' and more favourable strategies - can have an impact on their nutritional health (Swindle *et al.*, 2020; Huang *et al.*, 2016). Thus, as Gram and Grønhøj (2016) maintain, children are immersed in family food shopping practices which are internalised.

2.2.3   Strategies Parents Use to Respond to their Children's Food Requests

Although most parents replied affirmatively to their children's requests for fruits and vegetables (Askelson *et al.*, 2019), they restrict unhealthy food that are high in fat, sugar, and salt products (Marshall, O'Donohoe and Kline, 2007). Whereas parents agree to their children's food requests (Aluvala and Varkala, 2020), they tend to agree earlier before entering the food store so as to avoid stress at the point of sale (Sanders and Woolley, 2005). Consequently, parents have two reasons for assenting to their children's food requests even if the food is not healthy: to make their children happy, and to reward them (Marshall, 2014; Hughner and Maher, 2006).

Children's requests to choose highly processed food is hard when monetary limits do not exist (Dallazen and Fiates, 2014). Keller and Ruus (2014) reveal that parents grab the food items selected by their children and place them back on the shelf. However, parental refusals in some studies were generally related to concerns about the costs of specific food: fruit, vegetables (Askelson *et al.*, 2019), and Philadelphia cream cheese (Haselhoff, Faupel and Holzmuller, 2014). In addition to financial constraints, parents sometimes refused to choose the product desired by their children but were willing to select another product out of health reasons (Haselhoff, Faupel and Holzmuller, 2014; Gram, 2010). Askelson *et al.* (2019) argue that parents may refuse to buy certain food for their children, such as fruits or/and vegetables, because they know their children will not consume them after the purchase. Hence, it can be concluded that parents' have a tendency to agree to requests is frequently a result of their financial ability to buy these food items and their perceived appropriateness for the children (Lawlor and Prothero, 2011).

In addition, another strategy to evade conflict is to permit children to engage in shopping trips (Marshall, 2014). This strategy opens a window for parents to include children in food shopping by allowing them to express thoughts and preferences in

stores and by directly involve them in shopping tasks (Grønhøj and Gram, 2020a; Buijzen and Valkenburg, 2008). Haselhoff, Faupel and Holzmuller (2014) observe that parents commonly invited their children to take part in food selections by asking them. Haselhoff, Faupel and Holzmuller's (2014) study show that parents mention product categories and permit children to give their views and decide whether to select them or not. This primarily happened with dairy foodstuffs such as yogurt, with juices, and with convenience food such as pizza. Likewise, Marshall (2014) and Gram (2010) observe quiet, pleasant discussions among family members, with children taking the roles of advisors and helpers, such as pushing the shopping trolley. They also find that children helped by going and getting particular foodstuffs to put in the shopping trolley, or by searching for items in the store.

Moreover, previous research has shown that children develop progressively sophisticated negotiation tactics in family food choices (Haselhoff, Faupel and Holzmuller, 2014; Wingert *et al.*, 2014; Ebster, Wagner and Neumueller, 2009; O'Dougherty, Story and Stang, 2006; Belch, Belch and Ceresino, 1985). Children negotiate with their parents over product choices across specific product categories such as sweets, cereals, or food items for their school lunchbox (Marshall, 2014). Mothers are noted to say yes to purchases including lower priced food items, for example, cereal and candy snacks, at a much greater rate than for higher-priced products such as toys and sporting goods (Isler, Popper and Ward, 1987). Gram (2015) argue that healthy and unhealthy food choices, or requests from children seem to be a central concept around which negotiations are props in the enactment of responsible parenthood. Likewise, whereas two-thirds of children acknowledged that they annoyed their parents to buy certain products seen in advertisements, they also presented themselves as accepting parental advice concerning dietary problems pertaining to snack food (Marshall,

O'Donohoe and Kline, 2007). The study considers how the children were aware of the different effects of influencing strategies such as negotiation, depending on the circumstances. Therefore, decision-making in terms of food choices is part of a negotiated bargain between parents and their children in food stores (Atkinson, Nelson and Rademacher, 2015; Lawlor and Prothero, 2011). Children's requests in supermarkets may be viewed as part of an everyday healthy family life that offers a chance for conversation and engagement (Marshall, 2014).

Accordingly, as explained in section 2.2 of this chapter, parent-child food interactions in food stores are part of the food socialisation process as children grow up (Grønhøj and Gram, 2020a; Lawlor and Prothero, 2011). Fan and Li (2010) argue that the attendance of children and their involvement in grocery shopping can be a significant way to socialise them as consumers. Grønhøj and Gram (2020a) suggest that fathers play a crucial role in children's food-related consumer socialisation when letting their children participate in and interact with them in food shopping stores, and that this is a vital role in choices about (un)healthy food. Keller and Ruus (2014) and Grossbart, Carlson and Walsh (1991) demonstrate that parent-child cooperation, which can be perceived as enactment of practice transmission, differ between reflected and conscious teaching and unreflected physical actions that are made in the child's co-presence. It has been acknowledged that a parent's refusal to buy a requested item can often give rise to parent-child conflict but contend that it can similarly be seen as an unavoidable part of childhood and family communication (Lawlor and Prothero, 2011). Predominantly, such interactions socialise children into the behaviours, values, resources, and restraints that support the family unit and, more generally, they make children aware of the commercial realities of the marketplace (Moore, Wilkie and Desrochers, 2017; Lawlor and Prothero, 2011).

In addition, changing family communication patterns could be a reason for a contemporary transformation in parent-child interaction. Family communication patterns have become more open and democratic, with today's parents paying closer attention to their children and their opinions (Mikeska, Harrison and Carlson, 2017; Mikeska *et al.*, 2017). It is noted that these changes in family communication patterns have made it possible for children to apply influence on their parent's food choices (Cyril *et al.*, 2016). Nørgaard and Brunsø (2011) find that most parents use a very open communication patterns during food buying, permitting room for all preferences and views from their children. Buijzen and Valkenburg (2008) do not find parent–child communication influencing in the retail environment. In the context of casual dining restaurants in Taiwan, Chen *et al. (*2016) investigated children's roles in relation to family communication patterns. The study revealed that although fathers and their children have a similar influence in deciding the type of restaurants and food ordered while at the restaurants, teenage children have more influence than fathers on family dining-out choices. It has been pointed out that through family communication and participation in family food choices, children learn norms, roles, and consumer skills and are therefore able to apply an effect on buying decisions (Flurry, 2007). This is attributable to the higher consumer socialisation of children (Mikeska, Harrison and Carlson, 2017).

Moreover, children's age can be another factor in the interaction between parents and children during food shopping (Lawlor and Prothero, 2011; Palan and Wilkes, 1997). Haselhoff, Faupel and Holzmuller (2014), Buijzen and Valkenburg (2008), and Ward and Wackman (1972) conclude that while children in the earlier stage of consumer socialisation (perceptual stage: 2-7 years old) might make more buying requests, the requests of those in the analytical and reflective stages (8-14 years old)

give rise to more purchases. Equally, it is argued that older children have been seen to be more involved in family food shopping in the sense that they accompany adults on shopping trips as something they have to do, but they nonetheless become involved more and directly strive to effect selections (Marshall, 2014; Kerrane, Hogg and Bettany, 2012; Pettersson, Olsson and Fjellström, 2004; Palan and Wilkes, 1997; Atkin, 1978).

Collectively, a critical review of the literature on parents as key agents of socialisation and co-shopping studies (section 2.2) reveals a number of reasons for expanding on this line of research. First, most prior studies have focused on parent-child interaction in food stores from the context of family decision making (Rachmi *et al.*, 2018; Calderon *et al.*, 2017; Chikweche, Stanton and Fletcher, 2012; Nørgaard and Brunsø, 2011; Flurry and Veeck, 2009; Nørgaard *et al.*, 2007; Belch, Belch and Ceresino, 1985; Atkin, 1978). However, scant attention has been paid to parent-child interaction in food shopping from the context of food socialisation (Grønhøj and Gram, 2020a; Gaumer, Arnone and Ashley-Cotleur, 2013; Lawlor and Prothero, 2011; Buijzen and Valkenburg, 2008). Moreover, to date, there has been little discussion on how fathers experience food shopping and how they see their role in food stores. Hence, Moore, Wilkie and Desrochers (2017) have called for further studies on parents' and children's roles in food purchasing.

Second, prior studies have almost exclusively focused on 'who' buys the food and beverages (e.g. Castro, Calderon and Ayala, 2017) and too little on 'how' these choices are made ("How do they arrive at that decision?") (Commuri and Gentry, 2000, p.1) and how parents socialise their children regarding the food they choose. Furthermore, previous research has examined the behaviour and strategies parents and children use to influence each other during shopping from the consumer socialisation

context (Gaumer, Arnone and Ashley-Cotleur, 2013; Kerrane, Hogg and Bettany, 2012; Lawlor and Prothero, 2011; Buijzen and Valkenburg, 2008; Marshall, O'Donohoe and Kline, 2007). Despite these studies, what is not yet understood is how parent-child interaction influence negotiation strategies in food stores in great depth analysis as my research focuses on (un)healthy food socialisation for the children.

Third, previous studies have focused on parent-child interaction in the context of food stores. However, examining the family unit at a more disaggregate level limit consumer scholars' ability to break down the family communication variable into more separate units, for example, father-son communication in food store settings. One study conducted by Al-Zu'bi, Crowther and Worsdale (2008), with an emphasis on revising and validating the scales of fathers' communication structures, recognised solely Jordanian fathers' communication structures and patterns rather than interaction between father and son in food shopping.

Fourth, past studies on parent-child co-shopping have been conducted in Western countries; limited research has been done in non-Western countries, notable exceptions being India (Aluvala and Varkala, 2020; Basu and Sondhi, 2014; Malik and Shah, 2016) and Taiwan (Chen *et al.*, 2016). From the consumer socialisation theory viewpoint, different national/cultural contexts may affect parent–child purchase related communications, for example, as a result of cultural differences in child-rearing styles or consumption culture (Buijzen and Valkenburg, 2008). Additionally, culture does indeed seem to have a determining impact on individual consumer socialisation agents (Kerrane, Bettany and Kerrane, 2015; Moore *et al.*, 2002) and processes (Rose, 1999). Hota and McGuiggan (2005) noted that culture is one of the variables that make up the social environment in which children learn to become consumers. Understanding cultural differences may provide an opportunity to develop a better understanding of the

socialising impact of factors such as parents' beliefs and values (Pedersen, Grønhøj and Bech-Larsen, 2012; John, 1999). Grønhøj and Gram (2020a) have called for further exploration of parents' roles, including fathers' engagements with household chores and prioritisation of food socialisation in different cultural settings.

These gaps in knowledge confirm the focus of this exploratory study on whether (and how) Saudi fathers act as consumer socialisation agents in making healthy and (un)healthy food choices for their children, set against the context of the growing problem of obesity in Saudi Arabia. My research will extend the body of literature on food consumer socialisation by answering the calls for further research into father-child involvement, influences, and negotiation strategies during food shopping (Moore, Wilkie and Desrochers, 2017; John, 1999).

2.3 *Factors Affecting Parents as Key Agents of Socialisation Influencing Food Choice*

This section critically reviews the literature of how a wide array of factors influences parents as key agents of socialisation in food choices for their children. As illustrated in figure 2.2, these factors can be categorised into six groups: (1) physiological factors, (2) knowledge, attitudes, and beliefs, (3) social factors, (4) economic factors, (5) culture and religion factors, (6) and marketing factors.

Figure 2.2 Discussion of the factors affecting parents as key agents of socialisation in food choices
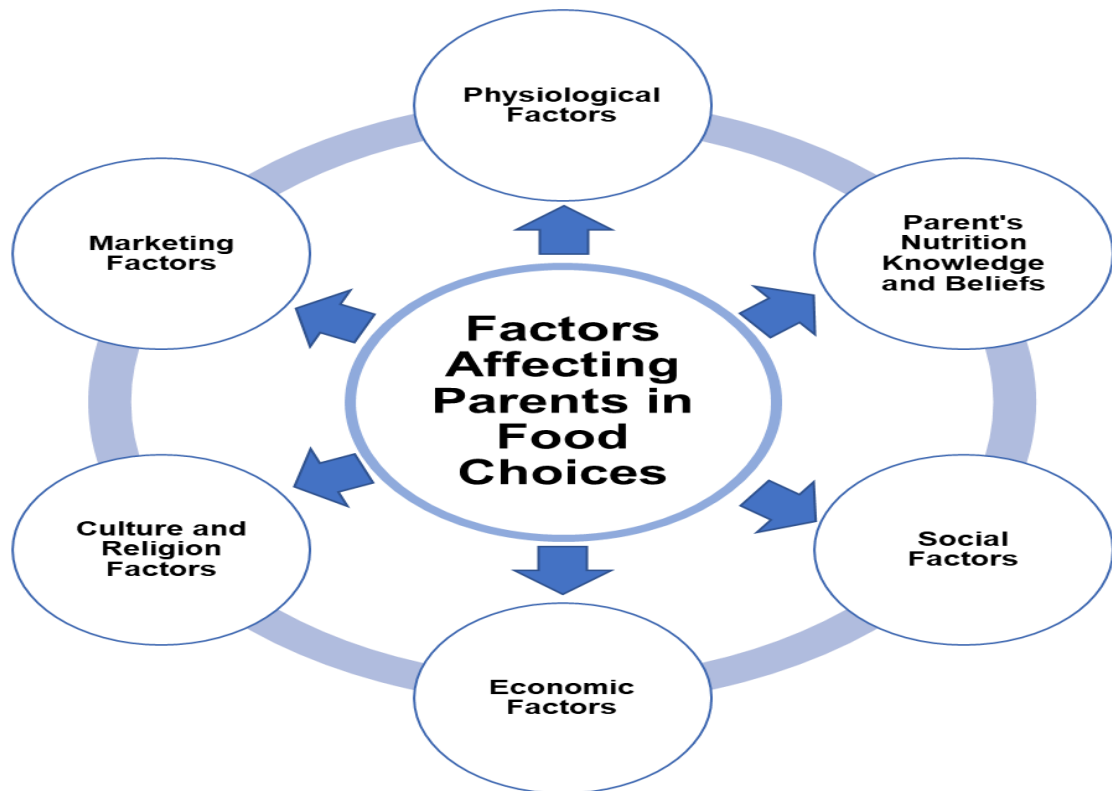
2.3.1   Physiological Factors

With food acquisition and consumption being among the initial of all consumer socialisation processes, parents play a pivotal role as early socialisation agents in the shaping of children's food preferences (Vollmer and Baietto, 2017; Alm, Olsen and Honkanen, 2015; Wiggins, 2014). The logic behind this role is that repeated taste exposure to food raises the liking of that food. For instance, a significant relationship in the Saudi Arabian context has been noted between certain unhealthy dietary habits and preferences and the prevalence of childhood obesity, such as extravagant eating of fried potatoes, chocolate, and frequent fast meals (Al-Shehri, 2014). Results also reveal that whereas children in Saudi Arabia consume healthy food such as nuts, fresh fruit, and fresh juices, they most frequently consume unhealthy food such as French fries, potato chips, cakes, doughnuts, sweets, sugary drinks, and chocolate (Al-Shehri, 2014; Al-Hazzaa *et al.*, 2012; Daffalla *et al.*, 2011). It has been argued that it appears parents

need encouragement to frequently provide nutrient suitable food such as fruits and vegetables instead of convenient energy-dense food and snacks (Savage, Fisher and Birch, 2007). Thus, learning to like initially unpalatable food might be part of the process of parental socialisation (Scaglioni, Salvioni and Galimberti, 2008) in order to assist children to learn to eat healthily (Birch and Doub, 2014).

It has been reported that current patterns of food preferences hinder the eating of a healthy diet by inhibiting the consumption of healthy food and promoting the consumption of unhealthy food among the family, particularly in children (Renzaho *et al.*, 2014; Bere and Klepp, 2005; Resnicow *et al.*, 1997; Domel *et al.*, 1996; Birch *et al.*, 1993). In other words, children prefer food that are suggested from their parents to be infrequently eaten or consumed in small amounts while the most disliked food comprise those that promote good health, such as vegetables and fruits (Poelman and Delahunty, 2011; Zeinstra *et al.*, 2010; Russell and Worsley, 2007). For example, full-fat milk consumption associates with more healthy nutritional choices, for instance, fruit, vegetable, eggs and cheese preferences, in both males and female Saudi children (Collison *et al.*, 2010). On the contrary, Murshid (2014) find that parents in Saudi Arabia reported that their children preferred food that is high in sugar and consumed soft drinks frequently. Accordingly, these developed likes (and dislikes) could well translate into food patterns that affect food choices during childhood and adulthood (Collison *et al.*, 2010; Unusan, 2006).

Several publications have indicated that food taste is an essential motivator for parents when choosing their children's food (Russell, Worsley and Liem, 2015; Palojoki and Tuomi-Gröhn, 2001). The major findings of these investigations show that the child's wants, and desires are of primary concern for parents. Furthermore, the desire for food with a sweet and salty flavour seems to be universal (Benton, 2004).

Consequently, the current data proposes that children begin to digest and imitate their parents' food selections at a very young age, even before they can thoroughly appreciate the implications of these choices (Adamo and Brett, 2014). Within Saudi Arabia, in Al-Qassim city there is a high consumption and preference for dates amongst individuals (Midhet, Al-Mohaimeed and Sharaf, 2010), which might be linked to their sweet taste, widespread availability, and/or nutritional value.

2.3.2 Parent's Nutrition Knowledge and Beliefs

Nutritional knowledge may be referred to as an "understanding of the health benefits of food and nutrients" (Zarnowiecki *et al.*, 2012, p.1284). It has been concluded that parental interest and acknowledgement of the significance of nutrition are associated with the amount of nutritional information parents discuss with their children (Tarabashkina, Quester and Crouch, 2016; Zarnowiecki *et al.*, 2012). Sirasa *et al.* (2020) assume that parents have a basic nutritional knowledge in order to make a healthy choice for their children in Sri Lanka. In India, Nawab, Madan and Moitra (2019) suggest that parents nutritional knowledge about vegetable intake was positively clearly related to its consumption in the children. Nevertheless, education and knowledge of parents are not always associated with good food consumption. Knowledge of health risks from eating specific food does not necessarily mean that individuals have the adequate will power to cope with these issues and therefore they may find it hard to break or amend certain eating habits prevalent in Gulf countries (Musaiger, 1993). Rathi, Riddell and Worsley (2020) and Hughner and Maher (2006) conclude that parents lacked the nutritional knowledge to make notified selections about healthy food for their children. This has strong potential to influence the levels of nutritional knowledge children have about food (Zahid, Davey and Reicks, 2017).

Previous nutrition studies have found that children with higher education and knowledgeable parents have healthier food at home, consume more fruit and vegetables, and eat less fat and fast-food (Mahmoud and Grigoriou, 2019; Zahid, Davey and Reicks, 2017; Tarabashkina, Quester and Crouch, 2016; Campbell *et al.*, 2013). This stems from educated people having the ability to process, interpret, and use the information they obtain regarding food and food choices, and thus they understand the benefits and harms that are linked with a specific food (Scott and Vallen, 2019; Hawkes, Jewell and Allen, 2013; Contento, 2008). Similarly, research in Saudi Arabia and Kuwait showed that more educated parents select healthy food such as vegetables and fruits (Almutairi *et al.*, 2018; Bakhotmah, 2012; Al-Shawi, 1985).

Parent's beliefs about which food are healthy and their own food experiences were also linked to their selections of food for their children (Boak *et al.*, 2016; Patrick and Nicklas, 2005). To illustrate, Dennison, Erb and Jenkins (2001) reveal that parents who believed that whole milk had more calcium as well as vitamins than reduced-fat milk were more likely to choose whole milk for their children. In contrast, nearly all parents buy sugary drinks for their children, and numerous parents even consider that some sugary drinks are healthy choices for children, specifically flavoured waters, fruit drinks, and sports drinks (Munsell *et al.*, 2016). They also show that children's food-related consumption is closely associated with their parent's beliefs toward food. In Gulf countries, including Saudi Arabia, Musaiger (1982) highlights that parents believe that gelatine, which is used in jelly, is made from pig bones. Any pig products are considered unhealthy and are forbidden in Islam, and thus jelly is not eaten. Likewise, there is a common belief in Bahrain that tomato juice is healthy because it raises the amount of blood in the body, probably because tomato juice is a thick red juice which looks like blood (Musaiger, 1982). Therefore, parental health practices and beliefs

(informed by parents at baseline) and explicit nurturing by parents are significant predictors of their children's beliefs through parental socialisation (Menendez *et al.*, 2020; Russell, Worsley and Liem, 2013; Birch *et al.*, 2001).

2.3.3   Social Factors

A number of studies has shown that husband-wife disagreements occur with respect to food socialisation for their children (Nørgaard and Brunsø, 2011). A study by Nepper and Chai (2016) reveal that parents of overweight/obese children stated difficulties over the lack of support from their spouses/partners in having healthy food at home for their offspring. Another study by Hayter *et al.* (2015) argue that alterations in parental food choices lead to conflicts within families, specifically where two parents have different thoughts about what they should feed their children or have diverse eating habits. In contrast, Grønhøj and Gram (2020a) find no core disagreements with reference to food socialisation between mothers and fathers, with the majority of fathers and mothers devoted to providing healthy food for their children. Likewise, Walsh *et al.* (2017) show that mothers and fathers jointly share the responsibilities for the food they choose for their children.

A growing body of literature recognises the intergenerational influence on the food consumption behaviour of children (Wang, Chen and Yang, 2020; Rogers, Bell and Mehta, 2019; Eli *et al.*, 2017; Zhang *et al.*, 2015). The intergenerational influence refers to the ''information, beliefs, and resources that are transferred from one family generation to the next'' (Moore, 2018). Moore's (2018) research on parent-child food preferences, beliefs, and eating practices demonstrates that the impact of early learning is considerable and frequently continuing. It has been suggested that parents draw on their emotional reflexivity in remembering prior food practices (learned/experienced as a child from their parents), which notifies whether they would enact – or disregard – the

same patterns of food practices/socialisation with their own offspring (Kharuhayothin and Kerrane, 2018). Likewise, Rhodes *et al.* (2016) find that an intergenerational influence from grandmother to mother was observed with reference to specific food groups, for instance, encouragement to consume nutritious food, for example fruit and vegetables. The mothers in the parent generation remained with the same emphasis on healthy diet for their own family. As a result, Moore (2018) argue intergenerational influences have likely been internalised by a son or daughter.

It has been argued that grandparents also have an influence on parental socialisation of (un)unhealthy food for their children (Bell, Perry and Prichard, 2018; Knight, O'Connell and Brannen, 2014; Walsh, Meagher-Stewart and Macdonald, 2015). Damen *et al.*, (2020b), Boak *et al.* (2016) and Herman *et al.* (2012) point out that the presence of others, such as grandparents, may make it more difficult for parents to select food for their children. In their systematic review, Young, Duncanson and Burrows (2018) acknowledge that parent-grandparent tensions occur in child feeding attitudes and behaviours, resulting frequently in poor feeding practices. In contrast, Jingxiong *et al.* (2007) suggest that grandfathers had robust views and thought about healthy child dietary choices and influenced food selections positively in China. Eli *et al.* (2017) argue that both mothers and grandmothers specify role modelling and the home environment as being significant for regulating pre-schoolers' soda, juice and water consumption, but that discrepancies exist in terms of the definition of healthfulness (particularly for juice). Hota and Bartsch (2019) argue that grandparents in India engage in various interactions about food consumption or discussions, not just buying requests and co-shopping. In sum, it might be more suitable to review a *wider family* consumer socialisation process at work beyond just parental consumer socialisation.

Previous research has suggested that family structure is a substantial factor related to consumption of (un)healthy food for children (Kharuhayothin and Kerrane, 2018; Rogan, Piacentini and Hopkinson, 2018; Casini *et al.*, 2015; Stewart and Menning, 2009). These studies suggest the extended family influences parents on (un)healthy food choices for their children (Damen *et al.*, 2020a; Walsh, Meagher-Stewart and Macdonald, 2015; Herman *et al.*, 2012; Rodríguez-Oliveros *et al.*, 2011; Pettigrew and Roberts, 2007). Fuster *et al.* (2019) reveal that although the influence of grandparents is positive, parents did mention possible conflicts, particularly with grandmothers, who offered food parents perceived as unhealthy. Likewise, Boak *et al.* (2016) report that the presence of others, such as the extended family, might influence the food mothers choose for their infants. Sirasa *et al.* (2020), alternatively, demonstrate that the extended family has a vigorous supportive role in providing healthy effect on the food selections parents make for their children. Another study, by Darwish *et al.* (2014), find that children living in nuclear families consume more unhealthy products such as pizza and burgers than do children living in extended families in Saudi Arabia. Therefore, different types of family structure mean that certain types of families are at specific risk of obesity (Dewan, 2017).

Only a small number of studies have examined the influence of siblings on parents' food choices for their children. For example, Boak *et al.* (2016) interviewed 32 Australian mothers to examine the experiences of mothers making food choices for their infants. The study concludes that the influences of older siblings comprised provision of information, advice, opinions, role-modelling and through food others made available for infants to consume, thus influencing the food mothers select for their infants. Similarly, Damen *et al.* (2020a) and Vilela *et al.* (2015) report that parents noted that the presence of older siblings might have an influence on the snacks they

provide for their children and linked it with a daily intake of energy-dense food. Vilela *et al.* (2015) and Northstone and Emmett (2005) argue that older siblings may influence the food consumption of younger relatives by bringing into the household products wanted by the latter, such as sweetened beverages, crisps and nutrient-poor snacks. In India, Chaudhary (2018) suggests the role of siblings is one of the most important aspects in the discussion. It was noted that in families where there is younger or elder sibling, they shape a cluster and become robust in their pester power. Consequently, siblings might influence parents to socialise unhealthy food for their children, contributing to a heightened risk of childhood obesity (Park and Cormier, 2018).

2.3.4   Economic Factors

Several studies have examined whether healthy food is more or less expensive than less healthy food and the extent to which this might influence parents' food choices. Whereas some argue that nutritious diets of wholegrains, lean meats, and fresh vegetables and fruits are low-cost, others believe that energy-dense food with more calories per serving are less expensive (Daniel, 2020; Kellershohn, Walley and Vriesekoop, 2017; Lee *et al.*, 2016; Judd *et al.*, 2014; Basch, Ethan and Rajan, 2013; Monsivais, Mclain and Drewnowski, 2010; Drewnowski, 2010; Drewnowski and Specter, 2004). Supermarket scanner and experimental research have shown that consumers' 'demand sensitivity' for healthy food is greater for a price rise than a decline, but the opposite is the case for unhealthy food (Talukdar and Lindsey, 2013). This proposes that consumers are more responsive to price promotions provided on unhealthy food than on more healthful choices (Bennett *et al.*, 2020). Scott and Vallen (2019) argue that this factor might have critical downstream effects of socialising the child away from experimenting with unfamiliar (healthy) choices later in life.

Additionally, it is argued that some parents as well as their children perceive the

prices of specific healthy food as too high and evade them for this reason (Moore, Wilkie and Desrochers, 2017). Parents assume that organic food is more expensive than non-organic food (Janssen, 2018; Román and Sánchez-Siles, 2018). However, households prefer organic food because they see them as safer and more trustworthy (El Benni *et al.*, 2019). Households that are able to follow through on this belief and actually purchase organic food is more likely to have higher incomes. Hence, Judd *et al.* (2014) note that it is possible that the factors that restrict parents' food consumption choices - such as cost - might shape their food socialisation practices.

The relationship between family income and food choice has been widely investigated (Sirasa *et al.*, 2020; Vilaro *et al.*, 2016; Lovelace and Rabiee-Khan, 2015; Paes, Ong and Lakshman, 2015). It has been acknowledged that households with a lower income are unable to spend large high amounts of money on food especially fruits and vegetables and may shape their food socialisation practices (Judd *et al.*, 2014; Cortés *et al.*, 2013). Thus, they are invariably linked with purchasing less healthy food and lower levels of fruit and vegetables (Daniel, 2016; Turrell and Kavanagh, 2006; Devine *et al.*, 2003; Turrell *et al.*, 2002). Equally, Monsivais, Mclain and Drewnowski (2010) argue that economic constraints might increase family consumption of less nutritious food. This may lead to the creation of a barrier to a healthy diet, having adverse consequences on the family's nutritional status and health (Nepper and Chai, 2016). On the contrary, some scholars found that in low-income families, the wife has a significant influence on the family's consumption of a nutritious diet, for instance consuming vegetables and fruits (Evans *et al.*, 2011; Dubowitz *et al.*, 2007). This can be explained by the fact that children with parents who possess socially desirable traits, for example, diligence or good health, have a tendency to accumulate social advantages even when their parents have a restricted financial income (Mayer, 1998).

As highlighted by Musaiger (1993), family income is observed to be one of the core factors that determine what food choices are made in Gulf countries such as Saudi Arabia, specifically when looking at this from the viewpoint of the overall country. The household income in Saudi Arabia increased by 75% from 2004 – 2007, driven by higher public-sector employment and wages (Al-Kibsi *et al.*, 2015). Due to increasing family income in Saudi Arabia, families have been a shift from the traditional essential food choice and diet of dates, barley, wheat and meat, to a more Western-style diet (DeNicola *et al.*, 2015; Bakhotmah, 2012). This is supported by Almuhanna *et al.* (2014), who revealed that most overweight or obese school students belong to high-income families, attributable to children's more regular consumption of a number of less healthy food (Tarabashkina, Quester and Crouch, 2017). Alternatively, the low-income rural compared with the high-income urban was much more possible to consume Western fast food and sugar-sweetened beverages in South Korean (Lim et al., 2018).

2.3.5   Culture and Religion Factors

Numerous studies have demonstrated that customs and traditions within cultures typically influence parents when they are deciding what food to choose for their children because people from diverse backgrounds eat different food (Sirasa *et al.*, 2020; Roudsari *et al.*, 2017; Hardcastle and Blake, 2016; Bowen and Devine, 2011; Neumark-sztainer *et al.*, 1999). The major findings show that when parents are asked about their reasons for specific food choices for their children, they refer back to their own dining experiences as children, even if they are aware that some of the traditional food that they ate as children were not particularly healthy. Within Saudi Arabia culture, Ng *et al.* (2011) note that rich, high-fat food are common in the daily diet of Saudi citizens. The cultural tradition of generous hospitality habitually means offering and consuming large quantities of food at all times of the day (DeNicola *et al.*, 2015).

Delaney and McCarthy (2014) suggest that each generation's perception of consuming healthily is grown through an evolving schema for making food selections educated through altering social and cultural processes over time. Equally, Larson and Story (2009) suggest that cultural food patterns affect family food consumption and this shapes family food preferences and perceptions of what kinds of food are healthy and unhealthy. Accordingly, family customs and traditions can be passed on and reinforced through cultural transmission whereby each generation attempts to distinguish itself from the previous generation by designing its own identity (Scott and Vallen, 2019; Epp and Price, 2018; Knight, O'Connell and Brannen, 2014).

Furthermore, cultural norms might influence parents to choose food for their children (Block *et al.*, 2011). Cultural norms comprise special days where festivals and certain occasions command what food is chosen. In Saudi Arabia, for example, where the population observes the Islamic faith, there are habitually lavish feasts that occur on the days of Eid (translated as 'holy days') (Musaiger, 1993). Fathers usually bring sweets, nuts, and cakes to celebrate Eid days with their family. Kharuhayothin and Kerrane (2017) conclude that parents allow their children to consume unhealthy food such as sweets and candy on special occasions. Roudsari *et al.* (2019) note that Iranian mothers, on religious occasions such as Ramadan, change their food consuming habits to allow more confectionery. Traditional food in festive times becomes space for socialisation and the gathering of the family (Quintero-Angel, Mendoza and Quintero-Angel, 2019). Consequently, parents influence children's eating habits through the food they purchase for and serve in the household (Moore, 2018). Through this kind of repetitive everyday interaction and routine, a culture arises which shapes what it means to be a part of one's family and what its members are anticipated to say and do (Epp and Price, 2008).

The literature notes that social norms might influence parents in terms of their ability to make (un)healthy food choices for their family, specifically their children. Cruwys, Bevelander and Hermans (2015), Cruwys *et al.* (2015) and Vartanian (2015) argue that social norms play a significant role on parents' food choices for their children. Damen *et al.* (2020a), Hogreve *et al.* (2020), Marty *et al.* (2018) and Kharuhayothin and Kerrane (2017) conclude that parents provide unhealthy food and drinks for their children because they do not want their children to be ostracised by their peers. Food socialisation might shape the learned norms children adopt, internalise, and utilise later in life (Heijden *et al.*, 2020; Scott and Vallen, 2019; Epp and Price, 2018).

From the religious perspective, according to Heiman, Gordon and Zilberman (2019), religious beliefs influence what can be consumed and, notably, how food should be produced and processed. A growing number of publications has focused on Halal (permitted) food in Islamic countries (Secinaro and Calandra, 2020; Floren, Rasul and Gani, 2019). Muslims consume halal food, meaning that any meat and meat products they eat must be from a halal slaughtered animal (Hamdan *et al.*, 2018). There are reservations among Muslim families that not all meat sold is halal. Therefore, they are concerned with the source of this meat. Conversely, Muslim families avoid Haram (forbidden) food (Ashraf, 2019). These food contain emulsifiers and other food contents, for example gelatine, enzymes, lecithin and glycerine, as well as additives – stabilisers, flavourings, colourings, and other substances (Hanafiah and Hamdan, 2020; Marmaya, Zakaria and Mohd Desa, 2019). Hence, Muslim consumers' preferences are strongly based on their Islamic faith (Wilson and Liu, 2010), whereby the perceived significance of Halal and Haram is foremost in consciousness of Muslims (Wilson and Liu, 2011).

Prior research suggests that parents' religion plays a significant influential role

in the selection of food consumed in particular societies (Rawlins *et al.*, 2013). To illustrate, Rachmi *et al.* (2018) conduct twelve focus groups of ninety-four carers of children aged under five and aged 7-12 in Indonesia. The study revealed that mothers gave more consideration about the Halal status of the food/snacks than the nutritional values of the food that their children would consume. Roudsari *et al.* (2019, 2017) reveal that although Iranian households stated living in a Muslim country like Iran makes one in general less worried about whether food is Halal or not, they do still consider the question. In Gulf countries, including Saudi Arabia, Musaiger (1982) highlights that parents believe that gelatine, which is used in jelly, is made from pig bones and Islam forbids the consumption of pork. As Scott and Vallen (2019) argue, then, the religious traditions of family shape behaviour around food.

Pertinent to this doctoral study, it is important to appreciate that Saudi Arabia is an Islamic country, and the nation is generally religiously conservative. Saudi Arabia has two sects of Muslims: Sunni and Shia. As noted, a primary doctrine of Islam is for followers to eat only food Halal products and refrain from the usage of all that is considered Haram (Farah, 2020). Nonetheless, there are some differences between these Islamic sects in terms of what constitutes Halal. Whilst the Sunni school allows people to consume all forms of seafood, Shia clerics only deem seafood with scales acceptable (Bashir *et al.*, 2019; Chehabi, 2007). Additionally, Sunni Muslims are allowed to consume meat slaughtered by a Christian or a Jew (Freidenreich, 2011). Alternatively, Shia Muslims allowed their followers to only eat meat that has been slaughtered by Muslims who are directed at the Qibla, the location of the Ka'aba, throughout the slaughter (Farah, 2020; Freidenreich, 2011). Also, while Sunni scholars believe animal gelatine is permissible, Shia clerics believe that any animal gelatine is forbidden unless it is from an Islamic country. Pork gelatine is prohibited by both groups. Thus, it can be

observed that the Sha school is more restrictive when it comes to issue of what food is Halal.

A small number of studies have attempted to examine Muslim consumers' attitudes towards the Halal credence of international fast-food restaurants, especially in Muslim countries. In a study conducted in Saudi Arabia, AlFaris *et al.* (2015) find that Saudi females have concerns about ensure whether fast food is Halal. Conversely, Pakistani, Malaysian and Indonesian consumers have no difficulty and trust that products in restaurants such as Pizza Hut, McDonalds, KFC and Dunkin Donuts are Halal due to the guarantee of Halal certification that is showed on the product packaging (Khan, Mohammad and Muhammad, 2020; Bukhari *et al.*, 2019; Quoquab, Mohamed Sadom and Mohammad, 2019; Asnawi, Sukoco and Fanani, 2018). Thus, for Muslim consumers, while halal certification gives reassurance, sensitivity to food products imported from the West remains important in the process of consuming these food for these families, including choosing from international fast-food restaurants (Bukhari *et al.*, 2020).

The religious motivation in consumers' food choices has led to boycotts of certain food in Muslim regions. For example, boycotts of American fast-food restaurants in Arab countries were begun by campaigners protesting American support for Israel (Ahmed *et al.*, 2013; Mohamed and Daud, 2012). Previous studies in conservative Islamic countries, for example Jordan, Iran, Pakistan, Morocco, and Saudi Arabia, have revealed animosity towards American products, including fast-food outlets and services (Maher and Mady, 2010; Bahaee and Pisani, 2009; Chiozza, 2009; Leong *et al.*, 2008). This contrasts with less conservative Muslim countries where, for example, Sari, Mizerski and Liu (2017) and Ahmed et al. (2013) find that Malaysian and Indonesian consumers do not have high levels of animosity towards American

products and fast-food restaurants. Religion was also found to influence Muslim consumers regarding Danish products due to a Danish newspaper publishing a cartoon depicting the Prophet Muhammad, the prophet of Islam. Abosag and Farah (2014) examine Saudi customers and found a religiously motivated boycott against Danish food companies such as Arla Dairy Food. Another study, by Kalliny, Minton and Benmamoun (2018), show that even Muslim consumers in the US who self-define as religious are likely to engage in religiously motivated boycotts. Hence, consumers are likely to take part in religiously motivated boycotts regardless of whether a country is predominantly of the same religion or not (Agarwala, Mishra and Singh, 2019; Kalliny, Minton and Benmamoun, 2018). Therefore, Muslim consumers' attitudes are influenced by Islamic teachings and religious scholars, including boycotting products from the countries who do not respect Islam (Farah, 2020; Abuljadail and Ha, 2019; Soon, Chandia and Regenstein, 2017).

2.3.6   Marketing Factors

It has been demonstrated that price promotions, as one marketing communication method, affect parents' food choices for their children, especially for low-income parents, who seem to be aware of cost (Beck *et al.*, 2019; Kim *et al.*, 2017; Steenhuis, Waterlander and De Mul, 2011). It has been found that low incomes drive some parents to move from store to store in pursuit of the lowest food prices (Raskind *et al.*, 2017). Alternatively, studies by McDonald and Milne (2018) and Taillie *et al.* (2017) argue that families with lower-income had no significant influence of food buying with price promotions. Hence, socio-economics play an important role when parents socialise food habits to their children (Judd *et al.*, 2014) .

Nevertheless, data from several studies suggest that consumers seem to have negative reactions to marketing attempts to attract them, viewing them as gimmicks

and/or deception (Iranmanesh *et al.*, 2017; Jamal, Peattie and Peattie, 2012; d'Astous and Landreville, 2003). A study by Le Borgne, Sirieix and Costa (2018) show food waste concerns might influence the probability of wasting money after purchasing a promoted item; the predicted probability of wasting is emotional – a feeling of being cheated or betrayed after choosing easily perishable products (e.g., cheese and bread).

A wide array of studies have focused on the influence of different media advertising aimed at children and their food consumption (e.g., Mehta and Bharadwaj, 2021; Czoli, Pauzé and Potvin Kent, 2020; Lwin *et al.*, 2020). In contrast, relatively few studies have analysed whether advertisements *aimed at parents* may influence them regarding food selections for their children (Pettigrew *et al.*, 2013; Grier *et al.*, 2007). Whilst these studies do not offer evidence for a causal relationship between advertisements directed at parents and children's weight, they acknowledge pathways by which the food industry might negatively impact children through its effects on parents (Sonntag *et al.*, 2015). For instance, Grier *et al.* (2007) show that increasing parental exposure to advertisements might impact children. It was also found that higher exposure to fast food marketing for parents, particularly through advertising, was linked with more frequent fast-food consumption by their children (Rathi, Riddell and Worsley, 2020; Grier *et al.*, 2007). Similarly, Tarabashkina, Quester and Crouch (2017) find that parents' more favourable attitudes towards energy-dense food was positively linked to children's consumption of energy-dense food. Conversely, Pettigrew *et al.* (2013) suggest that after a single exposure to both television and internet food advertisement, parents have greater immunity to the effects of advertisements regarding their children because of their higher cognitive processing abilities. The results of other studies highlight that mothers perceive the negative influence of food advertisements (specifically on their children) and try to ensure healthy eating habits within their

families (Emond, Madanat and Ayala, 2012; Yu, 2012).

Taken together, from the evaluation of the literature (section 2.3), while published studies on the factors affecting parents as key agents of socialisation influence on food choices for their children reveal a significant contribution in the literature, a number of important limitations need to be considered. Although a considerable amount of literature has been documented in this line of research (see, among others, Annunziata, Vecchio and Kraus, 2016; Judd *et al.*, 2014, Jaeger *et al.*, 2011; Bisogni *et al.*, 2007, 2005; Hughner and Maher, 2006; Palojoki and Tuomi-Gröhn, 2001; Furst *et al.*, 1996), these studies have been undertaken often in the context of Western culture (Europe, USA, and Australia) (Paes, Ong and Lakshman, 2015). Some scholars argued that although sensory appeal, health, convenience, and price are typical among the primary motives of parents choosing food for their children, the order of magnitude of importance can differ across countries (Pula, Parks and Ross, 2014; Pollard, Kirk and Cade, 2002). Hayter *et al.* (2015) report that UK mothers stated that cost of food, time constraints, and a lack of perceived knowledge influence them when they choose food for their children. Likewise, Judd *et al.* (2014) show that Australian caregivers were constrained in their socialisation of fruits and vegetables by budgetary and time factors, commensal experiences, and children's fussiness regarding certain food. To the best of my knowledge, only a limited amount of research has been conducted in non-western countries (Sirasa *et al.*, 2020; Hota and Bartsch, 2019; Nawab, Madan and Moitra, 2019; Jingxiong *et al.*, 2007). These studies make no attempt to offer an adequate explanation of the factors that might influence parents as key agents of socialisation on food choices for their children in the Saudi Arabian context in more depth. Hence, it is important that a comprehensive study is conducted to explore factors that might influence fathers as key agents of socialisation food choice

on behalf of their children (Moore, Wilkie and Desrochers, 2017; Hughner and Maher, 2006).

2.4 *Parents as Key Agents of Socialisation and their Roles/Responsibilities in Food Choices*

From the literature, the roles and responsibilities of parents in terms of food consumption for their children can be derived from the parental food practices literature. Parental practices are specific strategies used to socialise and manage their children for particular goals, such as food (Blissett, 2011). These strategies are: parental role modelling, parental teaching children about food, food availability, restricting and controlling, and food encouraging and rewarding (Blissett, 2011; Darling and Steinberg, 1993), which is represented in Figure 2.3. Each of these strategies is discussed in turn.

Figure 2.3 Parents as key agents of socialisation and their role in food choice discussed
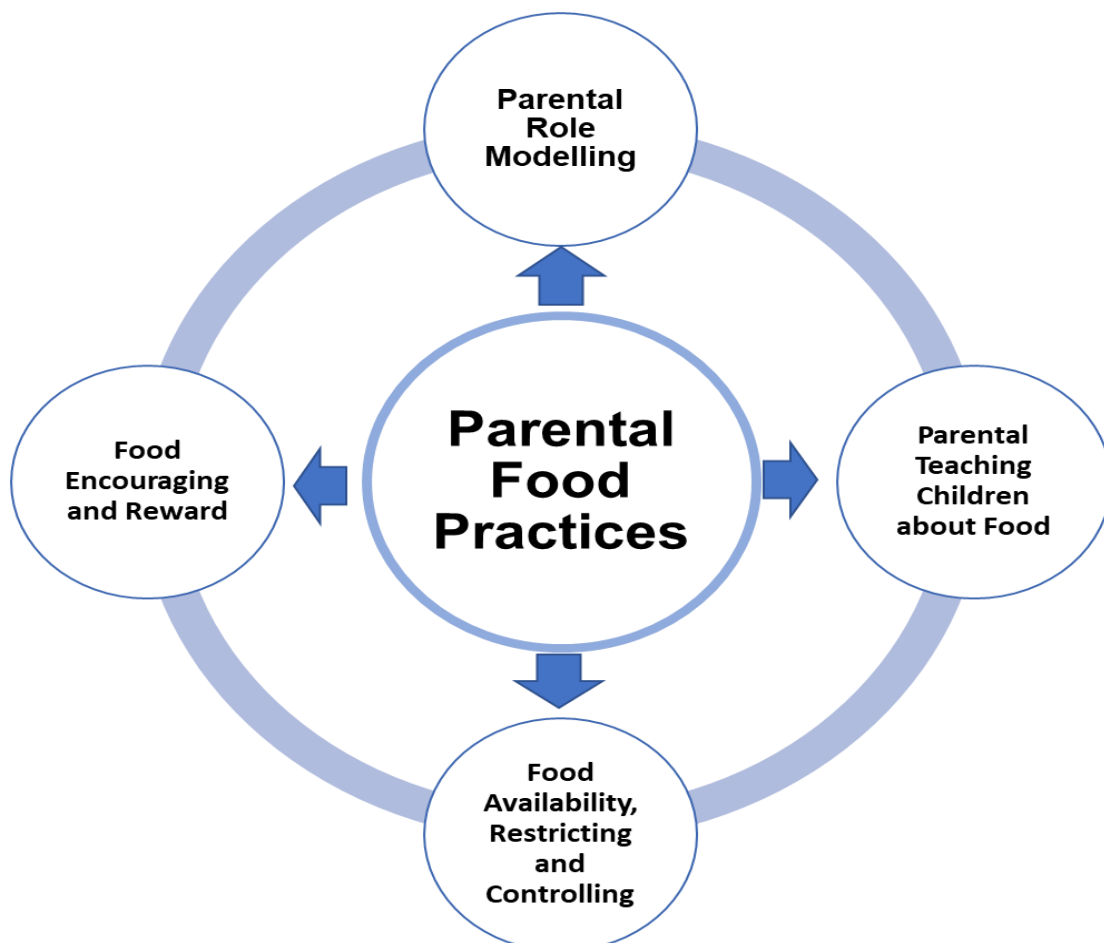
2.4.1   Parental Role Modelling

Psychologists define role modelling as a cognitive process that shapes individuals' beliefs and attitudes about the behaviours they observe in others, which in turn forms their own behaviours (Bandura, 1977a). According to Bandura (2004), parental modeling can transfer attitudinal, norms-based, and self-efficacy beliefs to children, which drives consumption behaviour. Watterworth *et al.* (2017) and Russell, Worsley and Campbell (2015) suggest that parental modelling behaviours encompass parents consuming and enjoying healthy food in front of, or together with their offspring. This includes consuming meals together, saying good things about the food, and evading discussing/enacting parental food dislikes. This modelling effect occurs when children's observations of their parents' eating patterns effects their own–beliefs about what to choose to consume and how much is suitable to eat (Yee, Lwin and Ho, 2017). Accordingly, role modelling can be expected to impact long-term consumption patterns and practices transmitted from parents to children through established eating norms transferred through the food selections and amounts consumed by parents (Grønhøj and Gram, 2020a; Kharuhayothin and Kerrane, 2018; Larsen *et al.*, 2015).

The existing body of research on parental food role modelling suggests that parents can act as a positive role model for their children on food consumption (Damen *et al.*, 2020c). It has been reported that parental consumption of fruit and vegetables is strongly linked with the consumption patterns of these food by children (Rahill, Kennedy and Kearney, 2020; Chan *et al.*, 2018; Draxten *et al.*, 2015). Walsh *et al.* (2017) argue that the chance of fathers to set the expected example to guide the behaviour of their children was ever-present as children learn by observation and imitation of those around them. Conversely, negative parental role modelling is also a vital predictor of children's dietary patterns and thus, it is significant to take this into

account (Hebestreit *et al.*, 2017; Loth *et al.*, 2016). Scholars have shown that parental role modelling can lead to negative dietary consequences, for instance when the consumption of unhealthy food in the home setting involves soft drinks and sweets and savoury food (Palfreyman, Haycraft and Meyer, 2014; Campbell *et al.*, 2007).

Parental role modelling is frequently conceptualised as a parent's purposeful or intentional effort to indicate healthy food choices and eating behaviours to urge similar behaviours in the child (Lindsay *et al.*, 2020; Vaughn, Martin and Ward, 2018; Watterworth *et al.*, 2017). Nonetheless, a parent might be less considerate and unintentional in these behaviours and their demonstration of healthy or unhealthy food consumption in front of the child (Saltzman *et al.*, 2019; Vaughn *et al.*, 2016). Therefore, with reference to food socialisation, parental role modelling can be a model of healthy eating (Chan *et al.*, 2018), *or* unhealthy eating (Mâsse *et al.*, 2020; Lilo, Muñoz and Cruz, 2019; Palfreyman, Haycraft and Meyer, 2014). In both cases, modelling was consistently shown to be linked with child eating (Rahill, Kennedy and Kearney, 2020; Yee, Lwin and Ho, 2017; Pearson *et al.*, 2009).

Within Saudi Arabia, DeNicola *et al.* (2015) find that young Saudis lack suitable role models for eating styles to balance energy intake and promote a healthy weight. In contrast, it has been argued that parents in Saudi Arabia are the most powerful consumer socialisation agents because they serve as a model for their children on dietary habits (Al-Mohaimeed, 2016). For example, Alturki, Brookes and Davies (2018a, 2018b) identify a direct association between positive weight management and parents who actively adopt healthy food selections in the home in the nation's capital.

2.4.2   Parental Teaching Children about Food

According to Yee, Lwin and Ho (2017) parents' active guidance or education is referred as the ''degree which parents actively discuss, verbally interact, and in- struct

their child with regards to food''(p.6). Numerous studies have documented that parents strive to educate their children to choose and consume healthy food (Grønhøj and Gram, 2020a; Shtulman *et al.*, 2020; Jennings *et al.*, 2019; Marshall, O'Donohoe and Kline, 2007). Mâsse *et al.* (2020), Walsh *et al.* (2017) and Musher-Eizenman *et al.* (2009) suggest that parents aim at a high level of educating their children about food nutrition and elucidating why specific food are healthier than others. Gunther *et al.* (2019) note that parents attempt to instil the value of healthy eating in their children, in the hope that children would make good selections when they themselves were not around.

In order to manage children's unhealthy food requests, parents educate their children about the unhealthy consequences of junk food as a way to teach their children about healthy eating habits, and offer healthier food as an alternative (Mâsse *et al.*, 2020; Raskind *et al.*, 2017; Nepper and Chai, 2016). Sirasa *et al.* (2020), Fielding-Singh (2017) and Russell, Worsley and Campbell (2015) show that parents talk about clarifying good (healthy) food to children by telling them of the advantages of selecting and eating healthy food, for example protection from illnesses. In contrast, Wang, Chen and Yang (2020) claim that parents do not have the time to teach their children about food and they hope that school will educate them about healthy food and drinks. Hence, Nepper and Chai (2016) and Pocock *et al.* (2010) conclude that starting to teach children in early childhood is significant for the advancement of healthier consumption habits.

2.4.3   Food Availability, Restriction, and Control

Parents can directly influence food consumption in the household through food availability. Food availability is referred to the amount and types of food that a parent brings into the home (Vaughn *et al.*, 2016). Litchford, Roskos and Wengreen (2020),

Harris and Ramsey (2015) Soares, de França and Gonçalves (2014) and Neumark-Sztainer *et al.* (2003) report that fruit and vegetable availability in the home has a significant influence on the consumption of these food by children. Moreover, Callender *et al.* (2020), Loth *et al.* (2016), Couch *et al.* (2014) and De Coen *et al.* (2012) conclude that healthy home food availability have been linked to child's nutrition quality. In a review paper, DeCosta *et al.* (2017) find that providing children with free fruits and vegetables has been experimentally revealed to positively influence long-term eating behaviour.

On the contrary, the availability of less healthy food selections in the home has been shown to be a main barrier to selecting fruits and vegetables by children (O'Dea, 2003). Within Saudi context, in a cross-sectional study conducted in Riyadh, Alturki, Brookes and Davies (2018b) show that the level of obesity was strongly linked to freely available fuzzy drinks and/or unhealthy snacks to children at home. They find freely available fuzzy drinks and unhealthy snacks for children gives rise to many unhealthy habits, for example, high consumption of sugary drinks and snacks and high-fat snacks in place of healthy alternates such as milk. Hence, food and drink availability at home, either healthy or/and unhealthy, influences children's behaviour by getting them to internalise such food and drinks for when they grow up (Nawab, Madan and Moitra, 2019; Moore, Wilkie and Desrochers, 2017).

Regarding food restrictions, a number of authors have identified several obstacles that might limit parents' unhealthy food restrictions for their children. In a meta-analysis, Yee, Lwin and Ho (2017) examine age as a moderator for the association between restrictive guidance and children's food consumption. They find that food restrictions were more powerful for decreasing unhealthy food consumption among older children. It is likely that younger children in the pre-operational stage (aged 2 to

6) are less able to follow rules or limits illustrated by parents due to limited self-regulation capabilities (Williams, Gazley and Ashill, 2020; Williams, Ashill and Thirkell, 2016; Gaumer, Arnone and Ashley-Cotleur, 2013; John, 1999).

In addition to age, whereas *mothers'* dietary restraints have been revealed to be related to restricting girls' food consumption in particular (Bouhlal *et al.*, 2015; Birch, 1998), boys are exposed to significant levels of food restrictions by *both* parents (Loth *et al.*, 2014). Another study, by Tschann *et al.* (2015), suggest that fathers' food restrictions may have a continuing effect on children's weight status for both boys and girls. Furthermore, children choose unhealthy food when their parents are not present at home (Marshall, O'Donohoe and Kline, 2007). While controlling practices might lead children to consume more healthy food when they are with their parents, this method has been revealed to reduce children's enjoyment of consuming fruits and vegetables, particularly when their parents are not present (Loth *et al.*, 2016). Hence, different practices are utilised with children in the same family depending on the children's ages and gender, and more or less problematic eating behaviour and health (Watterworth *et al.*, 2017; Alm, Olsen and Honkanen, 2015; Darling and Steinberg, 1993).

With respect to food control, a number of studies have reported parental strategies, including parents controlling the availability of unhealthy food (Durão *et al.*, 2015; Boots *et al.*, 2015). Sano, Routh and Lanigan (2019) demonstrate that parents restrict access to or availability of specific food, for example chips or sweets, ensuring that these food are not as easily available in the home, even if asked for by their children (Holsten *et al.*, 2012). Mâsse *et al.* (2020) suggest that although parents give their children unhealthy food or drinks, they restrict the quantity of such unhealthy food and beverage. Additionally, asking permission was another strategy employed by parents to limit unhealthy food consumption by their children (Marshall, O'Donohoe

and Kline, 2007). Eating healthy food *before* consuming unhealthy food was another strategy (Grønhøj and Gram, 2020a; Mâsse *et al.*, 2020). As a result, control of food availability can teach children what choices to make and when (Sano, Routh and Lanigan, 2019; Yee, Lwin and Ho, 2017).

2.4.4 Encouragement and Reward

The literature on parental food practices highlights that parent employ several strategies to encourage their children to consume healthy food. Firstly, previous research has shown that parents use health reasons or emphasise a child's attention to external cues ("it's good for you") (Sirasa *et al.*, 2020; Walsh *et al.*, 2017; Blissett *et al.*, 2016; Thomas *et al.*, 2014; Tschann *et al.*, 2013; Orrell-valente *et al.*, 2007). For example, Vaughn *et al.* (2016) reveal that parents provide nutritional explanations when they reason with their children about what food to consume (e.g., "You must drink your milk because it is good for your bones"). Similarly, Mâsse *et al.* (2020) show that whereas some parents discourage their children from particular food or beverages by stressing they are not good for them, other parents encourage their children to consume fruits and vegetables that will make them "big", "strong", "healthy", "smart", and/or "attractive". Therefore, applying such reasoning prompts to urge children to consume heathy food may promote the internalisation of consuming healthy food (Edelson, Mokdad and Martin, 2016).

Secondly, Russell, Worsley and Campbell (2015) suggest that parents encourage their children to attempt a new food they believe is healthy for their child. Edelson, Mokdad and Martin (2016) reveal that whilst few children were willing to attempt a new fruit or vegetable without encouragement, a moderate amount of parental emphasis can convince children to try an unfamiliar food. In contrast, while parents' intention when utilising pressure is to encourage adequate nutrient consumption (Yee, Lwin and

Ho, 2017), some studies have claimed that it can have the opposite outcome, leading to lower fruit and vegetable consumption (Watterworth *et al.*, 2017; Parada *et al.*, 2016; Galloway *et al.*, 2006; Fisher *et al.*, 2002). Indeed, some young adults' accounts of forced-consumption incidents in childhood signify some of these food are evaded, even years later (Scaglioni *et al.*, 2018; Batsell Jr *et al.*, 2002).

Thirdly, it has been showed that parental encouragement of child participation in meal preparation is significantly associated with child preference for vegetables (Vollmer and Baietto, 2017). Grønhøj and Gram (2020a) and Russell, Worsley and Campbell (2015) claim that parents involve children in different facets of food choice, including food preparation, in an attempt to encourage the liking of those food. These findings, hence, stress that parents take an active role in their children's food socialisation in terms of food selections while shopping and food preparation.

Finally, data from several studies suggest parents utilise different aspects of reward to encourage children to consume healthy food. Although some parents found stark resistance against using food as a reward (Grønhøj and Gram, 2020a), other studies have found that parents allow unhealthy food to encourage their children to consume healthy food first (Mâsse *et al.*, 2020; Russell, Worsley and Campbell, 2015; Orrell-valente *et al.*, 2007). Lora *et al.* (2016) conclude that parent's use of food as a reward, or to calm the child was related to raising the total consumption of sugar-sweetened beverages in Hispanic preschool children, but not in African-American children of the same age. Accordingly, as unhealthy food like sweet snacks are most frequently used as a reward product, this practice tends to enhance preferences for unhealthy food (Birch and Fisher, 1998).

In addition to food rewards, several nutrition publications have shown that parents sometimes used non-food-based incentives such as stickers or playtime to

encourage children to consume healthy food (Roberts, Marx and Musher-Eizenman, 2018; Touyz *et al.*, 2018; Cravener *et al.*, 2015; Holley, Haycraft and Farrow, 2015; Orrell-valente *et al.*, 2007; Savage, Fisher and Birch, 2007). The major conclusion of these studies is that non-food-based incentives rewards can effectively enhance children's consumption of fruit and vegetables. However, Yee, Lwin and Ho (2017) argue that if consuming healthy food is the only way a child can get to play outside, the child may see it as a routine, and consequently develop negative mental relations, feelings, and cognitions about certain food types.

Taken together, in evaluating the studies discussed above (section 2.4) on parents as key agents of socialisation and their roles/responsibilities for the food choices for their children, a number of serious limitations occur. First, given fathers' crucial role in what children learn, there is some agreement on the influence of parents as role models regarding (un)unhealthy food choices for their children (Chan *et al.*, 2018; Walsh *et al.*, 2017; Draxten *et al.*, 2015; Palfreyman, Haycraft and Meyer, 2014; Holsten *et al.*, 2012). Nevertheless, little if any empirical research has investigated how fathers serve as role models, intentionally and not, and the extent to which unintended impacts - either positive or negative - have a tendency to occur (Moore, Wilkie and Desrochers, 2017).

Second, previous studies have suggested that families choosing food are seen as an action that parents might communicate with their children (Gram, 2015; Haselhoff, Faupel and Holzmuller, 2014; Keller and Ruus, 2014; O'Connell and Brannen, 2014; Gaumer and Arnone, 2009; O'Dougherty, Story and Stang, 2006; Roberts, 2006). However, the concept of teaching children about food is currently underdeveloped and understudied and therefore there remains a poor of understanding of how parents' active verbal discussions with children apply in the food consumption situation (Yee,

Lwin and Ho, 2017). Menendez *et al.* (2020) have called for further exploration of how parent-child discussions about nutrition impact food choices occur. Yet there remains scant research on how fathers in Saudi Arabia see their roles and responsibilities in communicating food choices to their children. For example, are they the facilitators of communication; what types of conversation do they promote when choosing food; how do they experience their children's responses to their communication and teaching of (un)healthy food socialisation?

Third, prior research has shown that restricting and/or banning unhealthy is seen as one role parents assume when they manage food for their offspring (Grønhøj and Gram, 2020a; Mâsse *et al.*, 2020; Yee, Lwin and Ho, 2017; Watterworth *et al.*, 2017). However, there is no clear evidence as to how *fathers* deal with children in terms of the gender and age for restricting and/or banning unhealthy food choices for their children.

Therefore, Grønhøj and Gram (2020) have called for additional research to understand fathers' food practices as socialising influences on the selections of food for their children. Specifically, it is essential to broaden our understanding of how fathers as consumer socialisation agents in Saudi Arabia view their roles and responsibilities regarding food choices for their children given their outsized role in choosing them. This exploratory qualitative research aims to expand the limited existing research regarding fathers' roles and responsibilities when they are deciding to select food for their children.

2.5   Consumer Socialisation Theory

Ward (1974) initiated the term consumer socialisation. He was also the first to identify its domains in children's consumer socialisation behaviour. Most researchers' studies into consumer socialisation behaviour of the children are dependent on Ward's (1974) definition. Ward (1974, p.2) defines consumer socialisation as *"the process by which*

young people acquire skills, knowledge, and attitude relevant to their effective functioning as consumers in the marketplace." This doctoral study will use the definition proposed by Ward (1974). This definition reflects the learning process of children's attainment of direct and indirect skills and places a good deal of stress on logical action, cognitive constancy, rational and a utilitarian style of information achievement and outcomes (Ward and Wackman, 1974).

Furthermore, Ward (1974) highlights that consumer socialisation involves skills, knowledge, norms, and attitudes that are directly or indirectly associated with the consumption behaviour of children that allows them to play a consumer role in the marketplace. Ward (1974) indicated that direct consumer skills to the content of consumption, for example, product and brand knowledge, shopping knowledge and skills, decision making, product evaluation, and purchase influence and negotiation strategies. Indirect skills, in contrast, are those connected to attitudes and social motivations occurring from non-consumer roles that impact children's consumer behaviours.

Consumer socialisation theorists such as John (1999) highlight that interest in consumer socialisation theory dates back to the 1950s, with the work of a small number of isolated studies on topics such as brand loyalty (Guest, 1944). Although the scope of inquiry and empirical research extended during the 1960s, it was the flurry of research activity in the 1970s which raised the visibility of the child as a consumer in the marketing field (Mikeska, Harrison and Carlson, 2017; John, 1999). In addition, the 1970s to 1980s signified a period of public concern over the contentious effects of advertising aimed at children, its ethical implications and a concomitant need for regulation. For instance, whether children could express the alteration between commercials and normal television programming was researched (Macklin, 1985;

Butter *et al.*, 1981). Scholars also investigated whether children understood the intentions of advertisements and the symbolic value of the products and services being advertised (Moschis, 1985; Belk *et al.*, 1984). The knowledge contribution in the area of consumption research at that time derived predominantly from cognitive psychology. Scholars were concerned with stages of cognitive development and individuals' capacity for processing information (John, 1999). Since that time there has been a proliferation of research in this area (Mikeska *et al.*, 2017).

Another group of consumer socialisation theorists shifted the focus from children to adults by investigating intergenerational influence in the family (Shah and Mittal, 1997). Scholars have paid considerable attention to how brand and product preference, buying styles, and food expenditures might transfer from one generation to the next (Kharuhayothin and Kerrane, 2018; Rhodes *et al.*, 2016; Reale and Castilhos, 2015; Ogle, Hyllegard and Yan, 2014; Moore, Wilkie and Lutz, 2002). These scholars asserted that looking exclusively at parents' impact on children, as in Ward's concept of socialisation, was too restrictive and needed to be widened given that these children became adults and continued to be influenced by their parents in numerous behaviours and, reciprocally, influenced them (Moreira, Casotti and Campos, 2018).

Consumer socialisation theory is rooted in social learning theory (Bandura, 1977b). As noted earlier, consumer socialisation theory concentrates on social learning processes concerning how individuals function in their surrounding environment (Moschis and Churchill, 1978). Social learning theory underlines the role of the external environment, for example, the family, on shaping children's attitudes and behaviour through interaction processes (Tu, 2000; John, 1999). According to social learning theory, people can learn within a social context (Bandura, 1986, 1977b). Hence, human behaviours be influenced through observation and through direct

experience (Tu, 2000).

In addition, the chief principle of social learning theory states that children can learn their attitudes, motivations, and values through modelling, reinforcement, and social interaction from socialisation agents (Pratt *et al.*, 2010; Chan and McNeal, 2006; Monti *et al.*, 2002). Modelling includes imitation of and engagement with the agent's behaviour after the observation of similar behaviour in others. Reinforcement is defined as the balance of expected or actual rewards and punishments that follow or are outcomes of behaviour (Akers, 2017; Pratt *et al.*, 2010). In the context of food consumption, parents usually provide food for their children. It appears clear that parental attitudes to food will influence their children's attitudes to them (Pettigrew *et al.*, 2015a, 2015b; Scaglioni, Salvioni and Galimberti, 2008; Brown and Ogden, 2004). Furthermore, children learn what to choose and eat by observing their parents' choices and eating habits as they grow (Kharuhayothin and Kerrane, 2018). In this regard, the parents act as food choice role models (Russell, Worsley and Campbell, 2015). Observing parents getting rewarded by enjoying specific food, children learn to imitate these food preferences as they expect to receive similar rewards by doing so (Edelson, Mokdad and Martin, 2016; Adamo and Brett, 2014). Accordingly, it is argued that social learning theory suggests the more interaction there is between the socialising agents and the individuals, the more likely it is that learning will take place (Akers, 2017; Paroche *et al.*, 2017; Chan and McNeal, 2006).

The consumer socialisation approach proposes that consumption is educated through social interaction with external sources, normally described as socialisation agents (Chan and McNeal, 2006). Consumer socialisation agents can be defined as particular sources from which new consumer knowledge is transmitted to the learner through active or passive communication of certain expectations and behavioural

patterns (Chan and McNeal, 2006; Moore and Moschis, 1978). In addition to this, consumer socialisation scholars have identified three main types of consumer socialisation agents: 1) the traditional agents (family, peers, and school); 2) professional agents (marketing managers and communication agencies); 3) and virtual agents (web communities and social networking websites) (Marshall, 2010; Ward, Klees and Robertson, 1987; Moore and Moschis, 1978).

While parents impact the behaviour of the child through direct education in consumer skills, indirect influence can occur via the child's observation and modelling of parental consumer behaviour (Moschis, 1985). Ward, Wackman and Wartella (1977) argue that the parents can play three further roles in consumer socialisation and information processing. Firstly, as an indirect influence on enhancing consumer skills by directly influencing cognitive abilities. Secondly, as a direct influence by encouraging the child to use available cognitive abilities in consumer situations. Thirdly, as a direct influence on educating consumer skills, which are unconnected to cognitive ability. Hence, it has been acknowledged that parental oversight plays a vital role in instilling in young people the essential features of consumption (Kiefner-Burmeister *et al.*, 2014; Smathers *et al.*, 2014; Cowell, 2001).

According to Hughner and Maher (2006), parents play a pivotal role in shaping their children's food socialisation process. Previous research suggests that food socialisation begins during our childhood years, fostering the formation of consumption practices which endure throughout our lifetime (Scott and Vallen, 2019; Kharuhayothin and Kerrane, 2018; Block *et al.*, 2011; Ward, 1974). From one perspective, according to Block *et al.* (2011), food socialisation might occur through explicit means such as purposeful training by socialisation agents, for example, parents may restrict consumption of specific food. The methods used may be indicative of parental style

(Lucas-Thompson *et al.*, 2017). It is argued that parents frequently attempt to impart food-related knowledge to children using purposeful and direct methods (Wardle, 1995). A study conducted by Marshall, O'Donohoe and Kline (2007) reveal that children's accounts of snacking showed the extent to which their actual consumption was formed by parental outlines and concerns. The study also found that despite the children being attracted to less healthy snack food, fruit and vegetables were encompassed in their categorisation and repertoire of snacks, perhaps reflecting the level of monitoring and gatekeeping applied by their parents. Parents also recognised the ground guidelines for snacking and in various cases directly controlled their children's access to snack food. Nevertheless, such efforts may not always yield the desired outcomes. For instance, Yee, Lwin and Ho (2017) show that parental restrictive guidance is linked with higher consumption of unhealthy food amongst children.

From another perspective, however, parents use implicit methods to socialise their children about food. Evidence supports the effectiveness of such socialisation approaches. For example, Russell, Worsley and Campbell (2015) demonstrate that the strength of the presence of parents led their children to make healthy food preferences and choices. From both perspectives, accordingly, parents affect their children's food choices in three ways: firstly, by making particular food available; secondly, by acting as role models for their children; and, thirdly, by their behaviour in specific conditions (Yee, Lwin and Ho, 2017; Ohly *et al.*, 2013).

According to John (1999) and (Ward, 1974), consumer socialisation theory provides a helpful point of departure when considering parents' role in transferring healthy consumption habits to a young child. Food socialisation is referred to as "*the process by which parents' preferences, beliefs, and attitudes toward food shape their children's food-related beliefs, attitudes, knowledge, preferences, and consumption,*

which in turn influence eating behaviours" (Nicklas *et al.*, 2009, p.227). Moore, Wilkie and Desrochers (2017), in their evaluation of studies on parental roles in the epidemic of childhood obesity, indicat that most if not all studies had been conducted in other arenas of consumer behaviour research. These domains are paediatric medicine, public health, nutrition, developmental psychology, family studies, genetics, and physiology. Indeed, the studies are bereft of theoretically-driven research into parental practices on child food consumption and food choices in particular. Yee, Lwin and Ho (2017) argue that it is hard to determine the pathways of how specific parental practices are influencing child food consumption behaviour. Thus, it appears that the current understanding of parental communication practices on children food consumption is incomplete (Yee, Lwin and Ho, 2017).

Therefore, studies based on theory provide associations between research findings and practice, and well-defined constructs permit better interpretations and comparisons among studies (LoBiondo-Wood and Haber, 2017). Moore, Wilkie and Desrochers (2017) and Tarabashkina, Quester and Crouch (2016) call for more research about the family's role in childhood obesity, specifically family food consumption as a consumer socialisation process. Accordingly, this doctoral research builds on consumer socialisation theory as it relates to socialisation agents (Minahan and Huddleston, 2010; John, 1999).

Previous research on family consumer socialisation has been considered to explore adult-initiated behaviours, mainly through documenting the socialisation actions of parents within the family environment (Kerrane and Hogg, 2013). It has been reported that two aspects of parental socialisation behaviour have consistently appeared in current research on family consumer socialisation, namely, family communication patterns (Moschis, 1985) and parental style (Mikeska, Harrison and Carlson, 2017;

Carlson and Grossbart, 1988). Several authors have demonstrated that these two types of parental socialisation behaviour seem to be important in conveying socialisation behaviours to children (Kerrane, Bettany and Kerrane, 2015; Pedersen, Grønhøj and Bech-Larsen, 2012).

First, family communication patterns refer to the frequency, type, and quality of communication that takes place amongst family members (Carlson *et al.*, 1994; Moschis, 1985) and how parents discuss consumption-related issues with their children, thereby affecting their ability to obtain consumption-related information (Mandrik, Fern and Bao, 2005). Chaplin and John (2007) and Palan (1998) have argued that the quality of the consumption-related communication that takes place between parents and children had been shown to be positively linked to the consumer activity of children, directly affecting their acquisition of consumer skills and knowledge as well as their engagement in family decision-making.

Family communication patterns have been identified with two dimensions of communication patterns, specifically, concept-oriented (conversation-oriented) and socio-oriented (compliance-oriented) (Moschis, Moore and Smith, 1984). *Concept-oriented* communication is emphasised in open discussion where there are opportunities for children to express their opinions, whereas *socio-oriented* communication refers to the importance of obedience to parental authority (Buijzen and Valkenburg, 2005). Parental impact is probably mediated by the type of communication environment in the household (Wang, Roaché and Pusateri, 2018; Gentile *et al.*, 2012; Kim, Lee and Tomiuk, 2009; Bakir, Rose and Shoham, 2006; Caruana and Vassallo, 2003; Rose, Bush and Kahle, 1998; Carlson, Grossbart and Walsh, 1990). Accordingly, Buijzen (2009) and Hughner and Maher (2006) emphasise that family communication patterns tend to form discussions which concentrate on food, thereby having the possibility to

influence children's food socialisation.

Second, studies concur that parents' differential socialisation endeavours can be described in a theoretical framework which defines parents by how they differentially raise and communicate with their children (Carlson, Laczniak and Walsh, 2001; Carlson and Grossbart, 1988; Baumrind, 1980) as well as determines the quality of their children's socialisation experiences (Bao, Fern and Sheng, 2007). It is argued that parental style can be an indicator of alterations demonstrated by parents in the socialisation process (Crosby and Grossbart, 1984).

Parents might be classified into two parenting socialisation dimensions, i.e. restrictiveness and warmth. These are combined with the following styles that describe parenting orientations: authoritative, authoritarian, indulgent, and neglecting (Carlson, Laczniak and Wertley, 2011 based on Baumrind, 1991). *Authoritative* parenting entails both restrictive and warm interactions with children (Carlson, Laczniak and Walsh, 2001). These parents will likely balance children's rights and responsibilities, endeavour to enhance their children's educational and cultural opportunities, as well as encourage self-expression (Carlson, Laczniak and Walsh, 2001). Therefore, although authoritative parents will allow a certain degree of autonomy, they have a propensity to expect children to act maturely and consistently with family rules (Mikeska *et al.*, 2017). This contrasts somewhat with *authoritarian* parents who are described as having more hostile and restrictive dispositions, to the effect that their children have fewer rights (although they might be given responsibilities typically reserved for adults) (Carlson and Grossbart, 1988). On the other hand, *permissive* parents are defined as lenient, accepting, affirmative, and non-punitive in dealings with their offspring (Walsh, Laczniak and Carlson, 1998). Even if the relationship between parents and their children tends to be warmer and more permissive, these parents give their children

rights but without concomitant responsibilities (Carlson and Grossbart, 1988). *Neglecting* parents are explained as being permissive while at the same time showing more hostility towards their children (Carlson and Grossbart, 1988). Consequently, communication between neglecting parents and their children tends to be commonly strained and reduced (Mikeska, Harrison and Carlson, 2017).

According to Birch and Fisher (1995), parents' food socialisation commonly draws on three possible feeding styles: authoritarian, permissive, and authoritative. An authoritarian feeding style is when parents endeavour to control the eating practices of their children, taking little or no communal deliberation over their children's food preferences (Blissett and Haycraft, 2008). Behaviours of this feeding style comprise forcing a child to consume specific foods while restricting the consumption of others (Scaglioni *et al.*, 2018; Johnson, 2016). Conversely, a permissive feeding style refers to children who are allowed to indulge themselves regarding foods that are bought and consumed (Johnson, 2016). Finally, parents adopting an authoritative feeding style have a tendency to encourage their children to consume healthy foods whilst allowing them some selections in their eating choices (Horodynski *et al.*, 2018). Authoritative methods to feeding involve balancing the parents' concern for the nutritional quality of their children's diet with their children's food preferences (Scaglioni *et al.*, 2018).

There is a body of literature documenting a link between parental feeding styles and the influence of parents' food socialisation practices. Parents who are likely to employ authoritative feeding strategies, e.g. the use of reasoning and food rewards to promote healthy eating among their children, are more strongly associated with higher fruit and vegetable consumption rates (Edelson, Mokdad and Martin, 2016; Orrell-valente *et al.*, 2007). On the contrary, prenatal feeding styles that are uninvolved, overly rigid, or permissive are all linked with poor vegetable acceptance by young children

and are thus related to the lowest vegetable intake (Murashima *et al.*, 2012). Negative feeding practices that have been connected with lower vegetable intake involve the use of contingencies such as the following: rewards of desired foods for eating less desired vegetables (Roberts, Marx and Musher-Eizenman, 2018; Kiefner-Burmeister *et al.*, 2014; Rigal *et al.*, 2012), pressure to eat (Durão *et al.*, 2015; Rigal *et al.*, 2012; Gregory, Paxton and Brozovic, 2011; Blissett and Haycraft, 2008), and catering to children's demands for foods (Rigal *et al.*, 2012; Blissett, 2011). Judd *et al.* (2014) and Hoerr *et al.* (2009) suggest that the adoption of a permissive feeding style is associated with low rates of fruit and vegetable socialisation practices within the home. Therefore, qualitative research insights into the ways that parents apply feeding practice approaches within the context of food socialisation processes are still very much lacking within the current literature (Judd *et al.*, 2014).

The cognitive developmental approach seeks to explain the formation of consumer knowledge, skills and behaviours as a function of qualitative changes in the stages of cognitive development (Piaget, 1964). This theory also suggests that a child is an active investigator who acts upon his or her environment with reflex responses throughout infancy and then with more complicated responses that arise from earlier interactions (Piaget, 1964). Roedder, Didow and Calder (1978) argued that cognitive development theory views children as searchers seeking to understand their environment, as opposed to decision-makers. Piaget (1964) suggested that children's cognitive development can be divided into four different stages: sensorimotor stage (from birth to two years); pre-operational stage (2-7 years); concrete operational stage (7-11 years); and formal operation stage (11-16 years).

In her review of children's consumer socialisation behaviour covering the years from 1974 to 1998, John (1999) re-examined children's consumer socialisation

behaviour and developed a three-stage consumer socialisation model for children to explore the changes in their thinking, attitudes, and behaviours as consumers. Her model is primarily based on the cognitive development theory, social development theory, and information processing theory. John's model proposes that children move through three stages of consumer socialisation, namely: (1) a perceptual stage (three to seven years) typified by immediate and straightforward perceptions in relation to consumption; (2) an analytical stage (7–11 years) during which children's thoughts undergo a transformation from being perceptual, unidimensional, and concrete to symbolic, multidimensional, and abstract; and (3) a reflective stage (11–16 years), characterised by increasing sophistication, reflection, and reasoning in terms of information processing, social skills, and knowledge about marketing, branding, and pricing. In the perceptual stage, children show an egocentric orientation. They are unable to take into account the other person's perspective, and their decisions are made based on a single perceptual feature of the marketplace, such as size. The analytical stage shows a more sophisticated understanding of the marketplace. Unlike the perceptual stage, this stage shows a discriminated analysis of products and brands based on functional features, usually by considering more than a single attribute. In this stage, children are also more flexible in terms of making decisions and are no longer driven solely by their perceptions. The reflective stage corresponds to a more thoughtful way of thinking and reasoning. Children are able to develop more sophisticated information processing and social skills, giving more attention to the social aspects of being a consumer, and adapting their decisions according to the situation and task. The content of learning consumer skills is expected to form and change as a consequence of such maturation (Lourenço, 2016; Barrouillet, 2015; Marshal, Chuan and Bong, 2002; John, 1999; Roedder, Didow and Calder, 1978; Calder, Robertson and Rossiter, 1975).

Therefore, Williams, Ashill and Thirkell (2016) conclude that the perceived value among children is an important concept in consumer decision-making, comprising benefits and sacrifices. However, the nature of these factors and the way they contribute to value perception varies in a domain-specific manner as children get older.

2.6   Consumer Socialisation and Culture

According to Kim, Yang and Lee (2009) and Rose (1999) consumer socialisation is an intrinsically cultural process in which children, through insight, training and imitation, are acquired the habits and values congruent with adaptation to their culture. Accordingly, parental socialisation processes are likely to have a variable influence on dissimilar cultures. It has been found that Japanese mothers restrict their children's consumption, allow less consumption autonomy, and report high levels of child impact (Rose, 1999). On the other hand, American mothers have high levels of communication about consumption and permit their children more consumption independence than do Japanese mothers. Hence, the literature has indicated that the likely antecedent of such relative influence is culture.

In addition to this, culture seems to determine the relative role of individual consumer socialisation agents (Kerrane, Bettany and Kerrane, 2015; Moore *et al.*, 2002) and processes (Rose, 1999) versus one another. Hota and McGuiggan (2005) note that culture is one of the variables that structure the social setting in which children learn to become consumers. Understanding the alterations between cultures might offer an opportunity to advance a better understanding of the socialising impact of factors such as family (Pedersen, Grønhøj and Bech-Larsen, 2012).

Most studies in the field of consumer socialisation processes have been conducted in the west (Ghouse, Chaudhary and Durrah, 2019; Kaur and Singh, 2006) and hence there is a strong need to study consumer socialisation in other cultures (Yang

et al., 2014; Kim, Yang and Lee, 2009; Brusdal, 2007). Dwairy *et al.* (2006) argue that culture is a robust factor in structuring parental practices because it can transmit guidelines about parenting, and thus about socialisation. In terms of food consumption, the broader cultural context of food instilled in parents is now being transmitted to their offspring through the socialisation process (Moore, Wilkie and Desrochers, 2017). This impacts the food a child learns to prefer and the communication of norms about consumption itself. A study from Belgium and Italy showed that parents have a tight grip on their food children consumption and educating the families to adopt more strict food rules (Verzeletti *et al.*, 2010).

There are many differences regarding parenting styles in Arab countries. Parenting styles in traditional countries such as Saudi Arabia are more authoritarian than that of relatively modern countries such as Lebanon and Jordan (Dwairy *et al.*, 2006). Arab children consider authoritarian style as the normal behaviour of parents (Dwairy and Achoui, 2010). Arab children are more receptive to this parenting style (Hatab and Makki, 1978). Children in Arab countries do not complain about indecent aggressive behaviour. Conversely, Ramzy *et al.* (2012) found that Egyptian children are more influential on parents' purchase decisions of non-durable such as soft drink. Although parents are the strongest consumer socialisation agents for children (Ghouse, Chaudhary and Durrah, 2019; Chaudhary, Durrah and Ghouse, 2018), Omani children use persuasion strategy more frequently and use aggressive strategy least often to pester their parents for their requests (Chaudhary, Durrah and Ghouse, 2018).

As an Islamic state, Saudi Arabia's social, political, and economic aspects are largely aligned to male-oriented living (Nassif and Gunter, 2008). Despite radical changes in the world in the recent past accommodating both genders in society (Mcdowell, 2014), Saudi Arabia still lags behind, upholding traditional and cultural

perspectives which show the male holds a higher status in society (Lefdahl-Davis and Perrone-Mcgovern, 2015). These cultural perspectives are also reflected in the family setting, inclusive of the structures and views held by the family members, especially towards elders, fathers in particular (Al Alhareth, Al Alhareth and Al Dighrir, 2015; Mcdowell, 2014). In Saudi Arabia, males influence most of the decisions regarding family activities and lifestyle, including food choices, because social and religious beliefs regard these as superior due to their masculinity. Alturki, Brookes and Davies (2018a) show that children in Saudi Arabia, in the absence of parental monitoring, tended to select fast-food choices with considerably higher energy and sugar content. Mosli *et al.* (2019) find that Saudi mothers might be more prone to follow indulgent feeding practices, with none of the mothers reporting the use of threats and punishment in feeding their children in the Saudi city of Jeddah.

Saudi Arabia is a conservative society and the role of the Saudi father as a consumer socialisation agent in feeding their family stems from Islamic law. The official criminal law – the Sharia - in Saudi Arabia is derived from the "Quran", and the government is regarded as legitimate to the extent that it "derives power from the holy Quran and the Prophet's tradition" (Fox, 2008, p.227). Regarding Islamic law, it is a widely held view that protection and full care of children are the duty of the father in either marriage or divorce. Fathers must be the breadwinner for the children, as well as taking responsibility for education, finding a house, discipline, medication, clothing, and food and drink consumption. As cited in the Quran:

> *Mothers may breastfeed their children two complete years for whoever wishes to complete the nursing [period]. Upon which the father is the mothers' provision and their clothing according to what is acceptable.* (Al-Baqarah: 37).

This raises interesting questions on Saudi Arabian fathers as a consumer socialisation agent influencing the (un)healthy food consumption of their children. With

the application of consumer socialisation theory, I was also able to: (1) explore how and why Saudi fathers make healthy and (un)healthy food choices for their children, with reference to growing problem of obesity in Saudi Arabia; and (2) explore how fathers in Saudi Arabia perceive their roles and responsibilities as socialisation agents for the food they choose for their children.

2.7   Conclusion

The purpose of this critical literature review has been to elaborate in detail on the existing knowledge in the field and to provide a more in-depth understanding of parents as key agents of food socialisation. The review has revealed that parents play an important role in shaping food socialisation and that children have unlimited learning opportunities encompassing food consumption from store to table. The conceptual framework shown in Figure 2.1 provides an overview of the three central themes identified through the literature review and discussed throughout this chapter. Firstly, the literature review revealed the salient sub-themes of parents as key agents of socialisation and co-shopping which have particular relevance for understanding parents and children's involvement in food shopping and children's strategies to influence parents on food trips. It is clear that previous research has focused on parent-child interaction in food stores from the family decision making research standpoint. My critical review of this evidence highlights a cultural and parental narrowness in the majority of studies. There are limited studies examining fathers as socialisation agents for the (un)healthy food consumption of their children. This is further compounded by the small number of studies in a non-western context. This is problematic for nations with a male-based hierarchy who have a growing obesity problem among their children, such as Saudi Arabia. Therefore, the focus of this doctorate is warranted in exploring how Saudi fathers act as consumer socialisation agents in making healthy and

(un)healthy food choices for their children.

Secondly, extensive evidence has been accumulated about the factors influencing parents' as key agents of socialisation in their children's food choices, involving: physiological, parent's nutritional knowledge and beliefs, and social, economic, cultural and religious, and marketing factors. How these factors differ may well be culturally contextual. The reviewed literature has shown that a small number of studies has conducted such research in the Arab context, including Saudi Arabia. Moreover, what studies exist have failed to address the role and impact that *fathers*, specifically, have in food socialisation. Thus, more research is needed to explore factors that influence Saudi fathers as key agents of socialisation making food choices for their children with reference to healthy food and the issue of obesity.

Thirdly, the review has shown that the roles and responsibilities of parents as key agents of socialisation regarding the food they choose for their children can be found in parental practices. Theses parental food practices are: parental role modelling, parental teaching about food, food availability, restricting and controlling, and food encouraging and rewarding. Although there is some agreement on the impact parents have on these food practices regarding the food they choose for their children, the literature suggests this factor remains under-researched, especially in the Saudi Arabian context. This finding confirms the need for an exploratory study of how fathers in Saudi Arabia perceive their roles and responsibilities as consumer socialisation agents for the food they choose for their children.

The overall contexts within which the research took place are (un)healthy food consumption and the obesity problem in Saudi Arabian culture. The conceptual framework operates under the umbrella of consumer socialisation theory. As a result, my research synthesises different bodies of literature to provide momentum for its main

contribution to knowledge. My doctoral thesis now moves to Chapter Three, which discusses the research methodology adopted to accomplish the aims and objectives of my research.

3 Chapter Three: Methodology

3.1 Introduction

This chapter provides a comprehensive explanation of the research design of this study, and the rationale for choosing it. It begins with the research aims and objectives, and the research philosophy that underpins them. This is followed by a detailed account of the data collection tools and analysis processes. The chapter concludes with a discussion on the transferability, credibility, dependability, and confirmability of the research study. The chapter ends by highlighting the methodological limitations of the study.

3.2 Research Methodology

3.2.1 Research Aims and Objectives

The aim of this doctoral study is two-fold:

1. To explore the role of the male heads of the family – fathers – as key agents of socialisation who influence their children's (un)healthy food consumption in the culturally distinctive nation of Saudi Arabia.

2. To identify salient issues from the data to inform more efficacious healthy food marketing policy to address the obesity problem in Saudi Arabia.

In order to achieve the study aims, the following specific objectives are identified:

a. To critically review the literature on consumer socialisation theory and family food choices.

b. To explore how and why Saudi fathers make (un)healthy food choices for their children, and the implications for the child obesity problem in Saudi Arabia.

c. To explore how fathers in Saudi Arabia perceive their roles and responsibilities as socialisation agents for the food they choose for their children.

d. To contribute to consumer socialisation theory on male heads of family as key socialisation agents on their children's food consumption within the cultural context of Saudi Arabia.

e. To identify the salient issues from the data to inform a more efficacious healthy food marketing policy to address the child obesity problem in Saudi Arabia.

3.2.2 Research Philosophy

It is vital for researchers to acknowledge and understand their personal paradigm at different levels (Karnieli-Miller, Strier and Pessach, 2009). For example, philosophical:- researchers' basic beliefs about the world; social: how researchers conduct themselves when collecting data and the methods and techniques researchers apply when conducting their study (Collis and Hussey, 2014; Morgan, 1979). The two chief philosophical dimensions to differentiate current research paradigms are ontology and epistemology (Biedenbach and Müller, 2011; Williams, 2008). Wahyuni (2012) argues that the two research paradigms - ontology and epistemology - relate to the nature of knowledge and the development of that knowledge, respectively.

According to Gray (2018), ontology is the study of the nature of existence. It raises fundamental questions about the nature of reality and the nature of human beings in the world (Denzin and Lincoln, 2017; Wahyuni, 2012). The ontological assumption of the present research is that multiple realities exist. Realities exist "in the form of multiple constructions, socially and experientially based, local and specific, dependent for their form and content on the persons who hold them." (Guba, 1990, p.27). Specifically, there are multiple realities that are bound by the time, context, and the people who believe them (Morrison *et al.*, 2012; Foxall, 1995). Conducting research with respect to food socialisation, I argue for a constructivist ontological position, where reality and truth are created jointly by the subjects (in this case fathers) and the

researcher. Perceptions of food socialisation differ by person and can only be determined by that person (Levy, 2005). Moreover, contexts provide meaning and construct realities and consequently it is crucial to understand the context or situation in which behaviour occurs so as to be able to understand that behaviour. Following Easterby-Smith, Thorpe and Jackson's (2012) advice, taking this approach allows me to enhance my understanding of the entirety of the phenomena, to gather rich data, and to generate a number of ideas. Hence, the chief purpose of my research exploration is to reveal the subjective, socially constructed, and context-bound realities with respect to the life-worlds of fathers as key agents of socialisation who influence their children's (un)healthy food consumption in Saudi Arabia.

Epistemology involves the nature and origin of knowledge and asks how we know what we know (Tronvoll *et al.*, 2011). My research takes the epistemological stance of constructivism. Constructivism proposes that fact and meaning are made by subjects' interactions with the world (Gray, 2018). In particular, constructivists view the notion of meaning to be essential to human behavior. Human interaction with the world is mediated through the process of meaning-making and interpretation (Paulus, Woodside and Ziegler, 2010). Any endeavour to understand social reality has to be grounded in an individual's experience of that social reality (Healy and Perry, 2000). Therefore, following the advice from Creswell and Creswell (2017), the primary task of my research exploration is to uncover the meaning attributions and experiences of Saudi Arabian fathers within the context of their daily influence on their children's (un)healthy food consumption. With the reasoning for this choice in mind, the research approach is now discussed.

3.2.2.1 Research Approach

The methodology for this research is outlined within the philosophy of interpretivism. Burrell and Morgan (2016) explain the interpretive paradigm as a tradition that is rooted in a concern to understand the world as it is and to recognise the essential nature of the social world at the level of subjective experience. Hackley (2020) elaborated on this by demonstrating that interpretive research is classified by the "rich" explanation of social phenomena. Specifically, interpretive research concentrates on a social context and dealing with the complexity of social worlds instead of trying to generalise the outcomes across dissimilar groups and surroundings (Szmigin and Foxall, 2000). Moreover, Woodruffe-Burton and Wakenshaw (2011) stated that an interpretive approach to research is conducted with *understanding* instead of *quantifying* as the fundamental objective.

Scholars such as Hughner and Maher (2006) have called for qualitative methods such as interviews in order to answer the remaining questions and to entirely understand the food choices made by parents on behalf of their children. Responding to the call, this study has chosen an interpretive approach in order to allow for important themes to emerge, and these themes were then used to contribute to the theory of consumer socialisation and food consumption. More specifically, this approach will allow my study to grasp the subjective meanings of the phenomenon by accounting for (1) how fathers make food choices, (2) the factors that might influence them when deciding to choose and consume food , and (3) how they perceive themselves in terms of their roles and responsibilities as consumer socialisation agents for the food they choose for their children.

By recruiting 180 parents, Hughner and Maher (2006), examined parental attitudes and purchase behaviours of specific types of children's food items in order to understand the role parents play in their children's dietary habits. This study focused on

establishing casual relationships and generalised patterns of parental behaviours and attitudes towards food choices for their children.

Another study, by Russell, Worsley and Liem (2015), examined 371 parents' motives for choosing food for their children and the associations between these motives and their children's food preferences. Oellingrath, Hersleth and Svendsen (2013) examined the relationship between parental food selection motives and consumption patterns of 12- to 13-year-old children. These studies examined parental food choices applying a quantitative approach such as Food Choice Questionnaires (FCQ) (Steptoe, Pollard and Wardle, 1995a). Similar to Hughner and Maher (2006), these studies clearly seek to enquire about the casual relationships.

However, my research focused on meaning and experience with reference to the role of fathers as key agents of socialisation who influence their children's (un)healthy food consumption.

Table 3.1 presents the details of three key interpretive studies I used to help develop my methodological approach. The studies selected focus on consumer socialisation research. The studies also focused on some key issues I discuss in my research, such as family consumption of (un)healthy food for their children.

Table 3.1 Summary of previous studies using the interpretive approach and food socialisation

Reference	Country	Study approach	Number of participants	Data collection tools
Judd *et al.* (2014)	Australia	Interpretive	38	In-depth interviews
Kharuhayothin and Kerrane (2018)	UK	Interpretive	30 parents	1 – Interviews 2 - Photo elicitation techniques /a (food) diary keeping task, 3 - Accompanied grocery shopping trips
Grønhøj and Gram (2020)	Denmark	Interpretive	11 families	In-depth interviews

A study by Judd *et al.* (2014) explored how the lived experiences of parents' impact and form their food socialisation efforts. Particularly, the study concentration is placed on parents living in low socioeconomic status surroundings. As these individuals experience an extraordinary constellation of factors that are possible of shaping or constraining their efforts to socialise their offspring to consume fruit and vegetables. In addition to parents, the researchers employed allied healthcare specialists, community leaders, community programme leaders, and a local government leader living or working in two low socioeconomic suburbs. The study was considered to be flexible and permitted the participants to discuss in depth detail their views, feelings and behaviour concerning the factors exogenous and endogenous to the family unit that formed parental food socialisation practices.

Another study, by Kharuhayothin and Kerrane (2018), explored how intergenerational reflexivity helps notify parental food socialisation practices. Through intergenerational reflexivity, parents are found to make a aware effort to either "sustain" or "disregard" specifically food practices learnt from the earlier generation with their children (abandoning or mimicking the behaviours of their own parents within the context of food socialisation).

More recently, the study by Grønhøj and Gram (2020) demonstrated the value of open-ended questions to research parents food‐related consumer socialisation processes. This facilitated exploration of interpersonal, social, cultural, economic and structural factors, and the societal impacts. Furthermore, it enabled exploration and evaluation of the interplay between the family as a consuming unit and as an institution

My research adopted a similar approach by focusing on exploring fathers as key agents of socialisation influencing the (un)healthy food consumption of their children in Saudi Arabia. Like Kharuhayothin and Kerrane's (2018) study, by using three methods

of collecting data - diaries, interviews, and accompanied shopping trips - I hope to learn about how fathers interpret their experiences, how they construct their world, and what meanings they attribute to their experiences (Merriam and Tisdell, 2016). In line with Grønhøj and Gram (2020) and Judd *et al.* (2014), this research used open-ended questions to enable the fathers who influence their children's (un)healthy food consumption in Saudi Arabia to tell their own story. In addition, because of the lack of information about the meanings of Saudi fathers influencing (un)healthy food choice for their children, an exploratory research fits the study's aims. Based on the discussion of the methodological approach in this section, the next section presents and justifies the chosen research methods for my study.

In addition, in the line with the studies presented in Table 3.1, because of the lack of information about the meanings of Saudi fathers influencing (un)healthy food choices for their children, exploratory research fits the study's aims as it allows me to gain meaningful insights and in-depth information about the reasons, opinions, motivations, and perceptions of fathers when socialising (un)healthy food for their children with reference to growing problem of obesity in Saudi Arabia.

3.3   Research Methods

This research is qualitative and exploratory by nature, its aim being to explore the role of the male heads of the family – fathers – as key agents of socialisation who influence their children's (un)healthy food consumption in the culturally distinctive nation of Saudi Arabia. In order to be able to explore the research aim in-depth, the following data collection tools were used:

- Food choice diaries,

- In-depth interviews, and

- Accompanied shopping trips

There are two major reasons for the employment of the above data collection tools. First, parental food socialisation is a process of social learning and interaction between parents and their families, specifically their children. Such data collection tools were needed to take these characteristics into consideration. For this reason, food choice diaries, in-depth interviews, and accompanied shopping trips were used to identify and explore the social learning and interactions between fathers and their children with regard to food socialisation. Second, as elucidated in section 3.8.2, the use of triangulation will ensure objectivity and therefore the credibility of this research. These reasons for the choice of data collection tools are related to the perspective of research methodology. Nevertheless, the reasons for the selection of each tool and the relationships between them and their connections to the practical perspective of the study also needed to be clarified.

3.3.1   Data Collection Tools

Figure 3.1 fully details the two main data collections stages used in this study.

Figure 3.1 Data collection stages
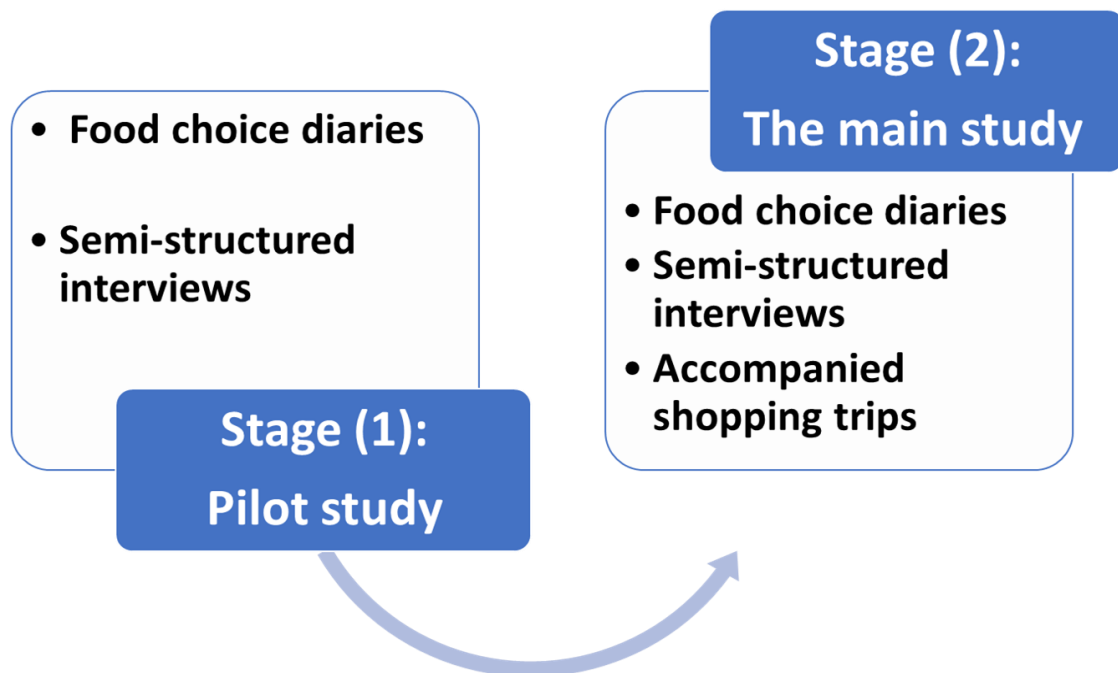
3.3.1.1   Food Choice Diaries

The term diaries refers to a document generated by an individual who has maintained regular, personal, and contemporary records (Alaszewski, 2006). Alaszewski (2006) identifies four characteristics of diaries as a data collation tool. They are defined by *regularity* — this means, they are organised around a series of regular dated entrances over a period. They are also private — that is, diaries are constructed by a specialised identifiable individual who controls entry to the diary during completion. Further diaries are contemporaneous — that is, they are recorded at the same time or very close to the time when current events or activities take place and therefore do not suffer the limitations of recall bias that hinder other approaches. Finally, diaries are a written record (hand or electronic), audio-records or visual. They can involve a mix, or all of these options. Following Rose's (2020) advice, I asked fathers to complete a written food choice diary, in which they recorded their regular and alternative food choices for their children.

Using diaries as a research method can have some advantages. Fathers can generate a record of their everyday actions of buying food for their children (McDonnell, Scott and Dawson, 2017). Bartlett and Milligan (2015) suggested that the diary method allows for the collection of naturalistic data. That is, fathers can gather information about the food they choose for their children at the moment of finishing the shopping or when they return home and record their food shopping in the diary.

In addition, the aim of the diary is to deliver access to a more in-depth understanding of fathers' interpretations of their world (Bava, Jaeger and Park, 2008). Following the advice of Nicoll (2010), my research sees the structured diary recording approach as more suitable because the details obtained in this kind of recording can frequently be lost in face-to-face responsive mode methods, for example interviews, where fathers might forget details about the type of foods they have chosen for their

children and why they chose them.

In contrast, significant drawbacks of the diary as a data collation tool should be noted. It is a possibility that diaries can be open to errors arising from research participants conditioning, their incomplete recording of information and their under-reporting, their insufficient recall, and their inadequate cooperation (Cao and Henderson, 2020; Corti, 1993). In order to reduce these potential errors, I made every effort to guarantee the diaries were inclusive, easy to use, and fully clarified to the participants, see section 3.5.4.1. Hence for this research, the diary as a data collation tool is well administered in order to help fathers to recall their daily regular and repetitive of food purchasing for their children. Following the advice of McDonnell, Scott and Dawson (2017) who suggest this data collation tool also assisted me in setting up the interview questions as they were based on the diary of the participants. Before I started the in-depth interview with a father, I studied his food choice diary. I then asked him questions based on what he recorded in his food choice diary. For example, I usually started an in-depth interview question like "I can see from your food choice diary that you have bought   ××× chocolate: how/whom/where/when/why did you buy it?" Thus, the food choice diaries helped to stimulate discussion during in-depth interviews. This approach has been successfully used in other food consumption studies, e.g. Bel *et al.* (2019), Gibson *et al.*, (2013) and Palojoki and Tuomi-Gröhn (2001).

3.3.1.2   *In-Depth Interviews*

Interviews are a useful tool for obtaining in-depth understanding of fathers as key socialisation agents who influence the (un)healthy food consumption of their children. Rowley (2012) notes that interviews can increase insights into specific issues and understanding of opinions, attitudes, processes, and behaviours. Thus, these interviews

with fathers gave me the opportunity to ask and explore deeper questions in order to gain novel insight on fathers as socialisation agents.

According to Gray (2018), interviews assist researchers to pursue and elucidate issues that are unclear. This is supported by Palojoki and Tuomi-Gröhn (2001), who recommend interviews because of the complexity of family food consumption patterns. Moreover, Kearney and Hyle (2004) and Arksey and Knight (1999a, 1999b) argue that interviewing is an influential technique in helping researchers make explicit what has hitherto been implicit in terms of people's perceptions, feelings and understandings. Hence, it was significant for me in these interviews to garner an understanding of fathers' experiences when they socialise (un)healthy food consumption of their children.

As Harris *et al.* (2015) emphasise, one issue with interviews is the significance of the appearance of equality of power and knowledge between researcher and participant(s). Karnieli-Miller, Strier and Pessach (2009) note that the researcher should not provide the impression that they know more about the subject being studied. Indeed, Ben-Ari and Enosh (2013) argue that the opposite is desired so as to enable the participants to feel they have at least equal knowledge concerning their experiences, since it is their own experiences that are under-exploration. One of the ways this issue was managed in this research was through the deployment of open-ended questions, which enabled the fathers to deliver their own experience and perspective on this everyday activity regarding food consumption for their children, as suggested by Harris *et al.* (2015) and Rabionet (2011). By doing so, fathers were allowed to explain and share their experiences about the (un)healthy food socialisation of their children. When asking fathers to give explanations as to their perceptions about their food choices for their children, they often revealed reasons, strategies, hopes, fears, and much more.

Open-ended questions allowed me to freely differ the order and wording of the questions (Power *et al.*, 2010) as and when necessary, depending on the direction of the interview at any particular moment in time, and to ask further questions (Corbetta, 2003).

Having justified the use of in-depth interviews as part of the research data collection process, it is necessary to underline the specific type of interview that was deemed most appropriate. Following advice offered by Rowley (2012), it was clear that a high level of flexibility would be essential to obtain more in-depth knowledge from the fathers. Based on these considerations, I chose the in-depth interview method for this research. As King and Horrocks (2010) highlighted, in-depth interviews can either be conducted one-on-one or one-on-multiple. For this study, as Dickson-Swift *et al.* (2006) recommend, one-on-one in-depth interviews were deemed appropriate because of their ability to allow the participants to speak freely on a topic about which certain aspects may be deeply personal and sensitive, such as childhood obesity.

3.3.1.3   *Accompanied Shopping Trips*

Several advantages have been identified for using the method of accompanied shopping trips. Elms, de Kervenoael and Hallsworth (2016) argue accompanied shopping trips provide a rich experiential context to increase and help interpret participants' discursive accounts of their shopping behaviour. This is not surprising, since as Zukin (2018) argues shopping is one of the main means by which people are engaged in practices of consumption. For my research, it was possible to obtain a higher level of understanding of the actual food shopping behaviour of Saudi fathers. This is because I was able to question my participants.

Furthermore, I was able to see the data contained within the diaries/interviews occurring in a real-life shopping situation. This gave opportunities to me and to the

fathers for further elaboration. Where applicable, it also gave opportunities to explain where, how and why the actual shopping behaviour occurred as it did. As Lowrey, Otnes and Mcgrath (2005) observed, it is this interaction within the shopping trips that renders them a highly valuable research technique for added behavioural understanding.

For this study, accompanied shopping trips were thus selected as a key means of further exploration of the father's behaviour by affording insights into aspects of the fathers' lives in a natural setting. This is supported by Sunderland and Denny (2016), who suggested that accompanied shopping trips enable one to generate rich datasets and offered opportunities to record appropriately and in detail the participants' motivations, views, and real behaviour in an authentic context.

However, one issue which arises from the use of accompanied shopping trips is that participants might be more comfortable, relaxed, and natural in their communications when their behaviour appears to be less observed (Otnes, McGrath and Lowrey, 1995). For this research, it was important for me to permit the fathers to do their shopping as naturally as they could. Following the recommendation from Haselhoff, Faupel and Holzmuller (2014), because I built a strong relationship with the fathers during the food choice diaries and interview stages respectively, I believe the fathers' behaviour on the shopping trips were not unduly influenced by me. In addition to this, accompanied shopping trips clearly entail a cost, both in terms of time and money (for more information see section 3.5.4.3).

3.4   Pilot Study

3.4.1   The Data Collection Process for the Pilot Study

Authors such as Yin (2018) highlights that a pilot study can be determined on the basis of two aspects regarding data, namely, convenience and accessibility. Accordingly, the aims of my pilot study were first to evaluate whether the questions were clear,

unambiguous, and understandable so that any modifications can be made before starting the main study (Arksey and Knight, 1999a). Second, the pilot study assisted me in refining the data collection by planning and modifying, if necessary, the food choice diary and content of the interviews in terms of the structure of the interview and wording of questions. Third, the pilot study assessed whether the study required further data collection techniques.

Figure 3.2 Data collection tools used in the pilot study
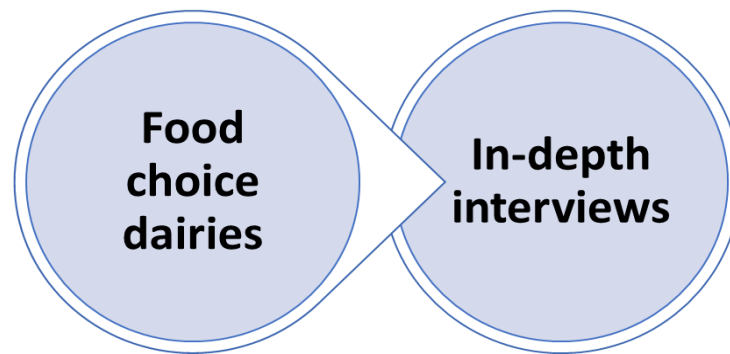
For the pilot study, two stages of data collection tools were used, namely, food choice diaries and in-depth interviews (see Figure 3.2). To conduct the pilot study, I planned to target four fathers. Seven food choice diaries were given to fathers, with the expectation that four would be completed. One individual was excluded from the pilot study because he had only one child and did not buy food daily. Two fathers completed the food choice diaries; however, they did not reply to my calls designed to follow up and set up an interview time. Therefore, a total of four from seven fathers filled out the diaries and agreed to an interview. These participants were all fathers who had three children or more. This number of fathers is deemed acceptable in other studies (Kim, 2011). Importantly, they enabled me to revise and confirm the research questions and research approach for my data collection.

The pilot study was carried out in March 2019 and continued until the end of April. It was conducted with four fathers in the Eastern Province of Saudi Arabia. Two

fathers were from an urbanised area while the other two were from a rural area (see the details of fathers who participated in the pilot stud in Table 3.2).

I recruited the fathers through a personal contact approach during entertainment events. I recruited two fathers who were from the rural area by attending the International Festival of Extreme Sports Battle of the Champions. I recruited two fathers from the urbanised area during the Global Colour Race event. Some fathers, after reading the information sheet, informed me they were willing to participate in the study. I printed out the food choice diary booklet. When the fathers asked to be part of the study, I handed over the food choice diary booklet and asked them to sign the consent form.

Once they had finished filling out the diary, I then made an appointment to interview them.

Table 3.2 Fathers who participated in the pilot study

Name pseudonym	Description
J. Alboriah	He is 35 years old. He lives on the second floor of his family house in a small village. He has five children (four girls and one boy). He holds a diploma in office management. He works as an admin clerk.
S. Alshryat	He is 38 years old. He lives in the city of Dammam. He lives in the same house with his five brothers. He has three children (two girls and one boy). He holds a bachelor's degree in Special Education. He teaches children with special needs.
A. Alshryat	He is 37 years old. He also lives in Dammam. He lives in the same house with his five brothers. He holds a bachelor's degree in Human Resources. He has four children (three girls and one boy). He is an HR manager.
Z. Alkalif	He is 34 years old. He lives in a semi-detached house in a quiet village. He has four children (three boys and one girl). He holds a bachelor's degree in accounting. He works as an accountant.

The pilot study was approved by the Oxford Brooks University Ethics Committee on 26th February 2019. The application number is 191275.

The pilot interviews took place in the evening as per the fathers' preferences. They were voice-recorded for transcription and analysis purposes (Matheson, 2007).

Table 3.3 presents the duration and the place of the interviews in the pilot study. In addition, the qualitative data emerging from the food choice diaries and interviews were coded and analysed through an iterative process of thematic analysis (Braun and Clarke, 2006). This process allows repeated patterns of meaning in the datasets to be recognised along with the rich and diverse experience of participants (Patton, 2014).

Table 3.3 Duration and place of the pilot study

Name pseudonym	Duration of the interview	Setting of the interview	Rural/Urban
J. Alboriah	30 minutes	Social community centre	Rural
S. Alshryat	47 minutes	Participant's home	Urban
A. Alshryat	52 minutes	Participant's home	Urban
Z. Alkalif	57 minutes	Social community centre	Rural

3.4.2   Reflections on the Pilot Study

Based on the findings of the pilot study, I considered how far the food choice diaries, as well as the interview questions, could offer data that would address the research aims and objectives. Although the first interview was not as successful as I had hoped or expected, I learned the need to engage in discussion with the interviewees. In the next three interviews, I was able to engage in conversation more confidently and was able to discuss with the interviewees as well as, crucially, *direct* the conversation.

Table 3.4 shows a number of technical matters were highlighted and some changes were made to the main study. I learned that the main study would focus on fathers who have three children or more in order to ensure there is a *daily* purchase of food.

Table 3.4 Issues raised and changes required based on the pilot study

Issues	Changes required
Questions	**Pilot study questions:** / **Main study questions (Amended):**

Pilot study questions:

- I see from your food choice diary that you purchased ____ food/drink on _(day)____. How did you choose it?
    - Who came up with the idea of buying the product?
    - How did you search for information about the food?
    - How did you evaluate the food with other products?
    - Who was the decision-maker for the product?
    - Are you going to buy this product again?

- I see from your food choice diary that you purchased ____ (brand). Tell me about the sort of things that might influence you to purchase this brand for your children.
    - Why did you decide to purchase (XX brand) instead of others? How? and Why?

What else might influence you? How? Why?
    - Child's food preference
    - Availability
    - Cost/income
    - Family
    - Parents' beliefs and attitudes
    - Fathers' job
    - Cultural and religion
    - Retail food stores
    - Marketing factors

- Do you act as a role model when you choose food for your

Main study questions (Amended):

- Could you tell me how you choose food for your children?
- Could you explain to me if you shop for food with your children (Why (not)? How? Where? When? Can you give me an example)?

- **Additional questions:**
- To what extent do marketing techniques such as advertising/advergames/ influence fathers and/or their children to choose (un)healthy food? (why/why not/how/can you give me an example?)
- To what extent do grandparents influence fathers to choose (un)healthy food for their children? (how/can you give me an example?)
- To what extent do relatives influence fathers to choose (un)healthy food for their children? (how/can you give me an example?)

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	children? How?/ Why?/Can you give me an example? ▪ Could you tell me how you teach your child about the food you choose? Why?/Can you give me an example? ▪ To what extent do you control/restrict/ reward the availability of food at home? How/Why? ▪ Do you act as a permissive or authoritarian father related to food? ▪ What do you know about government regulations that control the different types of food marketing in Saudi society, including to children?	No changes for these questions.
Sampling	Due to time limitations, it was necessary to concentrate on fathers with three children or more because it was expected these fathers would definitely buy food for their children on a *daily* basis.	
Place of study	Due to travel limitations, it was possible to focus only on a rural area rather than both urbanised and rural areas.	
Method	It was necessary to apply another data collection tool in order to understand the entire phenomena under study.	

In addition, the first interview questions were more in-depth with less engagement. I learned from the pilot interview that the interviews should begin with more open questions and to avoid leading questions (Rowley, 2012). An example of how to fill out the food choice diary had been provided. The fathers did not fill them out entirely, even though this information is essential for the research project. This was the case even where I followed up with the fathers to ask them if they required any help filling out the diary. As a result, the diaries were not complete when I received them. Three out of four fathers in the pilot study found it hard to fill out the diary, as they did not have the time to write down all the products they had purchased. All the fathers suggested that I design a mobile application to assist them in recording their diaries. A professional was subsequently asked to design such an application. However, due to time and budget limitations, the idea of designing an application was eventually rejected.

I learned from the pilot study that it is vital to keep a diary for the main study for three reasons: (1) for the fathers to recall what food they had chosen for their children; (2) to help the interviewees anticipate what the research is about when they come to an interview, and (3) to fully understand how the fathers are making the food purchases. As a result, I made a decision to apply different strategies for using the diary as a research method for collecting data in order to keep the fathers throughout the entirety of the main study. For more information about the strategies I used, please see section 3.5.4.1 below.

Another consideration to be taken into account was whether a further method might be required to obtain more data. Thus, a decision was made to use accompanied shopping trips as an extra method in the main study. As discussed in section 3.3.1.3, these can clarify understanding of the first-hand experiences of fathers in their natural

setting, as suggested by Elms, de Kervenoael and Hallsworth (2016) and Belk, Fischer and Kozinets (2013).

3.5   *The Primary Data Collection Process for the Main Study*

3.5.1   Ethical Approval

This research was approved by the "University Research Ethics Committee" (UREC) of Oxford Brookes University and full approval was gained on 16th August 2019 for the fieldwork to begin. The UREC number is 191318.

3.5.2   Sample of the Main Study

In this research, the participants are Saudi Arabia fathers. A father may be a biological or non-biological male parent (Mallan *et al.*, 2014a, 2014b). There were several reasons for using fathers as participants for this study. Firstly, considerable attention has been paid to fathers as socialisation agents in contemporary consumer research, health research, and family research thinking (Davis *et al.*, 2018; Moore, Wilkie and Desrochers, 2017). Changes in the time fathers spend with their children have arisen in equivalent with changes in maternal employment (Khandpur *et al.*, 2014). Consequently, fathers are undertaking more child-care activities involving feeding and food choices for their children (Lora, Cheney and Branscum, 2017; Lora *et al.*, 2016; Horodynski and Arndt, 2005). Consequently, in spite of fathers' expanding role in child-rearing, they are underrepresented as key agents of socialisation who influence their children's (un)healthy food consumption research in general and childhood obesity in particular (Davison *et al.*, 2016; Khandpur *et al.*, 2014). This observation underpins the claim of this research to be making a valid and valuable contribution to the field (Davis *et al.*, 2018; Epp and Price, 2018; Moore, Wilkie and Desrochers, 2017).

Secondly, as mentioned above (see section 2.6), fathers in Saudi Arabia are expected to be the breadwinners for the family. They should take responsibility for

education, finding a house, discipline, medication, clothing, and food and drink consumption. This is imposed by Islamic laws and Saudi culture. Although the Saudi government has recently allowed women to drive, fathers/husbands are still the main family shoppers.

In order to enable researchers to gain answers to their questions from a moderately small group of people in an efficient and effective manner, a sampling strategy is needed (Marshall *et al.*, 2013). Patton (2014) notes that in qualitative studies all forms of sampling can be positioned under the wider term purposeful sampling. Likewise, Coyne (1997) and Sandelowski (1995) have emphasised that all kinds of sampling in the qualitative study can be organised under the wide umbrella of purposeful sampling. Therefore, the sample is always deliberately chosen according to the needs of the study. Figure 3.3 presents the sample criteria for my study. Consequently, because certain criteria were used to select the participants (see Figure 3.3), a purposeful sampling strategy was employed (Bungay, Oliffe and Atchison, 2016).

Figure 3.3 Sample criteria used for this study
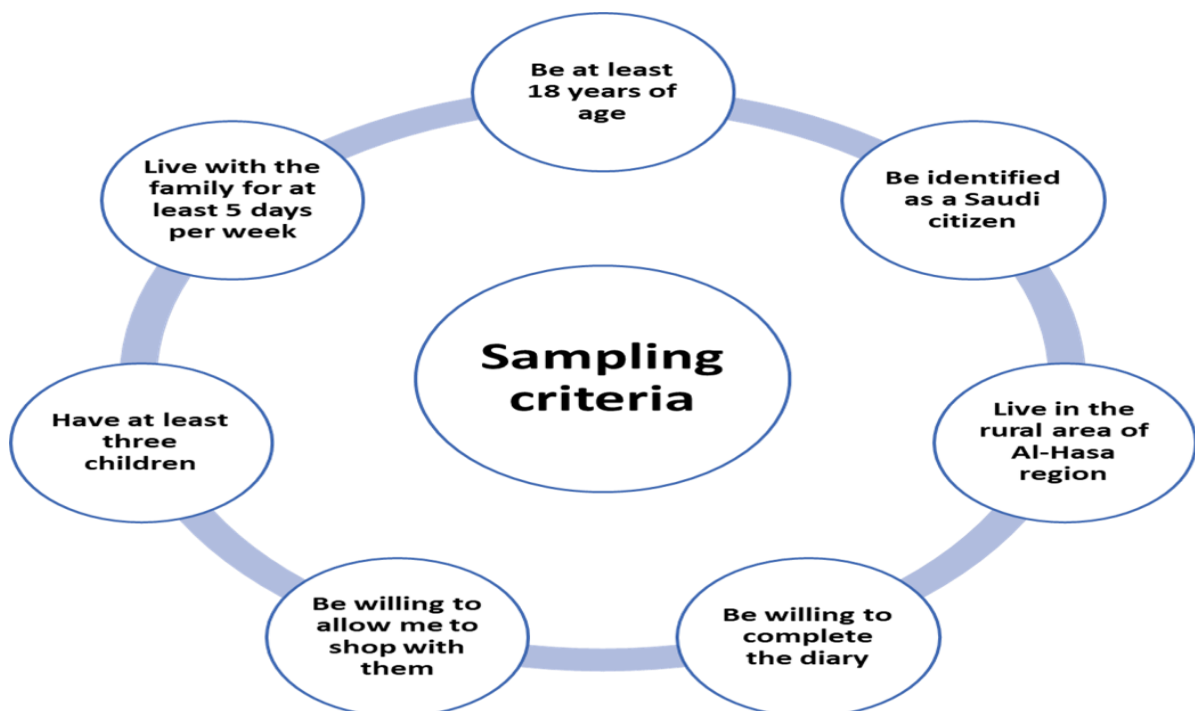
When the sampling strategy has been identified, the next stage is to specify the sample size. Daly (2007) demonstrates that determining the sample size is one of the most contentious features of qualitative research design. Numerous other scholars have claimed that the literature on sample sizes is vague and making a decision is intrinsically complicated and problematic (Vasileiou et al., 2018; Marshall et al., 2013). There is something of a consensus on what constitutes a sufficient sample size (Boddy, 2016; Daly, 2007). The general agreement is that qualitative research should apply a small sample which focuses on the depth of understanding (Kerrane and Hogg, 2013; King and Horrocks, 2010). For interpretive designed research, some scholars suggest a sample size of between five and 25 participants (Creswell and Clark, 2018). In contrast, Dukes (1984) recommends a much lower number, for example studying three to ten subjects. In the present research, a total of 32 fathers took part in the study. After I reached a point at which observing more data would not lead to the discovery of more information related to the research aims and objectives (Lowe et al., 2018; Fusch and Ness, 2015), I stopped data collection. Also, this number of participants matched similar to previous studies of food socialisation (Kharuhayothin and Kerrane, 2018, 2017; Judd et al., 2014). Details of the fathers can be seen in Table 3.5.

In this doctoral study, it should be noted that because fathers here prefer not to bring their daughters with them for shopping due to the cultural and social constraints, I have found that fathers directly socialise only with their sons in terms of food socialisation outside the home, e.g. in the context of food stores (for more details, see Section 4.2). However, the results revealed that fathers tend to socialise with both genders (son and daughter) with respect to food socialisation, specifically in the home environment (see Sections 4.3 and 4.4). Moreover, this doctoral thesis concentrates on younger children in the socialisation process of (un)healthy food consumption.

Table 3.5 The backgrounds of the who participated in the main study

No.	Pseudonyms	Age	Number of wives	Children	Family living arrangements	Education level	Type of work	Occupation
1.	Father 1	48	1	5 daughters	Nuclear (living with wife and 5 children)	Bachelor	Full-time	Lecturer
2.	Father 2	39	1	3 sons 1daughter	Extended (living with 1 brother, mother, and 4 children)	Bachelor	Full-time	Teacher
3.	Father 3	46	1	4 sons 2 daughters	Extended (living with 3 brothers, mother, wife, and 6 children)	Bachelor	Full-time	Teacher
4.	Father 4	38	1	2 sons 1 daughter	Nuclear (living with wife and 3 children)	Bachelor	Full-time	Accountant
5.	Father 5	42	1	1 son 3 daughters	Nuclear (living with wife and 4 children)	Bachelor	Full-time	Firefighter
6.	Father 6	40	1	3 sons 2 daughters	Nuclear (living with wife and 5 children)	Bachelor	Full-time	Manager
7.	Father 7	40	1	1 son 3 daughters	Joint (living with 1 brother, wife and 4 children)	Bachelor	Full-time	Teacher
8.	Father 8	36	1	1 son 2 daughters	Extended (living with 4 brothers, mother, and 4 children)	Diploma	Full-time	Admin clerk
9.	Father 9	46	1	2 sons 3 daughters	Extended (living with 4 brothers, mother, wife, and 4 children)	Bachelor	Full-time	Laboratory specialist
10.	Father 10	41	1	2 sons 1 daughter	Joint (living with 2 brothers, mother, father, wife, and 3 children)	Diploma	Full-time	Air conditioner technician
11.	Father 11	40	1	2 sons	Nuclear (living with wife	Bachelor	Full-time	Teacher

			1 daughter	and 3 children)			
12.	Father 12	40	1	4 daughters	Nuclear (living with wife and 4 children)	Diploma	Full-time	Soldier
13.	Father 13	49	1	2 sons 2 daughters	Nuclear (living with wife and 4 children)	High school	Full-time	Admin clerk
14.	Father 14	38	1	4 sons 2 daughters	Joint (living with 4 brothers, mother, wife, and 6 children)	Diploma	Full-time	Nurse
15.	Father 15	48	1	4 sons 2 daughters	Nuclear (living with wife and 6 children)	Diploma	Full-time	Admin clerk
16.	Father 16	36	1	1 son 3 daughters	Nuclear (living with wife and 4 children)	Diploma	Full-time	Nurse
17.	Father 17	43	1	3 sons 4 daughters	Nuclear (living with wife and 7 children)	Bachelor	Full-time	Teacher
18.	Father 18	38	1	2 sons 1 daughter	Joint (living with mother, wife, and 3 children)	Bachelor	Full-time	Social worker
19.	Father 19	39	1	2 sons 1 daughter	Nuclear (living with wife and 3 children)	Bachelor	Full-time	Teacher
20.	Father 20	35	1	2 sons 2 daughters	Nuclear (living with wife and 4 children)	Diploma	Full-time	Nurse
21.	Father 21	40	1	1 son 2 daughters	Nuclear (living with wife and 4 children)	High school	Full-time	Admin clerk
22.	Father 22	42	2	5 sons 11 daughters	Joint (living with wives and 16 children)	High school	Unemployment	Unemployment
23.	Father 23	33	1	2 sons 1 daughter	Joint (living with 5 brothers, mother, father, wife, and 3 children)	Bachelor	Full-time	Operator technician
24.	Father 24	38	1	1 son 1 daughter	Joint (living with 3 brothers, mother, father, wife, and 3 children)	Bachelor	Full-time	Teacher

25.	Father 25	34	1	1 son 2 daughters	Nuclear (living with wife and 3 children)	Diploma	Full-time	Admin clerk
26.	Father 26	42	1	3 sons 1 daughter	Nuclear (living with wife and 4 children)	Bachelor	Full-time	Firefighter
27.	Father 27	47	1	3 sons 4 daughters	Nuclear (living with wife and 7 children)	Diploma	Full-time	Laboratory specialist
28.	Father 28	29	1	3 sons 1 daughter	Extended (living with 2 brothers, mother, wife, and 4 children)	Bachelor	Full-time	Computer engineering
29.	Father 29	41	1	1 son 4 daughters	Joint (living with 3 brothers, mother, father, wife, and 5 children)	Diploma	Full-time	Firefighter
30.	Father 30	43	3	6 sons 4 daughters	Joint (living with wives and 10 children)	Bachelor	Full-time	Teacher
31.	Father 31	38	1	3 sons 1 daughter	Nuclear (living with wife and 4 children)	High school	Full-time	Technician
32.	Father 32	42	1	2 sons 3 daughters	Joint (living with 1 brother, wife, and 5 children)	Bachelor	Full-time	Teacher

3.5.3 Recruitment and Consent

The main study focused on rural areas located in Alhasa area, the Eastern Province of Saudi Arabia. The Eastern Province of Saudi Arabia has the highest rates of the obesity and overweight among children and adolescents (El-Hazmi and Warsy, 2002), and it has increased sharply over a period of a few years (Al Shehri, Al Alwan and Al Fattani, 2013). Alhasa has an area of about 379 thousand square kilometres, representing 20% of the Kingdom's area. The population of Alhasa is estimated at 1.3 million people, distributed across 10 major cities and more than 80 villages.

The participants were recruited between August and September 2019, through three channels, namely personal contact, advertisements left in food shopping stores, and snowball sampling. Because a high level of trust is essential when conducting this kind of qualitative study, which includes families , I decided that applying a personal contact approach would help the recruitment process (Greenstein, 2006). Also, personal contact and face-to-face communication are key for initiating relationships in Arab culture, including, perhaps especially, in Saudi Arabia (Ghanem, Kalliny and Elgoul, 2013). I personally approached participants during entertainment events such as the Juatha Festival, which is held from August 10 to August 17, 2019. The festival covers the cultural and heritage of the Al-Ahsa region. Another festival is Sand City. The event includes a variety of activities, for example, 3D drawing, public competitions, and water parks. These activities are held from 4 - 19 September annually in Al-Ahsa city. The organisers of the events warmly welcomed and gave me permission to conduct the research because they acknowledged the importance of such research for Saudi society. Certain procedures were applied to notify potential participants. First, I presented myself and explained the nature of the research. Next, I informed them that I was looking for study participants. If the contacted fathers were willing to learn more details

about the study, I furnished them with a copy of the participant information sheet and informed them that all the essential details can be found in this document. Some fathers, after reading the information sheet, informed me they were willing to participate in the study. I printed out the food choice diary booklet (see Appendix A) which is the first stage of the data collection. When the participants asked to be part of the study, I handed over the food choice diary booklet and ask them to sign the consent form. Hence, despite the large number of attendees at the festivals, only ten fathers were identified who were willing to participate. The fathers and their families were focused on the participants and watching the activities of these festivals. So, the attendees attended in order to have fun with their families.

To find additional participants to take part in the study, I endeavoured to use another personal contact method. My family has a popular restaurant. I presented myself and elaborated the nature of the research. Then, I informed them that I was looking for participants. If the contacted fathers expressed a willingness to learn more details about the study, I furnished them with a copy of the participant information sheet and informed the fathers that all the vital details can be found in this document. I used this personal contact for four nights but unfortunately, this approach was unsuccessful, with no fathers responding. Fathers came to the restaurant to have a meal and enjoy their time with their friends. Also, some fathers were not interested in taking part in the study as they noted that they are not free, and their time is very busy.

In addition to personal contact, I contacted a number of local food stores and asked the owners/managers of these stores to display the study recruitment advertisement (see Appendix B) for the attention of fathers and to encourage word of mouth recruitment through family and friends. I posted 80 advertisements on the front doors of different food retail stores (grocery stores, mini market stores, supermarket

stores). It was possible to keep the advertisements for two months. In the advertisement, potential participants were given initial information regarding the study. If fathers were interested in taking part, they could contact me through the information provided on the poster and receive the participant information sheet. I felt that despite this recruitment technique being initially successful after more than 50 calls were received; some subsequently refused to be part of the study after I explained the processes and the steps of the research. Some participants stated in the phone call that they were willing to participate in the study simply because it would help me to obtain a PhD degree. I arranged a time and date to hand over the participant information sheet and informed the fathers that all the vital details can be found in this document. The consent form was signed when the food diary booklet was handed over. A total of 16 participants were identified through this channel.

Figure 3.4 shows the channels applied of recruiting participants. I found it difficult to reach the potential participants via the first two channels. Hence, I employed a snowball sampling strategy. The snowball sampling involved asking the fathers who were taking part in the study to recommend other fathers from their social networks whom they felt also suited the study's criteria (Daly, 2007). After a number of participants had been recruited through the first two channels, I then passed the participant information sheet to them, and they gave it to other people who might be interested. Those other people then had the choice of getting in touch with me. Once the participants had contacted me and were willing to take part in the study, I arranged a time and date to hand out the information sheets, consent forms, and food diary booklets. This channel generated a further six responses which resulted in the food choice diary booklet being accepted.

Figure 3.4 Channels of recruiting participants

Personal contact	• Attending festivals = 10 participants • Attending family restaurant = 0 participants
Advertisements left in food shopping stores	• 16 participants
Snowball	• 6 participants

Total number = 32 participants
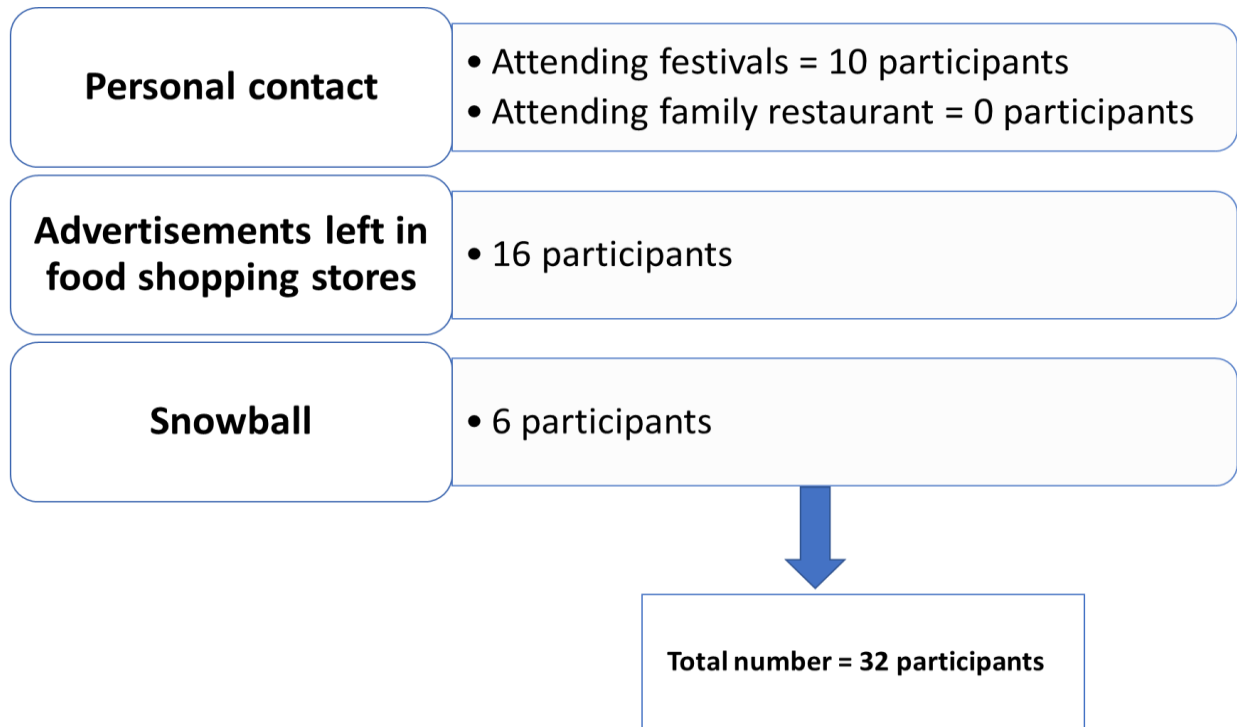
A number of communication routes were given to the fathers to contact me. Mobile phone and email address contacts for the researcher (Ammar Alawadh) and the responsible supervisors (Prof. Janine Dermody and Dr Sarah Quinton) were provided. Text messages by mobile phone, culturally acceptable to men in Saudi Arabia (Buchele, 2010), were primarily used to remind the fathers to update the food choice diary, for example. Contact details were contained on the advertisements left in food shopping stores, information sheet, consent form, and food choice diary booklet.

A consent form was made to collect details and personal information from the fathers comprising the full name and mobile telephone number (see Appendix C). Fathers were informed of their right to refuse to participate in the study. They were also notified that they had the right to withdraw from stage 2 (the food choice diary), stop answering the questions or pause the interviews (stage 3), and cease the accompanied shopping trip observations (stage 4) without having to provide any reasons to me.

3.5.4   Stages of the Data Collection

Table 3.6 shows the match between the study's objectives and the data collection tools employed.

Table 3.6 Match between objectives of study and the data collection tools used

No	Objectives	Data collection tool used
1	To critically review the literature on consumer socialisation theory and family food choices	- Secondary data
2	To explore how and why Saudi fathers make (un)healthy food choices for their children, and the implications for the child obesity problem in Saudi Arabia.	- Food choice diaries - In-depth interviews - Accompanied shipping trips
3	To explore how fathers in Saudi Arabia perceive their roles and responsibilities as a socialisation agent for the food they choose for their children.	- Interviews
4	To contribute to consumer socialisation theory on male heads of family as key socialisation agents on their children's food consumption within the cultural context of Saudi Arabia.	- Food choice diaries - In-depth interviews - Accompanied shipping trips
5	To identify the salient issues from the data that can be used to inform a more efficacious healthy food marketing policy to address the obesity problem in Saudi Arabia.	- Food choice diaries - In-depth interviews - Accompanied shipping trips

3.5.4.1   Stage (1): Secondary Data (Literature Review)

The related literature review was obtained by conducting electronic searches of different databases, namely Google Scholar, EBSCO, Emerald, Pub Med, ScienceDirect, and Medline. Based on the conceptual framework in the previous chapter (see Figure 2.1), the following keywords were used in these databases to search for peer-reviewed papers: Parents, father, mother; AND food socialisation, family food consumption, (un)healthy food choice, factors/motivations influence food choosing, co-shopping, roles of choosing food for children, and childhood obesity.

A number of specialised electronic Journals were searched, namely "Journal of Consumer Research", "European Journal of Marketing", "Journal of Consumer Behavior", "Journal of Food Products Marketing", "International Journal of Consumer Studies", "Appetite", "Nutrients", "BMC Public Health", "Journal of Nutrition

Education and Behavior", "Public Health Nutrition", and "Saudi Journal of Obesity". Moreover, EThOS (Electronic Theses online Services) was included by using the above search keywords to locate theses related to the research topic. Furthermore, official Saudi reports, for example Saudi Food and Drug Authority and Ministry of Health reports that involved food and the prevalence of obesity among Saudi families, were identified. World Health Organization reports were also reviewed to find related literature.

Very few peer-reviewed research papers were found mentioning "parents (un)healthy food socialisation and childhood obesity". Thus, there was limited capacity to apply such research in the consumer behaviour context. The scarcity of papers identified demonstrates the need for further research into the particular phenomenon of parental roles in food consumption practices with reference to the epidemic of childhood obesity. As Moore, Wilkie and Desrochers (2017) pointed out, such research would offer a robust foundation for consumer researchers in contributing to knowledge on this crucial problem.

3.5.4.2 Stage (2): Food Choice Diaries

The qualitative food diary is an instrument for understanding fathers' accounts, as it is based on their real-life experiences (Palojoki and Tuomi-Gröhn, 2001). As noted earlier, 70 food choice diaries were distributed in order to employ a suitable number of participants for the study.

Figure 3.5 shows the four steps of the food choice diary process. The diary was semi-structured and guided the fathers to note where, how, and why they made their specific food choices. Each participant was asked to record their food choice diary for four days, a period specifically designed for the purpose of this research due to time limits. The start and finish dates were those most convenient to the participants.

Figure 3.5 Food choice diary process
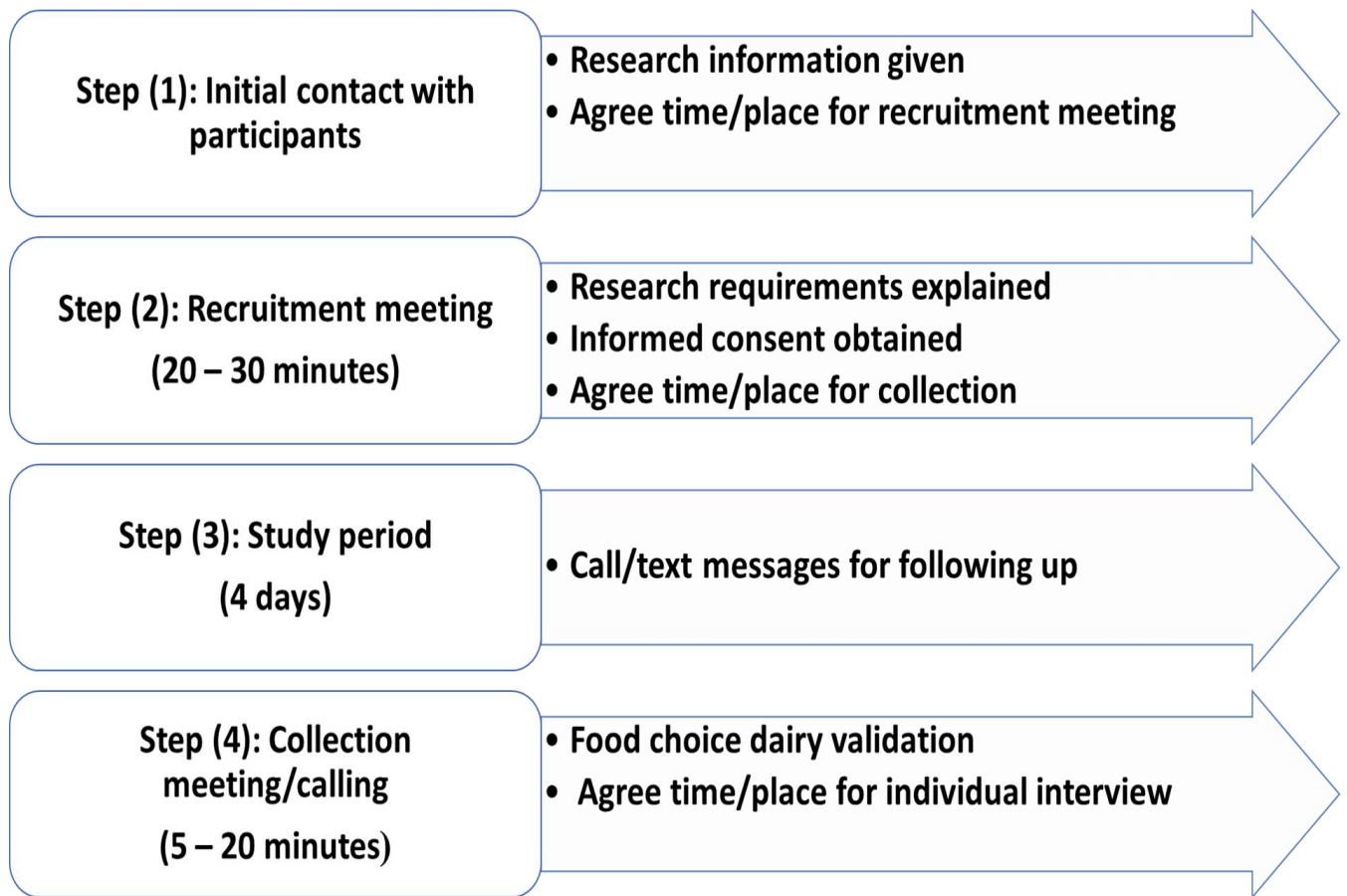
Each page of the choice diary encompassed space to record the information (see Table 3.7). The food choice diary booklet included a cover page, instructions on how to fill out the diary, a one-day example of how to fill in the diary, and eight pages to record the food choice diary.

Table 3.7 Match between the food choice diary sections and the concepts of the study

No	Objectives	Food choice diaries sections
1	To explore how and why Saudi fathers make (un)healthy food choices for their children, and the implications for the child obesity problem in Saudi Arabia.	▪ Brand name and flavour of the food you purchased. ▪ Where you bought the food items (shop, restaurant, etc.). ▪ How much you spent on food. ▪ How you travelled to buy the food (car, bus, train, walk, etc.). ▪ With whom the food item was purchased. ▪ How you bought the product. ▪ Why you bought this product. ▪ Who/when influenced you to buy the product.

A justification for the food choice diary booklet design is provided in Table 3.8.

Table 3.8 Justification of food choice diary content

Content of the food choice diary	Academic justification	Link to the conceptual framework
▪ Brand name and flavour of the food you purchased. ▪ Where you bought the food items (shop, restaurant, etc.). ▪ How much you spent on food. ▪ How you travelled to buy the food (car, bus, train, walk, etc.). ▪ With whom the food item was purchased. ▪ How you bought the product. ▪ Why you bought this product. ▪ Who/when influenced you to buy the product.	Sirasa *et al.* (2020) Kharuhayothin and Kerrane (2018) Palojoki and Tuomi-Gröhn (2001)	▪ Parents as key agents of socialisation and co-shopping ▪ Factors affecting parents as key agents of socialisation influencing food choice

As soon as possible after the completion of the booklet of food choice diary, the participants met with me to complete a food diary interview. The reason for this interview was to check the validation of recording the food diary.

The diary entries were reviewed in detail in order to minimise missing data. This involved checking for frequently missed food items (for instance beverages) and confirming and adding detail to food items, and food sources, for example. This interview also scheduled the next stage, namely the in-depth interview.

In order to retain the participants throughout the process of filling out the food choice diary, different strategies were applied. These strategies were text messages and calls by mobile phone, both of which are culturally acceptable to Saudi Arabian males (Buchele, 2010). First, I sent text message reminders close to critical starting and finishing dates of the food choice diary. Second, I sent text messages asking if the participants had any questions or difficulties filling out the diary. Third, I sent motivational text messages in order to encourage food diary completion. Fourth, I sent a "Thank You text message" to the participants once they had finished filling out the

diary. An average of three reminder text messages was sent to the participants. The text messages were personalised and sent via mobile phone. As a result, by applying this tactic I was able to control and minimise any issue that arose in filling out the diary.

3.5.4.3   Stage (3): In-depth interviews

As mentioned above, once the fathers had completed the food choice diary, they were contacted in order to set up an interview appointment. The interview questions were prepared (see Appendix D). Table 3.9 presents a justification of the questions the fathers were asked in the interviews. The process of data collection from the 32 exploratory in-depth interviews took place between August and September 2019, with the duration of each interview being between 45 minutes and one hour thirty minutes. All of the fathers were free to choose the location for the interviews to take place. While some fathers chose their houses or farms, others, as a result of prevailing social norms, chose places such as restaurants or a local community centre which was familiar to them.

In all cases, there was nobody else in the room. Other disturbances were kept to a minimum, for example, turning off the television. Eleven of the interviews were interrupted by a telephone call or by a visitor, unavoidable disruptions lasting only a few minutes. Social and cultural norms dictated that if the fathers preferred to have the interview in their house or farm, they should offer hospitality to me. However, it was my duty to provide hospitality if the interview took place in a local community centre or restaurant (in the form of either Arabic coffee, tea, fruit, and dates at a home or community centre) or a meal paid for by the researcher in a restaurant.

Table 3.9 Justification of interview questions

Questions asked	Academic justification	Link to the conceptual framework
▪ Could you tell me how you choose food for your children? ▪ Could you explain to me if you shop for food with your children? (How? Why (not)? Where? When? Can you give me an example)?	Gram and Grønhøj (2016) Gram (2015) Dallazen and Fiates (2014) Haselhoff, Faupel and Holzmuller (2014) Keller and Ruus (2014) Marshall (2014) Gaumer, Arnone and Ashley-Cotleur (2013) Lawlor and Prothero (2011) Gram (2010) Ebster, Wagner and Neumueller (2009) Gaumer and Arnone (2009) Marshall, O'Donohoe and Kline (2007) O'Dougherty, Story and Stang (2006) Atkin (1978)	▪ Parents as key agents of socialisation and co-shopping
▪ To what extent do food preferences influence you to choose (un)healthy food? (Why (not)? How? Can you give me an example?)	Vollmer and Baietto (2017) Alm, Olsen and Honkanen (2015) Russell, Worsley and Liem (2015) Wiggins (2014) Poelman and Delahunty (2011) Palojoki and Tuomi-Gröhn (2001)	▪ Factors affecting parents as key agents of socialisation influencing food choice
▪ To what extent do your nutritional knowledge and beliefs influence you to choose (un)healthy food? (Why (not)? How? Can you give me an example?)	Zahid, Davey and Reicks (2017) Boak *et al.* (2016) Tarabashkina, Quester and Crouch (2016) Beck *et al.* (2014) Campbell *et al.* (2013) Hughner and Maher (2006)	

Questions asked	Academic justification	Link to the conceptual framework
▪ Could you tell how (wife, parents, grandparents, intergenerational factors, other family members, social pressure) influence you to choose (un)healthy food? (Why (not)? Can you give me an example?)	Eli *et al.* (2017) Boak *et al.* (2016) Rhodes *et al.* (2016) Cruwys, Bevelander and Hermans (2015) Cruwys *et al.* (2015)	
▪ To what extent does the cost of food influence you to choose (un)healthy food? (Why (not)? How? Can you give me an example?)	Judd *et al.* (2014) Meyer *et al.* (2014) Epstein *et al.* (2012) Monsivais, Mclain and Drewnowski (2010)	
▪ To what extent do culture and religion influence you to choose (un)healthy food? (Why (not)? How? Can you give me an example?)	Kharuhayothin and Kerrane (2017) Rawlins *et al.* (2013) Larson and Story (2009) Musaiger (1993) Musaiger (1982)	
▪ To what extent do marketing techniques such as advertising/advergames influence fathers and/or their children to choose (un)healthy food? (Why (not)? How? Can you give me an example?)	Abrams, Evans and Duff (2015) Jamal, Peattie and Peattie (2012) Maubach, Hoek and McCreanor (2009) Grier *et al.* (2007)	
▪ Do you act as a role model when you choose food for your children? How? Why (not)? Can you give me an example?	Walsh *et al.* (2017) Loth *et al.* (2016) Draxten *et al.* (2015) Palfreyman, Haycraft and Meyer (2014) Campbell *et al.* (2007)	▪ Fathers' perceive their roles and responsibilities for the food they choose for their children
▪ Could you tell me how you teach your child about the food you choose? Why (not)? Can you give me an example?	Fielding-Singh (2017) Raskind *et al.* (2017) Walsh *et al.* (2017)	

Questions asked	Academic justification	Link to the conceptual framework
	Nepper and Chai (2016) Russell, Worsley and Campbell (2015) Musher-Eizenman *et al.* (2009) Marshall, O'Donohoe and Kline (2007)	
▪ To what extent do you control/restrict/ reward the availability of food at home? Why (not)? Why?	Edelson, Mokdad and Martin (2016) Williams, Ashill and Thirkell (2016) Boots *et al.* (2015) Durão *et al.* (2015) Tschann *et al.* (2015) Russell, Worsley and Campbell (2015) Loth *et al.* (2014) Gaumer, Arnone and Ashley-Cotleur (2013) Holsten *et al.* (2012) Marshall, O'Donohoe and Kline (2007)	

All of the fathers chose the time for the interviews to take place. Given the extreme temperatures in August and September in Saudi Arabia, the fathers preferred to hold the interviews at night, except two fathers. One of whom chose the early morning and the other chose the afternoon.

In the interview setting, I used an ice breaker to make the fathers comfortable, encourage them to speak openly and freely, and generate a convivial environment conducive to generating a free-flowing conversation. The topics of the ice breaker technic were based on the participants' interests. For example, one father is interested in bird breeding. The fathers showed me the birds' cages, explained different types of bird, and how he took care of them. I spent seven hours with him in total including the interview. Another father employed as a social worker in an anti-smoking campaign department. He is very interested in how he and his colleagues succeed in helping people to quit smoking by using different strategies. We discussed this interest for three hours and then we had the interview. Thus, because the lack of research in Saudi Arabia in general and qualitative research in particular, I felt that the fathers had little initial understanding of how interviews were conducted and of how and why they were recorded. Eventually, although I was exhausted using this strategy, all the barriers and fears of the participants were overcome. An average of five hours was spent with each father, comprising ice breaker and interview. In general, an excellent relationship was built with 32 fathers.

Table 3.10 shows the advantages and disadvantages of audio recording interviews. A decision was made for this study that the advantages of recording the interviews outweighed the disadvantages. The core reason for using audio recording was that the task did not permit adequate time to take notes. Furthermore, I used a digital voice recorder, which eliminated the issue of having to alter tapes and also

generated a better quality of the recording. It also permitted the digital sound file to be stored electronically.

Table 3.10 Advantages and disadvantages of audio recording

No	Advantages of recording	Disadvantages of recording
1	Allows the interviewer to focus on questioning and listening.	May negatively impact the relationship between interviewee and interviewer (probably because the former is focusing on the recorder).
2	Allows question formulation/evolution to be accurately recorded for use in later interviews where appreciate.	May prevent some interviewee responses and decrease reliability.
3	Can re-listen to the interview ad infinitum.	Possibility of a technical problem.
5	The accurate and unbiased record provided.	Disruption to a discussion when changing tapes.
6	Permits direct quotes to be used.	The time required to transcribe.

As Easton, McComish and Greenberg (2000) recommend that I always took extra batteries to every interview, although new batteries were used after alternative interviews. As part of the ethics code, all of the fathers were asked their permission for the interview to be recorded, as suggest by King and Horrocks (2010). To try and guarantee the best recording quality, the voice recorder was placed close to the fathers and was elevated on a book or cushion rather than directly on the floor or table in order to avert vibration noises. I also comprised the field notes as well as observations to provide richer meaning to the words (McLellan, MaCqueen and Neidig, 2003).

Despite the fact that recording the interviews delivered a reliable and unbiased record, the process of transcribing the recordings was exceedingly time-consuming. King, Horrocks and Brooks (2019) and King and Horrocks (2010) report that even for experienced transcribers, which I was not, a one-hour interview can require in excess of half a day to transcribe. Moreover, Alabdulkareem (2019) indicates that unlike quantitative research, in qualitative research, there is no universal transcription form. Thus, Hennink and Weber (2013) and McLellan, MaCqueen and Neidig (2003) argue

that the process of transcribing can give rise to a number of errors. These errors can be derived from inexact punctuation, or from the mistyping of words on account of misunderstanding or, more seriously, the misinterpretation of what has been stated (Hennink and Weber, 2013; Easton, McComish and Greenberg, 2000). In addition to this, Clark *et al.* (2017) report when transcribing other issues might occur (indeed most of them did in this research), such as incomplete sentences, overlapping speech, a lack of clear-cut ending in speech, a lack of audio quality, and background noise. Some 25 to 35 pages of transcript were yielded for each interview.

I kept 5-8 pages of field notes for each interview for every father to complement the audio-taped interviews. My field notes were handwritten in Arabic (see Appendix F for an example). The field notes were usually made in a small notebook at the same time the interview took place. As suggested by Clifford (1990), my field notes were not systematic and comprised of random thoughts, ideas, and reflections on the interview, the times of the interview and their duration. The field notes allowed me to remember important aspects in detail about the interaction between me and the fathers, as suggested by Sutton and Austin (2015). Following the advice of Phillippi and Lauderdale (2018), comprehensive field notes were created shortly during and after the interview, when my memory was still fresh. As suggested by Muswazi and Nhamo (2013) and King and Horrocks (2010), I recorded particular descriptions of the fathers' behaviour, such as gestures or facial expressions. Sutton and Austin (2015) suggested that these non-verbal behaviours might be important to give a fuller and more accurate transcription not sufficiently captured in audio-recordings. Nevertheless, further critical reflections on the interviews were included later on the same day.

Moreover, the field notes provided a significant context to the interpretation of audio-taped data and helped remind me of situational factors that might go on to prove

crucial during the data analysis, as recommended by Alabdulkareem (2019) and Sutton and Austin (2015). Before starting the coding of each father's data (see Section 3.7.3.1 for more details about coding), I first read the field notes about the father. Then, after I had finished coding all the data for each father, I read the field notes again. Combining the results from the initial transcripted coding of the interview and the field notes resulted in possible avenues for additional analysis, as advised by Erlingsson and Brysiewicz (2017). For example, the field notes helped me to compare between fathers with respect to the questions I asked them. Sometimes, when fathers mentioned one point, I remembered that other fathers had raised similar or different points, and therefore I was able to compare between them for further analysis.

It was noted that some fathers used their body language a lot to answer the interview questions. For instance, when I asked these fathers about choosing food from fast food restaurants, they reacted by frowning, shaking the head and/or looking at me with amazement as an expression of total rejection of the notion of consuming fast food. Hence, such non-verbal behaviours added strong meaning to the data analysis when I was interpreting the data.

3.5.4.4   Stage (4): Accompanied Shopping Trips

The in-depth interviews from the previous stage were followed by setting up a day and time for the accompanied shopping trip, which was the third stage of the research. Accompanied shopping trip observation item checklists were developed (see Appendix E). During the accompanied shopping trip session, I followed the fathers while they shopped for food. Observing, asking questions, and taking notes were based on observation protocol established and concentrating on the fathers' behaviour when deciding to choose food for their children.

I gave the fathers freedom to choose different stores to shop at, at any time, at any sites. The venue where the observations were conducted varied from grocery stores, convenience stores, and greengrocers, to supermarkets, and hypermarkets. The list of the shopping observation venues conducted is presented in Table 3.11. Although the places are different, this did not influence the goal of the accompanied shopping trip, which was to observe the food choices in a shopping setting. In addition, an observation checklist was applied to highlight and report the shopping experience as observed by the researcher. This primarily involved specific shopping behaviour. For example, reading labels, comparing between food, in-store marketing activities, purchasing based on recommendation by family or/and friends, browsing around shops to get familiar with the food items sold, and the food and fruit aisles. It also included shop opening and closing times and the comparison of food items.

Table 3.11 Accompanied shop observational interview setting

No.	Pseudonym	Brand name of the store	Type of store	Time spent (hours/minutes)
1.	Father 1	Panda	Supermarket	45 minutes
2.	Father 2	Alraya	Mini- Supermarket	45 minutes
3.	Father 3	Alamer	Supermarket	4 hours
4.	Father 4	Panda	Supermarket	1 hour
5.	Father 5	Alsomrah	Mini- Supermarket	30 minutes
6.	Father 6	Carrefour	Supermarket	1h and 30 min
7.	Father 7	Panda	Supermarket	1 hour
8.	Father 8	Alamer	Supermarket	1h and 30 min
9.	Father 9	Alrasheed, Almadinah, and fruit market	Mini- Supermarket, convenience store, and fruit and vegetable store	1 hour
10.	Father 10	Panda	Supermarket	1 hour
11.	Father 11	Othaim	Supermarket	1 hour
12.	Father 12	Alamer	Supermarket	1 hour
13.	Father 13	Alyahya	Supermarket	1 hour
14.	Father 14	Alamer	Supermarket	
15.	Father 15	Alrasheed-Nezha	Supermarket	1 hour
16.	Father 16	Alyahya	Supermarket	1 hour
17.	Father 17	Alamer	Supermarket	1 hour
18.	Father 18	Alraya	Mini- Supermarket	37 minutes
19.	Father 19	Alyahya	Supermarket	1 hour
20.	Father 20	Nesto	Supermarket	1h and 30 min

21.	Father 21	Panda	Supermarket	50 minutes
22.	Father 22	Alamer	Supermarket	1h and 30 min
23.	Father 23	Alali	Supermarket	1 hour
24.	Father 24	Alrasheed- Nezha	Supermarket	45 minutes
25.	Father 25	Alraya	Mini- Supermarket	30 minutes
26.	Father 26	Panda	Supermarket	2h and 40 min
27.	Father 27	Alraya	Mini- Supermarket	45 minutes
28.	Father 28	Alrasheed- Safa	Mini- Supermarket	40 minutes
29.	Father 29	Alraya	Mini- Supermarket	1 hour
30.	Father 30	Alamer	Supermarket	1 hour
31.	Father 31	Alamer	Supermarket	1 hour
32.	Father 32	Alyahya	Supermarket	1 hour

Table 3.12 shows the justification of the checklists for the accompanied shopping trips. Following recommendations from previous research (for example, Sirasa et al., 2020; Kharuhayothin and Kerrane, 2018), these variables were chosen because they can elucidate the fathers' intention(s) when choosing a food items, what they have to pay attention to before making food choices, and the logic of actual choices or failure to make a choice.

Table 3.12 Justification of accompanied shopping trips checklist

Checklist	Academic justification	Link to the conceptual framework
▪ Shopping list	Kharuhayothin and Kerrane (2018)	▪ Parents as key agents of socialisation and co-shopping
▪ Reading labels a. Checking for ingredients b. Best before date c. Health claim d. etc.	Gram and Grønhøj (2016) Marshall (2014) Gaumer and Arnone (2009) Marshall, O'Donohoe and Kline (2007) Atkin (1978)	▪ Factors affecting parents as key agents of socialisation influencing food choice
▪ Comparing between a. food product, b. brand, c. price, d. preference e. etc.		
▪ In-store marketing activities such as: a. Coupons, b. Sweepstakes, c. Contests, d. Product samples, e. Discount,		

f. Tie-ins,	
g. Trade shows,	
h. Advertising,	
i. Packaging, and	
j. Others	
Purchasing based on recommendation by family/ friends	
Browsing around shop to get familiar with the food item sold	
Food /drinks in checkout counter	
Food and fruit aisle	

Accompanied shopping trips were carried out with thirty-two fathers who had earlier been interviewed. The details of the observations on the accompanied shopping trips were provided to the fathers via text message. In addition, the fathers were given two options: either I and the fathers would meet in front of the shop, or the I would collect them and accompany them to the shop. The fathers were often keen to give their thoughts and opinions on life in general and daily life food consumptions in particular. Accordingly, all these discussions and observations were noted down.

One challenge which might be raised when conducting accompanied shopping trips is recording the data. Otnes, McGrath and Lowrey (1995) argue that using a recorder might be too intrusive and/or it might provoke unintended interest from others. Moreover, there are practical considerations to consider when using a tape recorder, for instance, the difficulty of pushing trolleys and carrying bags while trying to speak into a device. As a result, short, handwritten notes recording my thoughts, beliefs, the fathers' emotions, behaviour, and attitudes were noted down. I recorded verbatim as much as was possible. An average of 56 minutes was spent with the fathers on the shopping trips. This period of time is similar to Dyen *et al.* (2018) study who spent one hour with their participants during shopping trips. At the end of the shopping trip, I warmly

thanked the participants for taking part in the research in general and the shopping trips in particular.

In sum, although the accompanied shopping trips were costly and fatiguing, they were in the main enjoyable. I believe I achieved a better understanding of how fathers influence the (un)healthy food consumption of their children.

3.6   Ethical Considerations

My doctoral study includes human participants. As a result, my study considered issues linked to research ethics. Firstly, an application was made to the "University Research Ethics Committee" (UREC), Oxford Brookes University, and full approval was obtained on 16th August 2019 for the fieldwork to begin. This approval process followed guidelines to ensure that no participants had endured any adverse effect as a result of this research. The procedure to gain the approval involved offering all fathers with an information sheet before the food choice diary commenced (see Appendix C). This delivered the fathers with details of the aims of the study, their rights in the research process, details of the research process, details of what would happen to their contribution, and whom to contact should they be unhappy with any part of the study process. If the fathers were happy to contribute to the study, then they were asked to sign a consent form. All of the fathers were given a copy of the information sheet and the signed consent form to retain.

Secondly, although the access and consent forms were signed by fathers, it was just as significant to ensure that all of them were happy to take part. As the information sheet was too long to them to read, before any stage of the data collection process started, I delivered a short explanation of the study. The fathers were all given a chance to leave at that point, and at any time during the data collection process (food choice diary, in-depth interviews, and accompanied shopping trips). Lastly, the participants

could benefit from the study by having access to the final findings upon request.

Thirdly, confidentiality in a research context is attained by giving results in ways that ensure participants cannot be recognised, essentially through anonymisation (Wiles *et al.*, 2008). Lancaster (2017) and Sojka and Spangenberg (1994) argue that the trust between researcher and participants is extremely significant, and offering confidentiality and anonymity will aid the building of this trust. Furthermore, Karnieli-Miller, Strier and Pessach (2009) maintain trust between researchers and participants will also enhance the ability to gain more detailed data that reflects the participants' true experiences. Giordano *et al.* (2007) and Baez (2002) argue a variety of different harms may happen to research participants from disclosure of their information after participating in study. These harms involve stigma, liability for illegal activity, embarrassment, loss of reputation, and potential social and employment issues. In terms of confidentiality and anonymity in this research, pseudonyms were employed for each father in order to guarantee anonymity. They were informed that the data collected from their food choice diaries, interviews, and accompanied shopping trips would only be used for the purpose of this study.

As discussed, individuals approached my participants during the in-depth interviews and accompanied shopping trips. This created a potential ethical issue in protecting the anonymity of the participant and their data, and a wider issue in safeguarding the integrity of the data. To help address this, I adopted the following strategies. Firstly, I always gained the permission of store managers, as well as participants before conducting each accompanied shopping trip. I gained permission from venue owners/managers for the interviews I conducted in public places. Secondly, if any individuals were curious about the actions/conversation between the participant and me, I gently and simply explained to them that we were conducting research. In the

accompanied shopping trips. I explained I was observing the participant, and my role was only to observe them shopping for food within a store setting. In the in-depth interviews, I explained we were discussing food shopping for their children.

3.7   Data Analysis Procedures

According to Gray (2018), data analysis aims make data meaningful by breaking them down into themes and linking dissimilar concepts. I elucidate here the steps taken to analyse the qualitative data (see Figure 3.6). The four steps are drawn from recommendations in the existing qualitative literature (e.g., Alabdulkareem, 2019) (see Figure 3.6).

Figure 3.6 Data analysis procedure
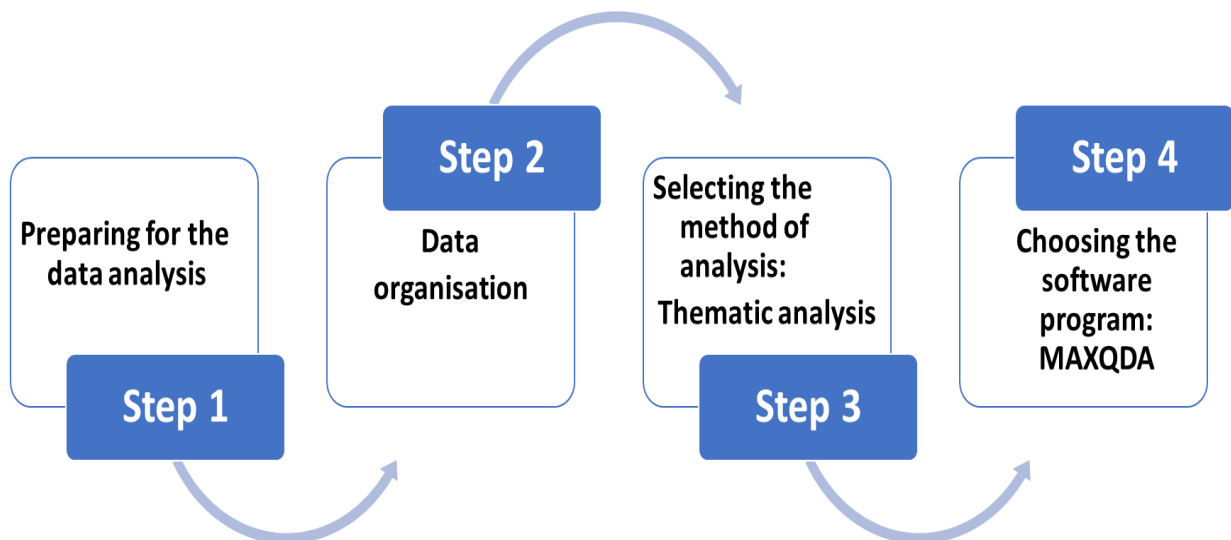
3.7.1   Step 1: Preparing for the Data Analysis

This step is based on the leading literature on qualitative data, such as Alabdulkareem (2019), Gray (2018), Silverman (2017), Saldaña (2016), Corbin and Strauss (2015), and King and Horrocks (2010). To confirm my analysis approach, I reviewed a number of theses and peer-reviewed publications that had employed similar techniques of qualitative research methods and data collection tools (Kharuhayothin and Kerrane, 2018; Mustafa, 2016).

The food choice diaries, in-depth interviews, and accompanied shopping trips were audio-recorded and noted by hand, and therefore required transcription, which was undertaken by me using Microsoft Word. Nearly all of the in-depth interviews were transcribed in Arabic. For each in-depth interview, I took three to four days to transcribe it. For food choice diaries and accompanied shopping trips were transcribed in Arabic on the same day that they were carried out or, at most, a few days later.

Next, the qualitative data, food choice diaries, in-depth interviews, and accompanied shopping trip interviews were done in the Arabic Language. As I wanted to recognise the meanings and themes in Arabic, I did not translate the data into English after transcription. According to Jackendoff (2009), it is advisable to keep the original language for as long as possible to avoid possible limitations and adverse effects when analysing in a language different from the researcher's own. In addition, Bryman (2016) demonstrated that translating data from one language into another might result in the loss of significant data because of the differences between the languages' cultural contexts. Moreover, I believe that researchers who use their mother tongue in analysing qualitative data will allow the researcher to understand and assimilate the data in all its deeper aspects. Hence, a considerable amount of transcripts were generated, and complete translation of all of them was not possible. Therefore, I analysed my data within the spoken dialect as suggested by Al-Amer *et al.* (2016), van Nes *et al.* (2010) and Jackendoff (2009).

After I transcribed all the data into Arabic, I sent the translated fathers' quotations, together with the findings chapter, to a proof-reader to make sure that the responses were comprehensible and that their meaning was obvious in the English language. I decided to use the MAXQDA and Plus 2020 software programmes for the analysis. I imported all the data into the MAXQDA programme and named and coded

themes and sub-themes with Arabic titles.

3.7.2   Step 2: Data Organisation

In order to prepare for the analysis, I created three folders for the data: a) food choice diaries; b) in-depth interviews; and c) accompanied shopping trips. These folders were kept as Microsoft Word files. I then imported these three folders into the MAXQDA software programme. More details of this programme will be given in section 3.7.4.

3.7.3   Step 3: Selecting the Method of Analysis: Thematic Analysis

While the food choice diaries, in-depth interviews, and accompanied shopping trips generated various levels of data, I am presenting the data together here to give a comprehensive overall picture of the phenomenon being explored in my study. Namely, fathers as socialisation agents of their children's food consumption. Consequently, the qualitative data emerging from food choice diaries, and interviews, and accompanied shopping trips were coded and analysed through an iterative process of thematic analysis. As Patton (2014) observes, this process enables repeated patterns of meaning in datasets to be recognised along with the rich and diverse experience of participants. The key themes and sets of information are therefore distinguished by means of thematic analysis.

Although thematic analysis has only recently been documented as a method in its own right for interpreting the written text in psychology (Joffe, 2011), it is widely acknowledged in consumer and marketing research (Belk, Fischer and Kozinets, 2013). As Braun and Clarke (2006) observe, thematic analysis is characterised by its capacity to recognise, analyse, and report patterns (themes) within data. Moreover, Grant (2018) notes that thematic analysis can echo the process of looking at images and documents where both written and visual text contribute to the general impression and meaning interpreted by the reader. Glaw *et al.* (2017) point out that written text, images, and

documents become tools for reporting the outcomes, allowing the reader to understand how these tools are interpreted. Hence, I chose thematic analysis as the most suitable method to explore the richness and variety of my data, and thus answer my research aims and objectives.

3.7.3.1   *Thematic Analysis Process Phases*

Braun and Clarke (2006) suggest six phases of thematic analysis (see Figure 3.7). I followed these phases in my data analysis. I explain here how each of the thematic analysis phases was performed.

Figure 3.7 Thematic analysis process phases
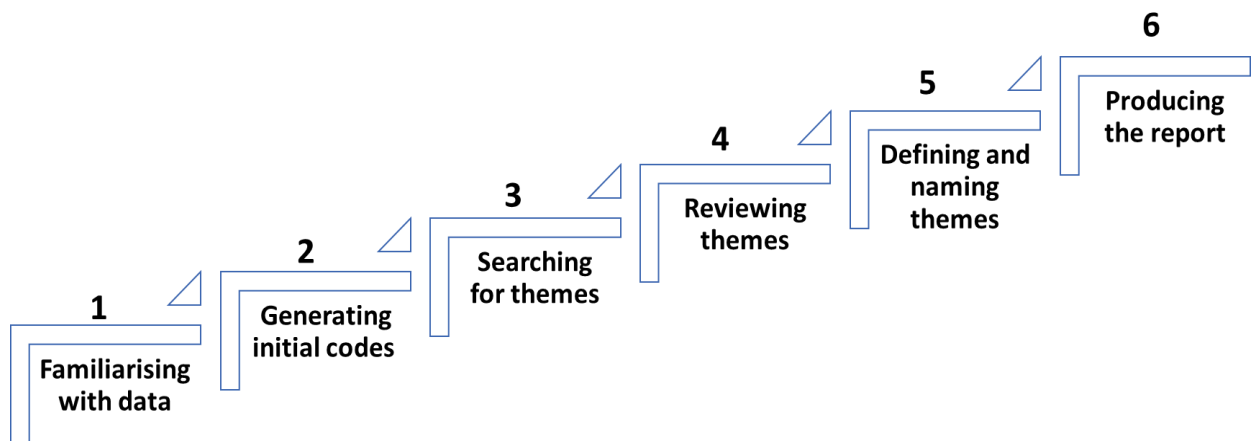
- *Familiarisation with the data*

I immersed myself in the data by transcribing the food choice diaries, the in-depth interviews, and the accompanied shopping trips. I listened to the recorded interviews multiple times. At the same time, memos were written down in order not to lose significant content and certain quotes were highlighted that I saw as intimately related to the research. I used a marker pen to recall and mark potentially useful quotes from the transcripts.

- *Generating initial codes*

Initial codes were generated in this phase. According to Charmaz (2006), coding means categorising segments of data with short names that summarise and account for that piece of data. Thus, coding is an important association between generating data and developing theoretical ideas to elucidate it (Charmaz, 2006). As noted previously, each participant went through three stages of data collection, namely, the food choice diaries, in-depth interviews, and accompanied shopping trips respectively. Braun and Clarke (2013, 2006) recommend researchers should create as many codes as possible through this phase. Therefore, as Saldaña (2016) recommends, I coded the actual data extracts, even those that did not appear to be directly related to the research objectives, but which may have transpired later to be significant. I analysed each participant individually. The average code for each participant from the three data collection tools was 150 codes.

Below are two of the different forms of coding - In Vivo and focused coding - I employed to code my data, as suggested by Saldaña (2016):

◆ *In Vivo Coding*: According to Strauss (1987, p.33), In Vivo coding is "a code which refers to a word or short phrase from the actual language found in the qualitative data record, the terms used by [participants] themselves". Charmaz (2006) argues that In Vivo codes can give a significant check on whether you have grasped what is important to the participant and what might assist to crystallise and condense meanings. Using such coding helped me to capture the meanings inherent in the fathers' experiences of choosing (un)healthy food for their children.

◆ *Focused Coding*: This form of coding refers to searching for the most important codes to build the most prominent categories in the data corpus and entails decisions about which initial codes make the most analytic sense (Charmaz,

2014). I applied focused coding as it is suitable for the development of major categories or themes from the data, as recommended by Saldaña (2016).

Table 3.13 shows an example of In Vivo and focused coding.

- *Searching for themes*

Braun and Clarke (2006) propose the search for themes should begin when all data has been coded with initial codes. In order to find related and appropriate themes, and to ensure that all are accurately formed, I re-read the transcripts multiple times and repeatedly reviewed my coding (amending it when necessary). Saldaña (2016) notes these classifying codes are an important step before conducting the processes of reviewing, defining, and naming themes. Hence, I renamed some codes and combined similar codes. I also linked some codes to each other by creating families of codes. This enabled me to be confident that my data was correctly coded to represent themes.

- *Reviewing themes*

Braun and Clarke (2006) recommend the process of reviewing themes should begin after all the initial themes for the analysis have been created. In this phase, I made the necessary frequent moves back to the transcripts to ensure that each theme was formed based on the coherent and related analysis.

- *Defining and naming themes*

The aim of this step is to "identify the 'essence' of what each theme is about" (Braun and Clarke, 2006, p.92). I looked at what the theme was saying. If there were sub-themes, how do they interact and link to the major theme? The themes and sub-themes I identified are all related to answering the research aims and objectives of my research.

- *Producing the report*

The final step of thematic analysis was to produce a report. Following the advice of Braun and Clarke (2006), in order to produce the report I checked and went back to the stage of processing themes as there was a requirement to ensure that the report was written accurately.

Table 3.13 An example of data analysis

In Vivo codes	Focused codes	Sub-theme	Theme
- Buying unhealthy food - Spending too much money - Size of family - Hard to control large family	Fathers preferred to shop without their children	Food shopping involvement	
- Educate their children - Give their children freedom to choose food they like	Fathers preferred to shop with their children		
- Sadness - Pouting - Madness - Anger - Sobbing - Persistent - Begging	Children used various strategies to influence their fathers to choose the food		Father-child food interaction
- Evaluating the food - Limited quantity of unhealthy food - Convince you to choose healthy food - Returning unsatisfied food chosen - Asking the children to pick out food	Fathers' strategies to avoid conflicts with their children in food store	Father-child interaction in-store	

In the data analysis stage, it should be noted that although there were very few contradictions among some fathers about what they said in interviews, their food choice as recorded in a diary, and their actual actions in selecting (un)healthy food during accompanied shopping trips with their children, I was able to identify these contradictions. Table 3.14 presents two examples of these contradictions among some fathers from the data collection.

Table 3.14 Examples of contradictions in data collection among fathers

Quote from food choice diary	Quote from interview	Quote from Accompanied shopping trips
... I bought some donut sandwiches for my kids. They love donuts. (Father 14, food choice diary)	*You know, I am a nurse, and I can see every day how the patients suffer in pain because of these unhealthy foods like sweets. These sweets cause digestive problems. How do you want me to buy such food for my kids? Any kind of unhealthy food cannot be allowed into my house. I don't want to feel the same for my patients. Let me give you another example, imagine what Pepsi does in the body? Pepsi works to destroy brain cells. No way ... no way... no bad food in my house.* (Father 14, in-depth interview).	*From time to time I buy three to five cans of Pepsi. I ask my wife to put them on when we have a big meal. It is good for digesting the food especially when you have a big meal.* (Father 14, accompanied shopping trip).
One day, he bought a set of unhealthy foods for their children, for example chocolate cakes, indomie, sweets, and sugary juice for his children. (Father 17, food choice diary).	*... Look, when I go to AlAmar food store, for me the best aisle is the healthy foodstuff aisle. I love this aisle. I usually buy food for my kids from this aisle although it is so expensive. For me, I don't care about the price, my kids' health is the most important thing. I buy whole grain bread, for example, do you know how much it is? It 9 is Riyals and the normal one is 3 Riyals. No junk food in my house... I don't indulge unhealthy food in my house, and I am very strict with my kids regarding these rubbish foods...* (Father 17, in-depth interview).	*Can you see that I am buying all these junk foods, I know, but it is OK. Let my kids be happy all the time. All these unhealthy foods I put in the trolley for a whole month, I don't buy others, only these. He ignored the healthy aisle.* (Father 17, accompanied shopping trip).

Procedurally, after I had imported all the three data collection tools (food choice diaries, in-depth interviews, and accompanied shopping trips) into the MAXQDA program, I then analysed the data for each father. I started to analyse the interview first for the first father. Then, for the same father, I analysed his food choice diary and accompanied shopping trip. This was the process I used for analysing the whole data. In doing so, I was able to recognise whether fathers have discrepancies between what they said in the interview, what they recorded in their food choice diary, and what was their action when it came to choosing (un)healthy food for their children in accompanied shopping trips. In order to take note of these contradictions, I recorded and kept these

contradictions in a separate folder within the MAXQDA program. Thus, the contradictions folder has helped me interpret the findings in the discussion chapter, e.g. see Section 5.3.1.2. For instance, even if these fathers appeared to have had the nutritional knowledge, the food choice diaries and accompanied shopping trips did not reflect this nutritional knowledge, to the effect that they normally selected unhealthy foods for their children.

3.7.4   Step 4: Choosing the Computer Assisted Qualitative Data Analysis (CAQDAS) Software – MAXQDA

Qualitative research typically yields large volumes of raw data (Silverman, 2017). In this case, 32 food choice diaries, 32 interviews, and 32 accompanied shopping trips were transcribed. Thus, the plan was to use a qualitative data analysis software to facilitate the organisation of the data. Initially, I tried NVivo. However, I experienced language support problems because Nvivo does not support the Arabic text accurately.

As a result, I searched for an alternative software programme that supports Arabic language text. Seeking advice from Saudi qualitative scholars and Saudi PhD students (via social media), the MAXQDA software programme was recommended to me. It is known that computer-assisted qualitative data analysis software (CAQDAS) such as MAXQDA take time and effort to become familiar with (Kalpokaite and Radivojevic, 2020; Creswell and Poth, 2018). Yet, I considered the advantages of MAXQDA outbalanced such issues. Therefore, I downloaded a free 14-day trial and took an online induction for the programme. In order to become more familiar with the programme, I watched a series of "MAXQDA for Windows" events created by MAXQDA and uploaded on YouTube. I purchased a two-year full license for the MAXQDA programme (Version 2020). Hence, I used the MAXQDA software to store, organise and categorise all the qualitative data for my analysis.

MAXQDA enabled me to import all the data from the 32 food choice diaries, 32

interviews, and 32 accompanied shopping trips into the programme. Each participant's texts were uploaded and organised into the programme in one file under a sub-section (see Figure 3.8). This programme assisted me to integrate the exploration and coding of the data into a single electronic setting.

Figure 3.8 Organising the data in MAXQDA
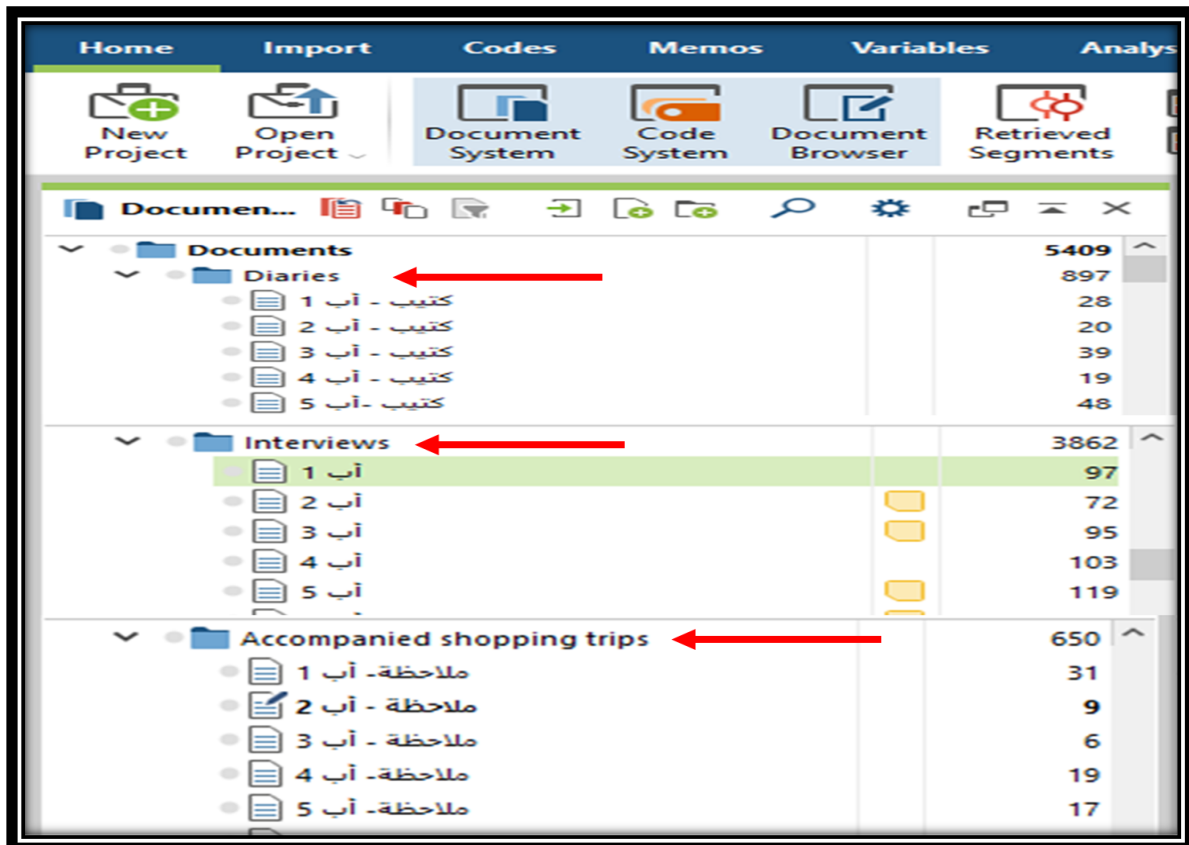
One of the key advantages of using MAXQDA in my research was that it allowed quick, easy, and organised retrieval of coded segments through analysis and enabled visual observations to look for data patterns. Figure 3.9 is a screen shot of an example of my coding in MAXQDA.

Figure 3.9 MAXQDA Coding of accompanied shopping trips

A powerful function provided by MAXQDA is that it uses a code-and-retrieve process comprising of a number of data management traits. Humble (2009) reports that MAXQDA has the ability to code in multiple colours, generate memos, and retrieve coded segments. I linked codes, sub-themes, and themes to specific colours. This function enabled me to extract themes and categories to provide meaning from the food choice diaries, interviews, and accompanied shopping trips. For instance, I used red to relate the data to objective 2, brown to objective 3, and blue for objective 4. This feature enabled me visually to connect selected texts, notes, and memos and allowed me to organise and classify large volumes of qualitative data to this objective (see Figure 3.10).

Figure 3.10 Colours related to the themes of the research
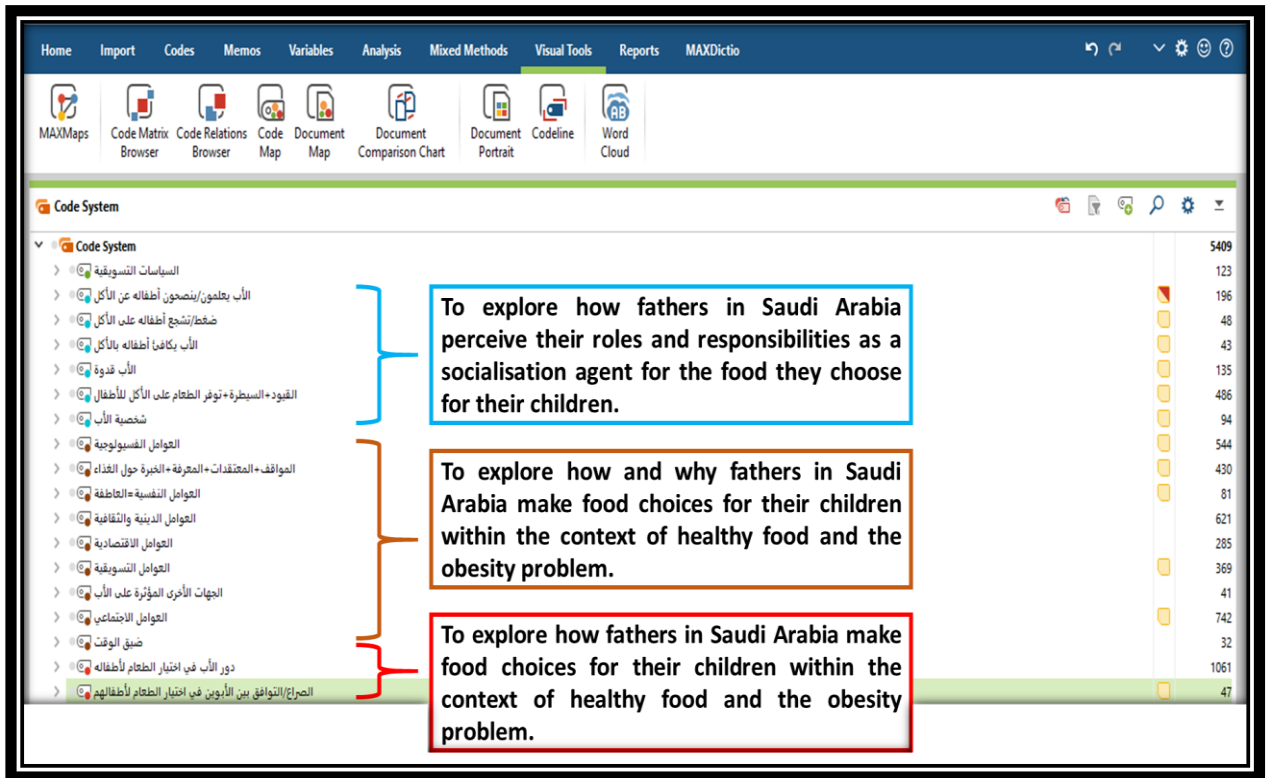
3.8   Quality of the Research

While there is a general agreement that qualitative researchers need to prove their research is credible (Creswell and Miller, 2000), historically, research has been criticized for using the four standards of internal validity, reliability, external validity, and objectivity. These four criteria are derived from the positivist research agenda. In recent years, numerous scholars have claimed that this is unsuitable for qualitative research and that novel criteria specifically designed for qualitative research are required (Buus and Perron, 2020; Tracy, 2010; Seale, 2004). Guba and Lincoln (1998) have proposed four constructivist standards in place of the current positivist criteria: (1) *credibility* for internal validity; (2) *transferability* for external validity; (3) *dependability* for reliability, and (4) *confirmability* for objectivity. These constructivist standards have received extensive support (e.g., Tracy, 2010; Miles and Huberman, 1994). The reasoning for utilising the terminology recommended by Guba and Lincoln

(1998) for the purposes of this research can be elucidated by taking into consideration the criterion validity. Validity can be described as whether "an account is valid or true if it represents accurately those features of the phenomena, that it is intended to describe, explain or theorise" (Hammersley, 1987, p.73). The epistemology of this study facilitates exploration of the role of male heads of the family – fathers – as key agents of socialisation who influence their children's (un)healthy food consumption in Saudi Arabia through induction from the data.

Strongly disputing applying different terms in quantitative and qualitative research, Morse *et al.* (2002) point out that in qualitative research both reliability and validity remain suitable concepts for methodological rigour and plea for a return to the original terminology to ensure that rigor is facilitated by mainstream science. Morse (1999) claims that qualitative research could be deemed as not being reliable or valid if reliability and validity are assumed not to be related to qualitative inquiries. In spite of the ongoing discussion on the use of terminology and the various viewpoints from quantitative and qualitative research, the concern is similar - both deal with the quality of research. It seems unlikely, nevertheless, that the selection of terminology for judging the quality of an inquiry will lead to a decrease in the quality of a piece of qualitative research (Morse *et al.*, 2002). For the reasons illustrated above, the terminology as recommended by Guba and Lincoln (1998) is applied in this qualitative research.

3.8.1 Transferability

In this exploratory research project, the main aim was to explore the role of the male heads of the family – fathers – as key agents of socialisation who influence their children's (un)healthy food consumption in Saudi Arabia. The concept of transferability in qualitative research requires the researcher to indicate that the findings can be

employed to other contexts or groups and are beneficial in the investigation of similar research questions (Elo *et al.*, 2014; Marshall and Rossman, 2011). Following the discussion in section 3.5.4, the application of findings concerning other contexts requires an analytical generalisation (Daniel, 2018).

With respect to my research, in order to enable transferability, I compared the findings of my research with the current relevant literature. The literature review chapter offers detailed information of research findings in (un)healthy parental food choices for their children and compares it with the findings of my own research. Furthermore, as suggested by Miles and Huberman (1994), the data were thematically analysed across the food choice diaries, in-depth interviews, and accompanied shopping trips in order to support the transferability of my research findings.

3.8.2 Credibility

The credibility of qualitative findings refers to an accurate identification of the current empirical data and theoretical framework as well as an in-depth explanation of the study in relation to the population and research setting (Daniel, 2018; Silverman, 2017). With respect to my research, triangulation was employed to increase its credibility. The data was collected using three different tools: food choice diaries, in-depth interviews, and accompanied shopping trips. The use of multiple methods aided the data triangulation (Natow, 2020) and was an effective means of coping with most of the weaknesses of each method utilised (Gray, 2018). The use of multiple methods aided the data triangulation (Natow, 2020) and was an effective means of coping with most of the weaknesses of each method utilised (Gray, 2018).

Furthermore, the food choice diaries' booklet content, in-depth interview guide's questions, and accompanied shopping trips' protocols were directly related to the aims and objectives and covered all facets of the issue.

3.8.3 Dependability

According to Elo *et al.* (2014), dependability concerns the stability of data over time and under various conditions. Several techniques were used to increase the dependability of my research findings. Firstly, all the interviews and accompanied shopping trips were recorded, either by tape or in field notes, to provide more reliable evidence and avoid any bias that could arise if I had merely tried to recall the conversations (Gray, 2018).

Secondly, following DeJonckheere and Vaughn (2019), the food choice diary booklets, the in-depth interview questions, and the accompanied shopping trip conversations were worded clearly and obviously. If there was any misunderstanding about the food choice diary booklets, I provided full contact details so that the fathers could contact me at any time. If there was any confusion about the in-depth interview questions and accompanied shopping trip conversations, it would be repeated with some embellishment in order to allow the fathers to understand what he was being questioned for and about.

Third, all fathers were given the opportunity to outline their own views and opinions freely without any interference, either with comments or gestures, which would establish bias in their' answers to the questions being asked (Golfashani, 2003). Finally, detailed information about the aims and objectives of the study were provided and full details about how the research was conducted, and the rationales of the adopted research strategy and methods were given.

3.8.4 Confirmability

Confirmability in qualitative research is defined as objectivity and suggests that the data precisely represent the information that the participants give and that interpretations of the data were not invented by the investigator (Elo *et al.*, 2014). To achieve the

confirmability of my research, I used multiple sources of evidence during data collection, as suggested Shenton (2004). Confirmability was established through collecting and analysing data from food choice diaries, in-depth interviews, and accompanied shopping trips with fathers. These three data collection tools yielded different insights into the fathers' experiences about the food they choose for their children. A comparison of the findings from the three tools revealed similarities and differences as well as inconsistent or even contradictory findings. Although Mathison (1988) suggested that applying multiple method tools to collect the data could result in opposing viewpoints, this could have a positive effect, particularly in an exploratory research as mine. Denscombe (2017) suggested that multiple methods result in a more complete picture of the subject under investigation compared to uni-method data collection. Indeed, the inconsistent findings in three data method tools (food choice diaries, in-depth interviews, and accompanied shopping trips) in my research actually added to a more comprehensive understanding of my research topic.

Additionally, after I transcribed the in-depth interviews and accompanied shopping trips, I sent them to the fathers to recheck and ensure the accuracy of the data, as Creswell (2009) suggested.

3.9   *Methodological Limitations*

There are methodological limitations to my research involving the nature of the research sample. The participants comprise a generally homogeneous group of fathers. In my case, it was fathers who have limited incomes and have a low-middle education, from one Muslim sect (Shia), and from only rural areas of the Alhasa Region in the Eastern Province of Saudi Arabia. The results of my doctoral research or any similar qualitative research thus cannot be generalised as a result of drawing on a comparatively homogenous group (Creswell and Poth, 2018). Consequently, this means

that this doctoral research may have missed critical insights from other family types from different areas of Saudi Arabia where food socialisation may be practiced differently.

Moreover, due to Saudi Arabian customs and traditions, the perspective of mothers does not feature in this study. In Saudi Arabia, it is difficult for male researchers to research with female participants without the express permission of a male guardian due to local tradition and custom (Al-Otaibi and Yasmeen, 2014). Not only would this complicate the research process, but it is also the case that in the majority of cases where such permission has been sought, male guardians have actually refused (Al-Otaibi and Yasmeen, 2014). In Saudi society, males are usually responsible for family tasks outside the home, including providing food for the family. Females, on the other hand, are responsible for preparing the food for the family. Therefore, there may be some gaps in terms of understanding the roles of mothers in family food socialisation in general and for children in particular.

3.10 Conclusion

This chapter has presented the methodology used in this study. In the research design, the theoretical position and the rationale for the type of study and the methods employed were explained. Next, I explained in detail both the data collection and data analysis methods applied. The study uses a qualitative approach comprising food choice diaries, interviews, and accompanied shopping trips with a total of 32 fathers. I used thematic analysis to analyse the data. Finally, this chapter looks at the transferability, credibility, dependability, and confirmability. It will now move on to chapter four to present my research findings.

4 Chapter Four: Findings

4.1 Introduction

This chapter presents the findings from the 32 food choice diaries, 32 in-depth interviews, and 32 accompanied shopping trips. The chapter is divided into three sections. The first section 4.2 emphasises how fathers in Saudi Arabia, as key agents of socialisation, make food choices for their children within the context of (un)healthy food and the issue of obesity. The second section 4.3 focuses on factors affecting fathers in Saudi Arabia as key agents of socialisation influencing food choices for their children within the context of (un)healthy food and the growing problem of obesity. The third section 4.4 addresses how fathers in Saudi Arabia perceive their roles and responsibilities as consumer socialisation agents for the food they choose for their children.

Eight distinct themes, with accompanying sub-themes, were identified from the thematic analysis of the data (see Table 4.1). They span micro- and macro-influences, including father-child food interaction, food choices, food role modelling, food education, food control, and food encouragement.

Table 4.1 Summary of themes and sub-themes of the main study

Objective	Theme	Sub-theme
To explore how Saudi fathers make healthy and (un)healthy food choices for their children, with reference to growing problem of obesity in Saudi Arabia.	**Father-child food interaction**	▪ Food shopping involvement ▪ Father-son interaction in the food store
To explore why Saudi fathers make healthy and (un)healthy food choices for their children, with reference to growing problem of obesity in Saudi Arabia.	**Endogenous factors**	▪ Physiological factors ▪ Nutrition knowledge and beliefs ▪ Social factors
	Exogenous factors	▪ Economic factors ▪ Cultural and religious factors ▪ Marketing factors
To explore how fathers in	**Food availability**	▪ Types of food availability

Saudi Arabia perceive their roles and responsibilities as socialisation agents for the food they choose for their children.	**Role modelling**	▪ Father's own (positive/negative) dietary habits ▪ Family food gathering
	Teaching about food	▪ Approaches to educating children about food ▪ Children's responses to their fathers' teaching about food
	Restricting and controlling children's unhealthy food consumption	▪ Strategies for restrictions unhealthy food ▪ Food control
	Encouraging children to consume healthy food	▪ Strategies used to encourage children to consume healthier selections

4.2   Findings (1): How Fathers Make Food Choices for their Children

This section focuses on how fathers in Saudi Arabia act as key agents of socialisation making food choices for their children. Table 4.2 shows the themes and sub-themes for meeting the study's objectives.

Table 4.2 Primary theme and sub-themes related to how fathers make food choices for their children

Theme	Sub-theme
Father-child food interaction	▪ Food shopping involvement ▪ Father-son interaction in-store

4.2.1   Father-Child Food Interaction

The themes presented in this section are: food shopping involvement, and father-son interaction in-store.

4.2.1.1   Food Shopping Involvement

The data that suggested fathers were taking an active part in their son's food socialisation. They viewed it as an excellent opportunity to educate their sons to be responsible about food during the actual shopping. This occurred in two ways. Firstly, food safety. As one father explained:

...I usually explain to my sons about food regarding (un)healthy, and how to check the expiry date of the food in the food store…
(Father 3, in-depth interview).

Secondly, choosing food for themselves and others. Specifically, these fathers encouraged their sons to make food choices for themselves, for their siblings, and in general for the household. These fathers believed that these responsibilities and roles facilitate teaching sons about food shopping and preparing them on how to make food choices for the future. Reflecting the nation's customs and traditions, fathers gave these roles only to boys. To illustrate:

In order to teach my boy [XXX] how to be responsible for household food, I give him two Riyals and I ask him to choose any food or drink he likes. I don't go with him inside the store. I wait for him in the car. Let them see, face, and learn how to be responsible in the future.
(Father 13, in-depth interview).

I bring all my boys along on the food shop with me because there are needs, they must choose them, for example, biscuits and crisps. I give them the freedom to choose their food needs. I give them space to think about the food they choose. Or I give my kids space to choose food in order to think, build, and develop their food choice skills, which might help them in future.
(Father 16, in-depth interview).

However, there was potential for this freedom to backfire, if sons are not choosing healthy food options. Thereby further contributing to the obesity problem in Saudi Arabia:

Today, I won't purchase crisps and chocolates for my kids because they aren't with me. I prefer to shop with my kids, and they can choose whatever they want.
(Father 17, accompanied shopping trip).

Some fathers mentioned that their sons learned from them by observing them during food shopping trips. As one father explained:

I think my oldest boy [XXX] learned from me how to order from restaurants. Sometimes I ask him to order from [XXX] restaurant, and one day I was behind him when he ordered. The first thing he asked the receptionist about was whether the meat and chicken was local or from an international company. I was very surprised and at the same time

proud of him… I usually do ask restaurants this question before I eat with my family there. So, I think he copies me…
(Father 28, in-depth interview).

4.2.1.2   *Father-Son Interaction in the Food Store*

Direct attention to father-child interactions and communications in food stores emerged as another sub-theme from the data. Within this sub-theme, sons used various strategies to influence their fathers to choose the food they preferred in food supermarkets, (see Table 4.3). For example, some sons deployed 'emotional strategies' such as sadness, pouting, madness, anger, and sobbing. Other fathers noted a persistent strategy where their sons tended to argue when their father refused to accept unhealthy food in the shopping basket. One father mentioned that his son often begged him to choose what he wanted, while another even sneaked unhealthy products into the shopping basket unnoticed.

Table 4.3 Strategies used by sons to influence their fathers food in supermarkets

Strategy	Example
Sobbing	*If I don't choose the food, he asks me to choose, he'll cry from the grocery store and won't stop until tomorrow.* (Father 11, in-depth interview).
Pleading	*Dad may God bless you, I want Oreo biscuits because I love it. He kisses my hands, and, in the end, I purchased it for him.* (Father 2, in-depth interview).
Arguing	*You know why I don't take my kids with me to the food store? They always argue, for example, to choose candy floss. There is no nutritional value of this candy. It is all rubbish.* (Father 24, in-depth interview).
Sneaking	*My son [XXX] quickly put her in the shopping basket. I ask him, "What did you put in the basket?" He said, "I got sweets, biscuits, and crisps." "Are you going to eat all of them? I asked. He replied: "Yes".* (Father 12, in-depth interview).

Various strategies were employed by the fathers to avert conflicts with their sons to comply and accept their food choices, (see Table 4.4).

Table 4.4 Strategies applied by fathers to avoid conflicts with sons in supermarkets

Strategy	Example
Evaluating the food	*I try to ask my boys to have a basket and ask them to choose what they like to eat. Then, I evaluate all the foods they choose,*

	and I see if they are good for them, I buy them. Otherwise, I return them. All these actions are before I pay. (Father 15, in-depth interview).
limited quantity of unhealthy food	*Before I enter the supermarket, I give my sons instructions. "[XXX and XXX] please listen to me. Everyone should choose only one or two things, for example, biscuits and crisps." See this is before we get in the store. But if I don't give them these guidelines, God help me [laughs].* (Father 9, in-depth interview).
Convince to choose healthy food	*If my boys choose chocolate and they pressure me to buy it, I tell them, "I just fixed your teeth! Would you like to eat chocolate now and then your teeth will be broken again?"* (Father 3, in-depth interview).
Returning unsatisfied food chosen	*My boy [XXX] what does he usually does if we go to a food supermarket? He puts food in the shopping trolleys. What do I do? When I see him busy, I pick the food that is unhealthy and return it to the* shelves. *I sometimes leave a few things for him.* (Father 28, in-depth interview).
Asking the sons to picking out food	*If I go with two of my boys food shopping, I'll ask one boy to push the shopping trolley and ask the other to get food from the shelves. Then, I stop the kid who is pushing the trolley and asked him to choose that food. This is how I teach them.* (Father 6, in-depth interview).

The findings suggest these strategies take into account the concept of food socialisation in terms of food choices in food stores. First, some fathers claimed that they permitted their sons to choose food and put what they wanted in the basket. These were then evaluated and assessed at the payment point in the store in order to filter the food their sons had chosen. Second, other fathers taught and obligated their sons to choose a limited quantity of unhealthy food before they arrived at the food store. Third, several fathers gently convinced their sons to choose healthy rather than unhealthy foodstuffs for health reasons. Fourth, other fathers reported that when their sons chose food that they did not agree with, they returned them immediately to the shelves once the sons had looked away. Finally, in order to educate his sons about food, one father pointed out that he asked his sons to assist in picking out food during food shopping.

In summary, the findings under this theme suggest that fathers also see this as a valuable learning experience for their sons. The data also showed that the fathers' sons learn ways of being successful as influencing agents by use of progressively advanced influence and negotiation strategies when choosing what they desire. In contrast, the fathers also use various communications strategies to interact with their sons in the food store. Both themes of father-son interactions and communications during food shopping centre on food socialisation with respect to food choices.

4.3 Findings (2): Factors Influencing Fathers' Food Choices for their Children

This section presents the findings of the research, focusing on why fathers in Saudi Arabia act as key agent of socialisation making food choices for their children. Table 4.5 presents the themes and sub-themes to answer this objective.

Table 4.5 Primary themes and sub-themes related to factors influencing fathers food choices for their children

Theme	Sub-themes
Endogenous factors	▪ Physiological factors ▪ Knowledge and beliefs about nutrition ▪ Social factors
Exogenous factors	▪ Economic factors ▪ Culture and religion factors ▪ Marketing factors

4.3.1 Endogenous Factors

In this theme, the fathers presented five endogenous factors - physiological factors, knowledge, beliefs, and social factors - that influence the fathers when deciding to choose and consume food for their children in the context of the growing problem of obesity in Saudi Arabia.

4.3.1.1 Physiological Factors

The transferral of food preferences is beneficial and considered in the context of the socialisation process. The fathers' food preferences were reported in various ways.

Firstly, when fathers were asked about the preferences of specific food they chose for their children, some fathers opted for sweet and salty flavours over bitter and sour flavours. These fathers reported that they selected fruits rather than vegetables for the reason of sweetness. Therefore, *socialising* children into eating fruit might be preferable to forced practices as the latter could give rise to food dislikes. As two fathers pointed out:

> *I mostly choose fruits for our diet because I believe fruit is sweeter. My kids like fruits such as mango, watermelon, and others, and I don't impose this on them. I was not forced by my parents when I was a child to eat fruits, but when I was a child, I was permanently forced to eat vegetables.*
> (Father 31, in-depth interview).

> *I hate the taste of broccoli and I don't like cauliflower at all... It's true I don't buy these stuffs, but I buy different types of fruits and I encourage my children to eat them. Dates are always in our meals. Our refrigerator is not without apples, strawberries [because] these things are delicious, sweet and everyone likes them.*
> (Father 4, in-depth interview).

Secondly, other fathers based their choices for specific food and drinks on their nutritional value for their children. The food choice diaries showed that one fathers chose Caesar juice for his son for the reason that it was 100% juice without added sugar and artificial colouring (Father 7, food choice diary). Another father stated that:

> *I prefer any food and drinks from Almarai because all their products have less fat. So, this is what I look for in milk, cheese, and other [products] for my sons. These kinds of stuff are healthy for them.*
> (Father 15, accompanied shopping trip).

Thirdly, several fathers mentioned that they compared price and quality in their food choices, opting for quality of food and beverages instead of paying attention to price. One father remarked that:

> *To be honest, I don't care about price and I don't take it into consideration. Yes, it is true the most important thing is the quality of the product. I do care about it. Let me to give you an example: some people prefer to buy Alrahoa chicken, at 12 Riyals. For me, I don't buy Alrahoa products. I only buy Alyoum chicken from Almarai company. Yes, it is expensive, but it is the best quality and I prefer it.*

(Father 14, in-depth interview).

In the same vein, the food choice diaries and accompanied shopping trips revealed that some fathers preferred a particular food based on its properties. These characteristics of food included the components of the product and its quality. Through food choice diaries and accompanied shopping trips, two fathers stated that:

> *I prefer to choose sandwiches for my kids from Al Najah bakeries because their stuff doesn't contain excess dough.*
> (Father 18, food choice diary).

> *There are too many types of oil. However, I prefer to select the Sunny brand of the oil. I usually buy it because it is quality sunflower oil and I can use it many times for frying potatoes for my kids.*
> (Father 19, accompanied shopping)

Finally, some fathers reported that their food choice preferences for their children stemmed from the fact that the food was fresh. The data recorded by some fathers in the food choice diaries obviously showed that some particular types of food were considered to be fresh. These foods comprised bakeries, fruits, vegetables, and dairies.

The findings in this section suggest the transfer of food preferences from fathers to their children could lead children to like or dislike particular food or food groups. In the next section, I present factors regarding nutrition: fathers' knowledge of it and their beliefs in it.

4.3.1.2 *Fathers' Knowledge and Beliefs about Nutrition*

Fathers' nutritional knowledge was another factor influencing them to choose certain foodstuffs for their children. Fathers' nutritional knowledge might shape their food socialisation practices. Many fathers have at least a basic grasp of nutrition, which was illustrated in variety of ways. Some fathers were aware that the products they bought were (un)healthy food, noting that:

I know in the last day in the food choice diary, I have written (sugary donut cakes, croissants with chocolate, and Pringles). I bought these things for my kids and I know these things are unhealthy, but I have no choice for; I have to buy these stuffs for them.
(Father 11, in-depth interview).

My kids' food aren't 100% healthy. I'll be honest with you. I buy some chocolates, biscuits, puffs, and indomie noodles, sweets for them. You know, these are all junk food, I know that…
(Father 5, in-depth interview).

… Unhealthy food is anything related to fast food. Fast food all with saturated fat… Healthy food are whole-wheat bread, fish, chicken, fruits, vegetables,
(Father 18, in-depth interview).

In addition, several fathers were also aware of some health issues associated with unhealthy food, such as hyperactivity, diabetes, tooth decay, and obesity. Several fathers commented that:

Unfortunately, I suffer not only from the obesity problem among my kids, but also diabetes illness. I know, my kids always choose Snickers, Twix, and Mars chocolates, and they eat these chocolates with Pepsi. Guess what? They eat these things after lunch straight away. All of these are diseases. I told them, but they don't understand…I am very tired.
(Father 7, in-depth interview).

… Sweets contain high amounts of sugar, and this will be led to tooth decay. My oldest son's [XXX] tooth is broken because he likes sweets. We went this morning to the dentist, and I have another appointment for his sister next week. All about sweets, chocolates…
(Father 1, in-depth interview).

… You know, Pepsi has awful health effects because it has a lot of sugar. Pepsi causes diseases on the whole body in general and on the kidneys in particular. Similarly, indomie noodles are unhealthy and have no nutritional value.
(Father 20, in-depth interview).

Although these fathers had essential nutritional knowledge, they still allowed their children to eat unhealthy food. As two fathers stated:

It is true chocolates are unhealthy and they can harm the body, but there is cacao in it. It is true cacao has a lot of sugar, but the cacao is also beneficial for the child's mentality and intelligence. So, my kids can eat as much of it as they want, but no sweets…
(Father 12, in-depth interview).

Lay's Chips is a big problem. They are very harmful… all about the hydrogenated oil…My kids are addicted to it. They eat and eat and eat three and four small bags daily. I know, it is not good for them, but it is OK they can consume it as they want.
(Father 18, in-depth interview).

Further analysis showed that although many fathers had nutritional knowledge, this is filtered through their beliefs. It is interesting to note that some fathers believed certain unhealthy food and drinks were actually healthy for their children and they allowed them to choose such food and drinks. Some fathers choose ice cream for their children because they believe that ice cream is healthy and contains healthy food ingredients. Two fathers pointed out that:

...I choose ice creams for my kids. Of course, it is healthy, who told you it isn't? Don't listen to the media... It is high in calcium and probiotics which are good for a child's body...
(Father 29, in-depth interview).

I allow my kids to choose ice creams. I have confidence in the ice creams. Compared to other unhealthy food and drinks, ice creams don't have healthy side effects.
(Father 2, in-depth interview).

Likewise, one father allowed his children to drink soft beverages because he believed that drinking soft drinks is acceptable especially when consuming heavy meals such as rice with chicken or meat. The father believed drinking soft drinks after big meal helps in the digestive process. Another father believed that sugary juices are healthy. During food choice diary and interviews, two fathers stated that:

Thank God, I successfully warn my kids against drinking Pepsi unless they eat a fatty meal. Yes, I allow them to drink Pepsi if they eat Mandi, for example. It is burning the food they ate…
(Father 3, in-depth interview).

I believe all Almarai juices are tasty and healthy.
(Father 17, food choice diary).

For others, they believed chocolates, specifically dark chocolates, contain high nutritional values for children. They claimed that dark chocolates include a high amount of milk and few calories. As three fathers in the food choice diaries remarked:

> *I usually choose Godiva chocolate. It has low* calories.
> (Father 4, food choice diary).

> *I choose galaxy chocolate because it has a high amount of milk.*
> (Father 6, food choice diary).

> *I choose nutella chocolate. It has cacao and cacao is perfect for children's brains because it has high amount of milk.*
> (Father 15, food choice diary).

Overall, these findings show that fathers act and transmit what they know about food nutrition to their children. The results also suggest that fathers' food consumption and beliefs continue and stay with their children as they grow older. The next factor to be presented is the social factor.

4.3.1.3   *Social Factors*

Numerous interactions occur between fathers and other family members as well as social pressure in terms of the food socialisation process. Firstly, many fathers said they conflicted with their wives with respect to food practices/socialisation. This cut both ways, with healthy and unhealthy food choices. While several fathers intended to choose unhealthy food for their children, their wife advised them not to make such choices for health purposes. Furthermore, some fathers noted that if they chose unhealthy food and returned home with them, their wives would reproach them for choosing such food. As two fathers explained:

> *If I go to food shop, I do choose unhealthy snacks for my children, but my wife does not agree, and she suggests healthy stuff instead for them. She believes indomie noodles, chocolates, and sweets cause hyperactivity. From my side, these such unhealthy snacks are for fun for my youngest kids. I feel comfortable psychologically if I see my kids eating these foods. Honestly, I don't care about her views. I do what I feel is comfortable for me and my kids, especially [XXX] the youngest son [laughs].*
> (Father 31, in-depth interview).

If I choose Pepsi for my kids, I usually get blame from my wife. 'Why did you choose this drink for them? You don't listen to me!'
(Father 20, in-depth interview).

In contrast, the data from the food choice diaries reveal that several fathers reported their wives requested that they choose unhealthy food for their children. Some fathers did not agree with and ignored these food requests. During accompanied shopping trips one father said:

Look at the list, she requests chicken Maggi for the soups. See the Maggi in that section, but I won't buy it. If I see it in the list something, I don't agree with it, I tell her 'Sorry, I forget to buy it' [laughs]. You know, all women don't know anything about healthy food. They care about how beautiful and tasty it is.
(Father 3, accompanied shopping trip).

However, others consented to choose such food and drinks for their children. One father remarked:

My wife requests crisps, puffs, chocolates, and others every two weeks. Yes, I agree with her, these stuffs are important for our kids. You know, if we give them these snacks, they keep the house clean, and we get rid of their annoying us. Then the house becomes quiet. Believe me, try that with your daughter and you'll see…
(Father 9, in-depth interview).

The data also show that many wives are responsible for preparing food for the family. Some fathers were keen on choosing healthy food options for their children. Nonetheless, signs of discontent with some fathers and blaming others were found in their comments regarding not being able to make healthy dietary choices for their children. Hence, there appears to be various disagreements with their wives in terms of food socialisation. One father pointed out that:

I buy fruits every single week. I usually tell my wife she should make fruits available in front of our kids' eyes every day, but she doesn't listen. My kids like fruits and I provide them. The problem is with my wife. Last night, I came home, and I saw my kids eating indomie noodles. I couldn't hold my anger and I told her she was the root of my kids' eating problems.
(Father 22, in-depth interview).

Secondly, further data analysis reveals that many fathers noted an intergenerational factor in food socialisation. The fathers were influenced by intergenerational influences mostly in the form of choosing unhealthy food and drinks for their children. Two fathers elucidated on this:

I was living with my parents for twenty years. I was eating and drinking the same as they ate and drank. I also lived with them after I married for eight years. For my family now, I try to choose food and drinks the same as my parents chose for our family. For example, I choose the same box of soft drinks for my kids that my father chose for us.
(Father 6, in-depth interview).

There is a biscuit called "Haylayf". It is very hard to find. If I see it, I choose it straightaway for my kids. Oh, I still remember that my dad bought it for me and my sisters and brothers.
(Father 9, in-depth interview).

Other fathers preferred traditional food and continued socialising their children to eat this kind of food. Feelings of nostalgia of such traditional food was an intergenerational factor. One father commented that:

I like traditional food such as flour porridge gruel, harissa, and regag bread. When I open my eyes, I see these foods my mother made for us. I actually buy them and consume them. I urge my kids to consume these foods. They love it, especially the oldest son [XXX].
(Father 11, in-depth interview).

However, others consciously rejected the food choices they experienced as a child. He said:

Here at my parents' house, there is no really heathy food. The routine diets are mostly with fat. If you come and see how much fat they put in the lunch meals, samosas and macaroni, it's all oil, oil, salt, salt, salt, sorry it is all wrong. Sorry, I don't do that with my kids.
(Father 26, in-depth interview).

Thirdly, interestingly, when grandparents played the role of food socialisation agents for some fathers' children, some fathers disagreed with them on dietary issues. For example, several fathers mentioned that grandparents socialised unhealthy food and drinks for their children. Some fathers even became upset and angry regarding the food

that grandmothers served to their children. In contrast, other fathers did not resent their parents or resist when they offered less nutritious food to their children. Two fathers stated that:

> *My kids' grandma gives them indomie noodles, fizzy drinks such as Pepsi and 7 Up. She also gives gluten sweets, chocolates, and others. I don't like to see these practices from my mom. These kinds of food jitter me. I know, all these things are bad for my kids, but what shall I say? I sometimes compliment my mom, but sometimes I can't. May Allah give me more patience.*
> (Father 32, in-depth interview).

> *When my mum offers chocolates, ice cream, I don't mind, and I don't feel upset. Of course, I know my mom likes my kids so much [laughs].*
> (Father 21, in-depth interview).

Some fathers were influenced by their parents to choose specific food for their children. One father remarked that:

> *I and my kids went to Al Medina. Their grandpa was with us. One day, before we entered the food store, he shouted out, 'Let your kids buy what they want… Give them money to choose their food interest, you are stingy with your kids…'.*
> (Father 2, in-depth interview).

However, other fathers were not affected by their parents to choose specific food for their children. One father stated that:

> *I am not influenced by them. My choices are made solely by me…*
> (Father 14, in-depth interview).

Finally, further evidence demonstrates that siblings act as food socialisation agents for some fathers' offspring. Nevertheless, some fathers disagreed about the nutritional food that some of their children provide to their siblings. The data show that some fathers restricted certain food, particularly unhealthy food, for their children. In this case, therefore, the girls sometimes ask their siblings (brothers) to choose specific food for them from the store in ways that are concealed from their fathers. As one father pointed out:

> *I know, my kids choose food behind my back. Yesterday, they asked their brother [XXX] to buy Pepsi and I didn't know that. Then, I saw the cans in the rubbish bin, and I asked them, 'Who bought Pepsi for you?' They said [XXX]*

the oldest brother. I gave [XXX] the son a long lecture about how he should ask me about anything he wants to buy from the grocery store for the family in general and for his sisters particularly. I rebuked him and warned him to not do it again.
(Father 1, in-depth interview).

Taken as a whole, the results in this section reveal those other members of the family influence fathers in the process of food socialisation. The sections below turn to the exogenous factors that influence fathers when they are making food choices for their children.

4.3.2 Exogenous Factors

In this theme, the fathers presented three exogenous factors that influence them when deciding to choose food for their children. These are: economic, cultural and religious, and marketing factors.

4.3.2.1 Economic Factors

Further analyses show that budget limitations are a key barrier impacting fathers' ability to choose (un)healthy food for their children. The majority of the fathers had a fixed budget for household food, and they could not exceed this amount. In contrast, other fathers did not have a fixed amount of funds available for food and beverage consumption. Two fathers said:

I set a certain budget every month for food consumptions, and I try not to exceed it. You know, you have everyday food consumption, and sometimes you have emergency consumption, sometimes something happens suddenly, or something unusual. Sometimes, if my kids see something that they forgot to put on the food list, they'll ask me to choose it for them. All this in mind, I have to plan my food budget.
(Father 28, in-depth interview).

For me, everything has a budget except food and clothes. I know my wife and my kids don't request food unless they need them. If they need it, I offer it immediately. I can't say to them that I don't have money; it is dishonest to say that to them…
(Father 30, in-depth interview).

Some fathers were not able to choose highly nutritional food such as fruits on most days due to limited financial resources. These fathers appeared to provide a large quantity of fruits only after they receive their salary (usually the first day of every month). For the rest of the month, they either do not consume or consume just a few fruits. In the food choice diaries and interviews, two fathers commented that:

> *If I find that I can't consume fruits now, I won't push myself to choose them. Once I get my salary, I choose whatever fruits my children ask me to buy. By the middle or end of the month my budget is decayed, so I don't purchase fruits for them. In the middle of the month, if they ask me to buy bananas or grapes, I ask them to wait until I get my salary or, if I have some money, I buy a few bananas and grapes. A box of mango is about 43 Riyals, of course. I can't buy it in the middle or end of the month…*
> (Father 23, in-depth interview).

> *I choose nuts and salmon fish only when I receive my salary.*
> (Father 14, food choice diary).

Evidence from the data also suggests that financial commitments for several fathers was another obstacle that influenced the fathers in their selection of (un)healthy food for their offspring. The financial commitments included building a house, existing debt, and bank loans. As one father pointed out:

> *I've been building a house. You know, building a house takes a lot of expense and I have bank loans… Honestly, my salary itself is not enough to cover these expenses as well as household expenses. I work extra hours in order to cover everything otherwise it is very hard to meet all my family requests…*
> (Father 32, in-depth interview).

In addition to the fathers' budget, most fathers found that the cost of (un)healthy food was a considerable factor shaping the food socialisation process. The data from both interviews and the accompanied shopping trips show that some fathers were aware of healthy food prices and appeared as a key barrier to choose such food in their food shopping for their children. One father explained that:

> *There is a section in Alamer as well as Carrefour regarding healthy foodstuffs. I can't choose these stuffs for my children as they are too expensive for me. The prices are four times the unhealthy snacks… There is a huge difference between healthy and unhealthy food regarding price.*

(Father 17, in-depth interview).

In summary, these findings suggest a limited budget and food prices appear to be a fundamental obstacle for fathers in the food socialisation of their children. Cultural and religious factors are now considered.

4.3.2.2   Cultural and Religious Factors

Serval fathers appeared to follow specific food habits informed by wider Saudi society. Several negative manifestations in terms of food habits are identifiable when fathers adhere to cultural trends (see Table 4.6). Generally, the consensus among the fathers regarding the food habits detailed in Table 4.6 is that they contribute to childhood obesity.

Table 4.6 Negative food habits among some fathers

Negative food habits	Example
Consuming unhealthy snacks between meals	*We have as a family three meals a day. I ask my wife to prepare snacks after lunch and after the dinner. Yesterday, my kids had I Pepsi, chocolate cakes, and biscuits as snacks after lunch. Believe me, these kinds of snacks are common in our society.* (Father 30, in-depth interview).
No fixed time for meals	*For me, I don't have a specific time for consuming meals. We eat our lunch at 4:00 p.m. It is fine for me and my kids to have our dinner at 10:00 p.m.* (Father 21, in-depth interview).
Regularly consume food with saturated fats	*What are our meals? All about carbohydrate and fats. We usually eat rice for lunch and spaghetti and pasta for dinner. Not only that, but we also cook them with a lot of oil. Our consumption is chaos. There is no healthy food, always oil oil oil... [laughs]. Yes, I told you, this is our culture, I can't change it. My kids internalise this type of food. This leads to obesity…* (Father 8, in-depth interview).
Regularly consume food with high levels of sugar	*Social customs and traditions require us to exchange gifts such as sweets and other unhealthy food. Before I came for the interview, I dropped my kids off at their friend's house, and before dropping them we went to a supermarket and chose a range of crisps, sweets and sugary juices as gifts.* (Father 11, in-depth interview).
Choosing and consuming a large quantity of food	*One of the food customs and traditions of [Saudi] society is that we eat in large quantities. Let me give you an example. My family asked me to buy rice and chicken from a restaurant for lunch. I went and chose a whole chicken*

> *with rice. My kids and I usually eat a quarter of a chicken. So, what did we do? We consumed the whole chicken and all the rice… You know, we eat our meal in a big dish, and everyone stays there until it is finished. That means we eat beyond our capacity…*
> (Father 9, in-depth interview).

In addition to society's food habits, there was a general consensus among all the fathers confirming religion influenced the food socialisation process. This manifests itself in several ways. Evidence from the accompanied shopping trips suggests that some fathers were religiously strict in choosing all kinds of food for their children. Hence, these fathers carefully read the food's labels and wanted to know where the food was coming from. They reported that if they had food options to choose between, they would choose Islamic products. One father commented that:

> *My kids like tuna fish. There are too many kinds of tuna, so I have to find out if it is the Halal or not and where it is from? I usually choose Aloha tuna. It is Halal and it is from Oman.*
> (Father 28, accompanied shopping trip).

Some fathers appeared to distrust international food products, specifically those from non-Muslim countries. The imported food that influenced the fathers' food choices for their children include chicken, meats, frozen burgers, and fish. They doubted that these imported foods had been slaughtered according to Islamic scripture. During the interviews and accompanied shopping trips, two fathers stated:

> *I doubt any products that come from non-Muslim countries. I don't choose Sadia chicken. It comes from France and France is not a Muslim country. No way I'm choosing this chicken. Although it is cheap, it is impossible to have it for our meals, no way… No way… I can't feed my kid's Haram chicken. I didn't see how they slaughter the chicken…*
> (Father 32, in-depth interview).

> *One day my kids asked me to buy Americana burgers. They don't know about Halal and Haram stuff. I told them, 'No, because I can't guarantee how they make it. I don't trust them. So, I won't choose it for you'.*
> (Father 17, accompanied shopping trip).

The data also revealed fathers' distrust of food from international fast-food restaurants, such as Burger King, McDonald's, KFC, Pizza Hut, and others. They said the reason for not consuming from these food outlets was the lack of confidence in the purity of the food as well as doubts about the sanctity of them (slaughtered or not). As two fathers said:

> *I ban my kids from going and choosing from these restaurants. I sure that McDonald's and such restaurants are Haram. Sorry, this is not a feeling, this is a certainty. Their chicken is not slaughtered in the Islamic way. I studied Islamic religion for a long time. So, I know what Haram and Halal is.*
> (Father 31, in-depth interview).

> *No, no, no, no, no. It is impossible to choose for my kids from the international fast-food restaurants. They are a red line. I am afraid to choose from there. I don't trust their chicken and meat. Everyone in society knows that their chicken and meat aren't Halal. So, the sources of chicken and meat aren't guaranteed. They mix their meat with pork meat. They have no credibility. The method of slaughtering their stuff isn't guaranteed.*
> (Father 22, in-depth interview).

Many fathers reported that they distrusted any imported food products that included animal gelatin such as beef gelatin or pig gelatin, especially from non-Muslim countries. These fathers noted that they checked the label for every single candy, chocolate, and cake they chose for their children to see if it contains any kind of animal gelatin or not. However, other fathers indicated that they accepted vegetable gelatin. As two fathers expressed:

> *Mostly, I read the ingredients before I choose sweets for my boy [XXX]. If the sweets contain pig gelatin or pig fat, I definitely won't choose them for him. This is what we believe in Islam. You know, pig is Haram.*
> (Father 27, in-depth interview).

> *Vegetable gelatin is allowed in Islam, unlike animal gelatin. If I see crisps, candy, or others with vegetable gelatin, I don't mind, it is OK. I choose them for my kids…*
> (Father 1, in-depth interview).

A boycott of American products throughout Islamic countries, including Saudi Arabia, began many years ago. Some fathers hence claimed that they do not choose

American food products at all. Others reported that they have stopped going to fast food

restaurants because they believed that these retailers are American companies, and they

support Israel. Two fathers through interviews illustrated that:

> *There are a lot of Indian and American food products. I focus not to choose*
> *American food products. You remember, we boycotted them many years ago. I*
> *am still doing that. I don't choose American food products unless there are no*
> *local alternatives.*
> (Father 26, in-depth interview).

> *I know McDonald's and Burger King are American fast-food restaurants. I told*
> *you before I don't like buying anything from America. So, I don't choose food*
> *from these restaurants. I used to buy ice cream from McDonald's, but I stopped*
> *because some of these companies' profits go to support Israel.*
> (Father 20, in-depth interview).

Equally, several fathers noted that they have boycotted products from Denmark

due to the Prophet Mohammed caricature crisis in which a Danish newspaper published

images of Muhammed. One father said:

> *I don't choose any food products from Denmark because of the caricatures of*
> *our prophet. I have a negative attitude toward them, so I choose the local*
> *alternative products. For example, I don't choose the cream cheese of Puck. I*
> *choose Almarai cream cheese instead.*
> (Father 23, accompanied shopping trip).

Conversely, because some fathers wanted to avoid food that do not fit with

religious beliefs, there was an agreement among all fathers that they trusted Saudi fresh

and frozen chicken and meat, e.g. fresh burgers from local butchers. Specifically,

several fathers reported they trust local butchers who are from the same sect as

themselves (Shia). Others asserted that they were more confident if the other food

items, such as breads, cereals, tomato sauce, eggs, were from the same doctrine as

themselves. Some fathers, in the accompanied shopping trips, pointed out that:

> *I don't choose Americana frozen burgers because I don't guarantee its source. I*
> *choose from Alalamer butcher. I feel confident if I buy meat, chicken, and*
> *burgers from them. I definitely guarantee them…*
> (Father 10, accompanied shopping trip).

> *I usually choose Prima cereal for my kids because the company is from our group…*
> (Father 8, accompanied shopping trip).

> *I choose Nadec cream cheese instead of Puck cream cheese because I prefer a local company.*
> (Father 2, accompanied shopping trip).

The data also indicated that while some fathers trust local restaurants to eat with their children, they had two criteria in order to choose them. Firstly, the restaurants should be from the same religious sect as themselves. Hence, the fathers had a limited number of trusted restaurants in the area and their children recognise these restaurants. Secondly, other fathers questioned their friends and relatives about the restaurants they targeted. Their questions were centered around the source of meat and chicken of the restaurant. As two fathers said:

> *I only trust Shia restaurants. Do you know [XXX] restaurant? This is for one of us. So, my kids and I are psychologically reassured... I trust this restaurant. I don't go to others…*
> (Father 8, in-depth interview).

> *There are a lot of local restaurants. I ask and ask and ask my colleagues about any restaurants before I go. So, now I have my list. I have only a few restaurants that I am confident about their food, such as meat and chicken. When I tell my kids that we are going to eat outside and ask them to choose which restaurants they prefer, they already know the list of the restaurants that I allow them to choose among them. They know McDonald's and such restaurants are prohibited.*
> (Father 28, in-depth interview).

Traditionally, some fathers choose energy-dense products as one of the forms of delight in society for religious occasions. They pointed out that in religious celebrations all kinds of food should be available for everyone, including children, because it is a time for happiness. It is only for specific days in the year. However, other fathers disagreed with these food products and sharing them with their children. Comments from two fathers represent conflicting perspectives on the influence of religion on food choices and childhood obesity:

On Eid Day, my kids eat a really large quantity of candies and chocolates. You know, these quantities of junk food they eat should be enough for a year. I request our religious occasions be without these kinds of food. We should search for nutritious alternatives for our children. We kill them... we kill them… We lead them to death…

(Father 22, in-depth interview).

Look! How many religious celebrations do we have in a year? Two, three, four in a year… Do you think the kids will die if they eat some sweets and chocolates on those days??… Let them eat… Let them enjoy their day…

(Father 19, in-depth interview).

In sum, the results in this section reveal that traditional and religious food habits have a significant influence on fathers when they choose food for their children. Consequently, fathers' food habits, as well as religion, could be ingrained and transmitted to their children through the socialisation process. Marketing factors are now presented.

4.3.2.3 Marketing Factors

From the data, marketing activities appear to be an essential determinant of food choices among the fathers. For instance, price promotions and advertising affected the fathers in relation to the process of food socialisation. Firstly, the vast majority of fathers reported that they give high priority to price promotions for the food they choose for their children. Despite these fathers mentioning that they care about price promotions when they buy food, they do not take the offers into account even if they are in a sale if they do not need to buy such food. During the interviews and an accompanied shopping trip, one father commented:

Definitely, price promotions catch my attention every time, but I have to see my shopping list if I need the food that are on sale or not. If I don't want it and they offer it as free, I won't choose it. Food price promotions attract me all the time…

(Father 13, in-depth interview).

The same father, during an accompanied shopping trip, stated:

I pay close attention to the promotions shelves and compare them with my shopping list. For example, can see now in the list I need to choose cream

cheese and you can see there is a promotion of different brands of cream cheese. For me, I don't care about the brands. I do care about the price promotions. I choose Almarai cream cheese because it has the best price promotion. You get a large one and a second one half price.
(Father 13, accompanied shopping trip).

The data also find that some fathers moved from one store to another to obtain the best price deals for the food they choose for their children. One father remarked that:

I don't only consume food from Alamer store, but also, I look at other stores' promotions. I compare between stores if I see there is different regarding the promotions… Why not to go to different stores? Sometimes, Alamer store has promotions on kids' foodstuff such as candy, sweets, indomie noodles, something like that, so I choose these foods from Alamer store. Sometimes, they don't have promotions in these foods. I go to Panda store. My concern is to run behind the promotions… I don't have a specific store every time. Whoever offers promotions, I go to choose from.
(Father 12, in-depth interview).

In contrast, some fathers are not influenced by price promotions. This was typically because fathers believed such price promotions were a form of 'deception'. One father stated that:

All the food dealers are liars. I don't acknowledge their price promotions. They play a game in order to deceive the customers. For example, if they see what food products are most consumed, such as Puck cheese, what they do, they raise the price of the cheese and decline the prices for other cheeses. See how they taunt their customers. Or sometimes, they give price promotions for tiny, small amounts. Of course, they lie to people. Some of their promotions are only half a Riyal or sometimes less than half a Riyal. Believe me, they are liars and charlatans…
(Father 24, in-depth interview).

Secondly, the majority of fathers-maintained media advertisements did not influence their food choices for their children. Such ads were deemed inappropriate, and fathers considered themselves immune to them. To illustrate, one father said:

If they advertise a million times, I don't care. Did you see at Ramadan how many times the Vimto beverage advertised their drink? On one day, they did it at least a hundred times although they never affect me. And you know, I am 45 years old, so the advertisements don't affect me at all. My brain is mature, and I can recognise everything…
(Father 6, in-depth interview).

Others, however, claimed that media, specifically different platforms of social media, did influence them in their food choices. These fathers viewed the advertisements in a positive way. They mentioned that they know about the product and its features before they choose it. These fathers also noted that if the advertisements are for food, they need it for their family, they will purchase it. During interviews and accompanied shopping trips, two fathers said:

> *There is a store called Crepe Roll, selling cakes, pastries, and others. My kids love the chocolate pancakes and chocolate waffles from that store. They have offers every week and I do their Snapchat account. So, once they advertise their promotions, I go with my kids immediately, and they ask me to buy it. Bear in mind, I don't buy everything advertised. I only choose what I and my family want.*
> (Father 11, in-depth interview).

> *The density of advertisements for Noor oil is what makes me choose it.*
> (Father 7, accompanied shopping trip).

In summary, these findings show fathers' mixed reactions to the influence of marketing on their food purchasing for their children. That said, the findings also suggest the marketing of unhealthy food e.g., sweets, crisps, McDonalds, may be influencing children directly, and thus fathers indirectly. This will be considered further in the discussion chapter. This chapter now moves on to fathers' perceptions of their responsibilities for the food they select for their children.

4.4   Findings (3): Fathers' Perceptions of their Roles and Responsibilities for the food they Choose for their Children

Findings from the data analyses provide key insights into how fathers in Saudi Arabia perceive their roles and responsibilities as food socialisation agents for their children. Table 4.7 shows the themes and sub-themes explored within this research objective.

Table 4.7 Primary themes and sub-themes related to fathers' perceptions of their roles and responsibilities for the food they choose for their children

Themes	Sub-themes
Food availability	▪ Types of food availability

Role modelling	▪ Father's own positive/negative dietary habits ▪ Family food gathering
Teaching about food	▪ Approaches to educating children about food ▪ Children's responses to their fathers' teaching about food
Restricting and controlling children's unhealthy food consumption	▪ Strategies for restricting unhealthy food ▪ Food control
Encouraging children to consume healthy food	▪ Strategies used to encourage children to consume healthier selections

4.4.1   Food Availability

This theme presents one sub-themes, namely types of food availability that fathers choose for their children.

4.4.1.1   Types of Food Availability

The data recorded by several fathers in the food choice diaries clearly indicated that these fathers chose healthy and nutrient-dense food for their children. This is reflected in (Table 4.8), which makes it apparent that the fathers chose different types of healthy food for their children. The data from the food choice diaries also shows that several fathers appear to have a daily routine of whole-wheat flour breads and diary choices for their children.

Table 4.8 List of (un)healthy food and drinks found in the study

Healthy food	Unhealthy food
Fruits and vegetables	Chocolate
Chicken	Fast food restaurants
Meats	Ice creams
Fish	Sweets
Dairy	Cakes and pastries
Whole-wheat flour bread	Indomie
Peanut butter	Gum
Organic food	Energy and soft drinks
	High sugar juices
	Crisps

These fathers also pointed out that they chose fruits and vegetables on a weekly basis. However, others chose fruits and vegetables bi-weekly. Two fathers remarked that:

> *I choose fruits almost on a weekly basis. When I was living in a flat, I did not buy fruits every week. Now, our psyche has changed, and my kids have grown. Then, fruits became an essential item in the home. It is difficult to be without fruits. I mean, the basic fruits should be available at home, such as apples, oranges, bananas, and cucumbers.*
> (Father 21, in-depth interview).

Some of these fathers purchased fruits and vegetables for their children. However, they complained about their children not wanting to consume much fruit and vegetables.

> *Sometimes, my kids like to eat carrots, potatoes, and capsicums with meals, but they eat very few apples and oranges. I am tired of my kids. They don't eat fruits, they don't eat fruits, they don't eat fruits…*
> (Father 19, in-depth interview).

Some of these fathers reported that this problem was limited to the quantity of fruits and vegetable choices for their children. For others, they had the potential to curtail the variety of fruits and vegetables which their children were socialised into in order to minimise waste. One father commented that:

> *Apples can be spoiled sometimes in the refrigerator because my kids don't eat them. I reduce the quantity of apples and oranges I buy. It is forbidden to waste food.*
> (Father 12, in-depth interview).

For other fathers, however, varieties of less healthy foodstuffs selected for their children on a daily basis were revealed from data. Table 4.8 shows the unhealthy food and beverages mentioned by fathers in the study. Many fathers reported that they choose unhealthy food every month when they receive their salaries.

It emerged from the data that fathers who provide and socialise unhealthy food do so for several reasons. In fact, four motivations are rooted in the fathers' emotions

and desire to see their children content and happy, despite the fact that they know less nutritional food are unhealthy for their children.

Firstly, many fathers reported that although they did not consent to choose unhealthy food and drinks for their children, a sense of love motivated them to fulfil any requests for such food, particularly from their daughters. One father stated:

> *I'm eager to fulfill my family's, especially my kid's, desires and requests for food and drinks even though I don't agree with some or all of their choices. Let me tell you, there are a lot of things I don't like, but I offer them to my kids. For example, ketchup and mayonnaise. I know, these two sauces are unhealthy, but my kids love them, and they ask me to provide them, and so I do. Let me tell you more, I am not convinced about choosing crisps and sweets, but I do, for my kids. I love my kids… I love my kids…*
> (Father 27, in-depth interview).

Several of the fathers said that they do not want their children to feel emotionally inferior when comparing themselves with the food other children are allowed to eat. Accordingly, these fathers appeared to force themselves to buy food and drinks, despite knowing that these choices are energy-dense products. These fathers believed also that when their children asked their friends which food they consume, they are absorbing wrong behaviors. Consequently, the fathers try to fulfill their children's food desires. One father said:

> *Yes, here I've got a sensitivity when my kids see their friends having food and they don't have the same ones. Then, I have to choose crisps for my kids, so they don't get them from their friends. I don't want my kids to reach out their hands to take their friends' food. I hate such behaviour. I don't want to see my kids feeling inferior to their friends. This feeling leads me to choose unhealthy food such as crisps and sweets. These kinds of food are one of the health problems because they contain bad fats.*
> (Father 18, in-depth interview).

Other fathers felt a sense of remorse makes them to meet their children's requests for unhealthy food. One father said:

> *Well, sometimes, I forbid my kids from choosing chocolates and sweets for a day or two. After that, I feel guilty, so I choose [such food] for them on the third day.*
> (Father 29, in-depth interview).

Finally, some fathers said they felt deprived in their childhood of such food and drinks, and they did not want their children to have this feeling. As one father said:

You know, I lived a very difficult life. You know, my father only offered basic food to us. He didn't have enough money to purchase sweets, chocolates, crisps, and others. My brothers, sisters and I lived a tough life. I don't want my kids to face such experiences. I know the Indomie noodles are unhealthy, but I offer them to my kids. Do you know why? Because I didn't taste them in my childhood. Let them consume it, let them have it. I don't care about the health. I only care about my kids' requests. I have money now; I can buy whatever they desire…
(Father 15, in-depth interview).

These fathers also chose large quantities of unhealthy food because it was considered convenient to ensure that unhealthy food is available at home as required by their children. One father stated that:

In general, I don't choose a small number of chocolates. I usually choose a large bag of chocolates. For example, there is a large bag of chocolates including 5 to 6 different types of chocolates, such as Bounty, Mars, Snickers, and others. If I go to nuts and snacks store such as [Al Safa, or Samir Abu Sorour] you know, I take more than ten bags of crisps and ten bags of puffs, ten bags of sweets, ten bags of lollipops. Yes, no problem I choose such things.
(Father 10, in-depth interview).

In summary, these findings suggest that while some fathers socialise their children by providing healthy food, others provide varieties of less healthy foodstuffs. The next section considers how fathers act as role models for their children's (un)healthy food and drink consumption.

4.4.2   Role Modelling

According to Bandura (1986, 1977a, 1977b), parental modelling promotes observational learning, through which children perceive their parents' consumption behaviours as a norm, which in turn leads to children adopting the same habits. The role modelling theme has two sub-themes: fathers' own positive and negative dietary habits and family food gathering.

4.4.2.1   *Fathers' Own Positive and Negative Dietary Habits*

Fathers' positive and negative dietary habits emerged from the data. The dietary habits were observed by the children and hence they were influenced by them. Whilst one father stated that the awareness of healthy food consumption did not begin until he became older, others maintained they had been committed to consuming healthy food as a daily routine throughout their lives, for example eating whole-wheat breads and fruits. Equally, some fathers appeared to avoid sugary juices, fizzy drinks, and energy drinks for health purposes. The food choice diaries documented healthier food consumption habits too. This behaviour is illustrated from the interviews and diaries:

> *I'm reaching 41 years old. I just started looking after myself regarding (un)healthy food. Before, I ate everything, but now I am aware about what I eat. When I cook, I don't put too much salt as well as sugar. I don't eat any food mixed with white flour… Now I pay close attention to my and my family's food. I was consuming unhealthy food a lot [before]…*
> (Father 28, in-depth interview).

> *… For my daily routine consumption, I usually choose whole-wheat bread. Now, my kids have internalised consuming whole-wheat bread.*
> (Father 3, in-depth interview).

> *13 years ago, I was drinking Pepsi too much. Now, I don't drink it because it affected my body and my psyche. I'd not choose it for my kids.*
> (Father 9, in-depth interview).

> *I choose oat biscuits and low-fat yogurts because they are part of my diet.*
> (Father 21, food choice diary).

As emphasised above (section 4.3.1.2), this healthy food consciousness habit also led fathers to reject fast-food restaurants for themselves and their children. Albeit, religious reasons were implicated in this rejection too (see section 4.3.2.2). Elaborating, father's suggested because they do not socialise their children to choose food from fast-food restaurants, their children do not recognise such food outlets. As two fathers explained:

> *My age 38 years. In all my life, I've not chosen fast food for myself and for my kids as well. Let me tell you more, my kids don't know what fast food is because I don't buy it, so they haven't seen such food in their life. Why should I buy from these restaurants? Their food is like poisons… unhealthy foodstuffs…*

(Father 2, in-depth interview).

Basically, I don't choose food from fast food restaurants. And I also prevent my kids from choosing from Pizza Hut, McDonald's, Burger King, and others because, firstly, they are unhealthy, and second, they are Haram.
(Father 31, in-depth interview).

However, the interview and food diaries corroborate some fathers are habituated into choosing energy dense products in their own diets too. For example, they cited their addiction to consuming soft drinks and high calorific chocolates and biscuits. Some also loved to routinely consume different brands and flavours of ice creams. To illustrate, three fathers commented:

I believe there is something in Pepsi that makes you addicted to it. It is similar to smoking [laughs]. For me, the Pepsi is an addiction. I can't imagine my life without Pepsi. I drink from 10 to 15 cans a day.
(Father 6, in-depth interview).

Well, Rico and Ulker chocolate sandwich biscuits are my love… These two snacks are everywhere in the car, in my office. My kids love them too.
(Father 22, in-depth interview).

See, I usually choose large boxes of Al Saudia ice cream. It is the best brand. I choose chocolate taste for myself and vanilla for my kids.
(Father 20, accompanied shopping trip).

4.4.2.2   *Family Food Gathering*

Many fathers actively used their capacity as influencers to socialise their children into consuming healthy food. For fathers who have positive dietary habits (see section 4.4.2.1), they enjoyed consuming fruits and salad in front of or together with their children at family gatherings. One father commented:

It is necessary every evening that myself and my kids to sit together and eat fruits together. I cut the fruits for them even if they annoy me. One kid wants to keep the skin, another one doesn't, and another doesn't want the seeds. But you know I love such gathering… I can't eat my lunch without green salad. We eat salad together with my kids, except [XXX] the oldest son, he likes tomatoes, cucumbers, lemons, but he doesn't like the green salad.
(Father 30, in-depth interview).

The fathers generally viewed family mealtimes as essential time for the family. Therefore, although some fathers missed one meal due to work circumstances, others were keen to have three daily meals with their children. These fathers stressed the socialising effects of family meals in decreasing unhealthy soft and surgery drink consumption. One father explained:

> *Many years ago, I was drinking Vimto in my meals, but now I don't. It is similar to Pepsi; they aren't healthy drinks, and they are harmful. I use an alternative to Vimto and Pepsi, which is natural lemon juice. I like it. My kids follow me in liking natural of lemon juice. They know that no junk drinking is allowed with meals. We use either natural of lemon juice or water.*
> (Father 12, in-depth interview).

For fathers who have negative dietary habits (see section 4.4.2.1), in contrast, they consumed less nutritional value of food during family gatherings. During accompanied shopping trips, one father remarked:

> *I choose Ulker Hoppy chocolate because every Saturday my kids and I love to sit together and have Arabic coffee and the chocolate I chose.*
> (Father 20, accompanied shopping trip).

In summary, these findings indicate that in relation to food socialisation, fathers' role modelling can be a guide to healthy and unhealthy food choices for their children. This leads to the second sub-theme, fathers teaching their children about (un)heathy food.

4.4.3 Teaching about Food

Under this theme, the fathers present two sub-themes, specifically, approaches to educating children about food and children's responses to their fathers' teaching.

4.4.3.1 Approaches to Educating Children about Food

There is a consensus among the fathers that they felt one of the most significant responsibilities towards their children was to educate, guide, and socialise them regarding food. Several approaches were identified in order to educate their children about (un)heathy food (see Table 4.9). Firstly, several fathers appeared to warn and

advise their children not to to overindulge in unhealthy food choices. Secondly, while some clarified and tried to scare their children about the health effects of unhealthy food consumption, others indicated that they teach their children about the advantages and benefits of healthy food. Thirdly, fathers also continuously stressed the harm and disadvantages of unhealthy food until their children themselves stopped wanting this food and drink. Finally, some fathers explained they teach their children that for every unhealthy food, on the other hand, there should be a healthy foodstuff.

Table 4.9 Approaches applied for teaching children (un)healthy food

Strategy	Example
Advise and warn about consuming unhealthy food	*I choose sugary cakes and different types of chocolates. When I choose these foodstuffs, I always advise and warn them about not eating too much of these foods.* (Father 7, in-depth interview).
Dangers of unhealthy food and benefits of healthy food	*Because I'm a nurse, I face a lot of patients every day and they suffer from different illnesses such as diabetes, pancreatic diseases, and other health problems. So, I tell my kids not to drink Pepsi because it has a lot of sugar and sugar can make your body sick... I tell them not to consume gluten sweets. Oh boy, I tell them these kinds of sweets are dangerous…* (Father 2, in-depth interview). *… I have a farm and I pick dates every day for my kids. I tell my kids every time, dates are good for the health because they contain a lot of health advantages such as calcium, magnesium, and other things. I tell them to consume dates with yogurt. It is a very good meal; it contains healthy nutrients for the whole day…* (Father 3, in-depth interview).
Repeat stopping eating unhealthy food	*I always talk to my kids about Vimto. They love it. I tell them every time and every day this drink isn't healthy, and it includes chemical colouring. I tell them one time, two times, three times about the bad things of Vimto… I do this until I instill it in their minds that this drink is not good for their health.* (Father 24, in-depth interview).
Offer alternatives to unhealthy food	*See what my kids they put on the list; they want Indomie noodles. And see now what I chose. I chose whole-wheat spaghetti instead of Indomie noodles. I tell them, 'Write what you want on the list, but bear in mind, I'll choose the healthiest choices for you'.* (Father 2, accompanied shopping trip).

4.4.3.2 Children's Responses to their Fathers' Teaching about Food

Fathers had mixed experiences in their endeavours to teach their children about the benefits of healthy food and problems of unhealthy food. This experience was either broadly positive or negative, with some interface between these two polarised positions. Thus, some fathers explained their children responded positively by ceasing to want less nutritional food and increasing their consumption of healthy food. This is not to suggest fathers found this easy, or quick to achieve. Some used a range of strategies to assist them (see Table 4.9 in section 4.4.3.1). As this father explains:

> *My kids aren't easy to persuade about stopping eating the food they love, such as Pepsi and sweets. But later I control them by talking to them about the advantages of some food and drinks and the disadvantages of others… I can tell you from personal experience: you can influence your kids if you work very hard on them…*
> (Father 5, in-depth interview).

In contrast, other fathers found it difficult to convince their children to stop consuming the unhealthy food products they desire and replace them with healthier alternatives. These fathers explained they tried to teach their children in a manner that is polite and respectful. However, their children tended not to respond favourably, particularly when asked not to consume unhealthy food and drink. These fathers reported they tried to provide their children with healthier selections, but their children consistently and decisively rejected these choices. Even where fathers appeared to 'scare' their children not to consume unhealthy food and drinks, their children were not deterred. One father remarked:

> *I tell my oldest son [XXX] to stop drinking energy drinks and try to take alternatives such as natural juices. He does not take my suggestion very seriously. I know, he'll not listen to me; he makes me tired… I tell him these drinks will affect his kidneys… I haven't stopped… I've seen the cans in his bedroom trash… Oh, I'm tired of him… I'm tired…*
> (Father 7, in-depth interview).

To sum up, these findings suggest fathers see socialising and teaching their children about food as part of their fatherly responsibilities. Mixed experiences were

found regarding–children's response to the approaches fathers used to influence their children about food. Another food practice by fathers, namely restricting and controlling children's unhealthy food and drink consumption is now considered.

4.4.4 Restricting and Controlling Children's Consumption of Unhealthy Food

Two sub-themes emerged from the data analysis under this broad theme: strategies for restricting unhealthy food and drinks and controlling drink and food consumption.

4.4.4.1 Strategies for Restricting Unhealthy Food

Evidence from the data reveals that fathers restrict their children's choices of unhealthy food and drinks. A number of strategies are deployed to restrict energy-dense products. Firstly, fathers said that they limit the quantity of unhealthy food and beverages served to their children. Others noted that unhealthy food and drink consumption was restricted to certain time limits. When the children consume large quantities of unhealthy food, some fathers deprived them of such food and beverages for a period of time thereafter. As one father elucidated:

> *I don't choose anything unhealthy. For example, my kids like crisps and sweets, but I don't buy these foodstuffs. If I choose kind of these food, I try to buy one small box of biscuits or a small pack of crisps and these aren't all the time, only once a month. I try as much as possible to limit these types of food, and I allow them to have such food in very small quantities.*
> (Father 19, in-depth interview).

Secondly, some fathers confirmed they give their children the freedom to choose unhealthy food and drinks. However, this freedom is restricted to certain types of such food and in limited quantities. One father stated:

> *My kids know that they have little space for food options. They are only allowed to choose food that I agree with, in type and quantity. I don't permit them to choose anything; there is a red line. They know everything…*
> (Father 20, in-depth interview).

Thirdly, other fathers mentioned that their children must ask permission to consume less nutritional food and drinks. However, they set rules. They allowed their

children to choose unhealthy foodstuffs (in moderation) only after they had consumed healthy food. As one father explained:

My kids internalise the need to ask my permission to drink Pepsi. They also know that they can't drink it before meals. If they ask me for Pepsi, I ask them if they have consumed a good meal. If they say yes, I let them drink a small amount of Pepsi.
(Father 3, in-depth interview).

Finally, when children requested unhealthy food and drinks, some fathers applied a procrastination tactic. They used this approach because they did not want to agree to what their children were asking for. They hope it is possible for children to forget what they have asked for if they are ignored for some time. One father commented:

Sometimes, if my kids want Indomie noodles, they ask me to get some. However, I stall for time. I don't buy them immediately when they ask me because it isn't a necessary food. Also, they might forget it, despite the fact that kids don't usually forget what they need. They are smarter than us [in that respect] [laugh]…
(Father 7, in-depth interview).

In addition to unhealthy food restrictions, fathers also mentioned they intentionally did not provide certain food at home. There was a consensus among these fathers that they did not choose specific food and drinks for their children because of their awareness that they were unhealthy food that did not suit their children's health. Table 4.10 illustrates a list of the food and beverages these fathers avoided having at home.

Table 4.10 List of food and drinks some fathers avoid choosing for their children

Food and drink
Energy and soft drinks
Take away from fast food restaurants
Crisps
Sweets
Indomie noodles
High sugar juices
Chocolate
Mayonnaise and Ketchup
Frozen food

4.4.4.2 Food Control

Building on the data observations regarding food restrictions and rules presented in section 4.4.4.1, fathers did experience difficulty controlling their older children's desire to consume unhealthy food and drinks. Several reasons accounted for this limited or lack of control. While they reported they could strictly monitor and control what, how much, and when their younger children (2-10yrs) consumed food, this did not apply to older children. One father elaborated by explaining:

> *Yes, I'm only the man in this house, but to be honest with you, I can't control everything regarding food. Do you know why? Because my two oldest sons [XXX] and [XXX] are 9 and 10 years old. So, they can now go to the convenience store near to us and choose whatever they like, even unhealthy food, without my permission… For the youngest kids [XXX], [XXX], and [XXX], I am monitoring them, and it is easy control them… You know, they are still small, but once they grow up, it is hard to control them…*
> (Father 6, in-depth interview).

Gender was also an issue in controlling the consumption of unhealthy food. Specifically, fathers feel more sympathy toward girls, and thus tended to meet their food requests, even if they are unhealthy choices. In contrast, these fathers argued they should not be as affectionate with boys. Rather, they should be tougher with their sons since boys have to learn about hard choices in life. Hence, they said they should not meet all their sons' requests about food and drinks. One father elucidated that:

> *Let me to tell you one thing, sentimentally, I love my daughter [XXX], but I show no emotion to my boys [XXX] and [XXX]. So, when my daughter requests that I buy sweets, chocolates, and Indomie noodles, I offer them directly, but if the boys ask me, of course, I won't choose to accept. I have a propensity to emotionally like girls more than boys. I feel the girl is wronged… I don't like to break my daughter's heart…*
> (Father 12, in-depth interview).

A fathers' absence from home, or visits to relatives were also instrumental in their limited control of their children's unhealthy eating. Fathers explained their children took advantage of the opportunity to eat unhealthy food when their fathers were away from home. Additionally, they reported that when their children visit their

fathers' or mothers' relatives, they feel free to consume whatever they want, especially

unhealthy food, because their fathers were not present. One father commented:

> *Because I live with my parents, or if I send my kids to my relatives, my kids always consume unhealthy food and drinks out of my sight. If I am not present in the house for work or something, they consume unhealthy food from their grandfather. Oh, I'm tired of them. Let me tell you about another situation. My wife's sisters love to consume Indomie noodles, and I don't choose these foods for my kids. When they go to my wife's sisters' houses, they share with them Indomie noodles. It is very hard for me to control their food choices then… They are smart…*
> (Father 11, in-depth interview).

To summarise these findings, although the fathers set up roles to ban and/or

restrict their children's unhealthy food consumption, they found it tough to control

unhealthy food and drink consumption by their children. Food encouragement and

rewards are now examined.

4.4.5   Encouraging Children to Consume Healthy Food

Contrary to restricting and controlling unhealthy food, one emergent sub-theme -

strategies used to encourage children to consume healthier selections - is explored

under this theme.

4.4.5.1   *Strategies Used to Encourage Children to Consume Healthier Selections*

Several strategies were applied by fathers to encourage their children to consume

healthy food. First, several fathers have family gatherings where they cut fruits and

make green salads to encourage their children to consume them. Second, another father

pushed his daughters to consume certain fruits and vegetables by concentrating his

children's attention on external cues, for example "It's good for you". Two fathers

remarked that:

> *I squeeze lemons and put the salt and pomegranate molasses on the top of the salad. By doing this, my kids like the salad. So, I put the salad on a big plate. My kids and I eat the salad together.*
> (Father 6, in-depth interview).

I encourage my daughters to consume radish and watercress. I tell them these two green salads are good for their hair. It makes their hair long [laughs].
(Father 4, in-depth interview).

Third, other said that they encourage their children to attempt to choose new food, but they are resisted. As one father said:

I push my kids to try new fruits and vegetables. They only like oranges, apples, and bananas. I tell them to try grapefruits and cabbages, for example. My attempts were unsuccessful. They don't like to taste new food.
(Father 3, in-depth interview).

Fourth, some fathers, however, mentioned that they did not pressure or encourage their children to consume certain healthy food. These fathers believed that pressuring children to consume certain food might be counterproductive. One father remarked:

I don't impose certain healthy food on my kids. If I force them, they will hate them.
(Father 3, in-depth interview).

Finally, unhealthy food was also used as a reward for children's good behaviour. For example, helping mothers to clean the house, being very well behaved, and eating healthy food. Fathers recognised the irony in using unhealthy food high in fat, salt, and sugars as a reward for their children when they consumed healthy food. This is illustrated in the comments from two father's struggling to persuade their children to eat more healthily:

To tell them we'll go tomorrow to the ice cream shop, but first they have to help me and their mum clean and organise the house. When they help, I reward them immediately. So, we go out to juice shops and food stores. Or sometimes, they request pizza from a restaurant. I do accept buying food from pizza restaurants as I told you they helped us to clean the house and I have to meet my promise to them to reward them with any food they request.
(Father 12, in-depth interview).

My daughters don't consume just any food. They don't eat fruits, vegetables, fish, and meat. It's really a headache for me. So, what do I do? I tell them if they consume bananas, oranges, and other healthy stuff, I'll reward them with sweets and ice cream. They love Cone Zone ice cream. I tell them they have to have healthy food and then I'll offer them the ice cream they like.

(Father 14, in-depth interview).

In sum, these findings further illustrate the struggles father's experience in balancing healthy and unhealthy food choices for their children.

4.5   Conclusions

This chapter has presented the answers to the research objectives. I began the chapter by introducing how fathers in Saudi Arabia act as key agents of socialisation making food choices for their children. This was followed by an exploration of the factors affecting fathers in Saudi Arabia as key agents of socialisation influencing food choices for their children. I concluded the chapter by exploring how fathers in Saudi Arabia perceived their roles and responsibilities as consumer socialisation agents for the food their children consume.

My findings offer deep insights into the role of Saudi fathers as key agents of socialisation who influence their children's (un)healthy food consumption. The fathers believe that they have supreme power regarding the family's food consumption, including how their children learn about and become involved in (un)healthy food choices. The difficulties fathers face, however, suggest this is not wholly true. Accordingly, from the data, I found that fathers encounter different and diverse challenges balancing healthy and unhealthy food choices for their children. In the following chapter, I discuss these empirical findings in the context of the existing literature.

5   Chapter Five: Discussion

5.1   Introduction

As stated in the introduction, the main research aim of my study is to explore the role of the male head of the family – fathers – as key agents of socialisation who influence their children's (un)healthy food consumption in the culturally distinctive nation of Saudi Arabia. The second aim of my research is to identify salient issues from the data to inform more efficacious healthy food marketing policy to address the obesity problem in Saudi Arabia. The previous chapter presented the findings. In this chapter, the results from my research will be discussed with reference to the eight themes introduced in Chapter 4, namely father-child food interaction, endogenous factors, exogenous factors, food role modelling, food education, food availability, food control, and food encouragement. The findings will be explored through the perspective of the literature on consumer socialisation and family food consumption reviewed in Chapter 2. The goal of this chapter is to provide answers to the research objectives. Hence, the first part of the chapter is sub-divided into four sections, each dealing with one of the research objectives:

- To explore how Saudi fathers make (un)healthy food choices for their children, and the implications for the child obesity problem in Saudi Arabia (Section 5.2).

- To explore why fathers in Saudi Arabia make food choices for their children within the context of healthy food and the obesity problem (Section 5.3).

- To explore how fathers in Saudi Arabia perceive their roles and responsibilities as socialisation agents for the food they choose for their children (Section 5.4).

- To identify the salient issues from the data to inform a more efficacious healthy food marketing policy to address the child obesity problem in Saudi Arabia (Section 5.5).

5.2   *How Fathers are Making Food Choices for their Children*

5.2.1   Father-Child Food Interaction

In this section, father-child food interaction will be discussed. Specifically, I will first look at the issues of how children are involved in trips to food stores. Second, father-son communications and negations in food store will be considered.

5.2.1.1   *Food Shopping Involvement*

Remarkably, the results of my study suggest that fathers usually take their sons – as opposed to their daughters - with them when they go food shopping for the household. This finding provides deeper insights into how and why fathers take their sons instead of daughter's food store shopping. All the fathers except one (who has five daughters) transfer their knowledge and attitudes through interactions/communications to male children with respect to the food socialisation process in food shopping environments. This could be attributed to the Saudi male-oriented culture. It was clear to me that these fathers were not keen to take their daughters with them when they were food shopping for the family and seemed to view the prospect of taking their daughters with them food shopping as somehow deviant of social norms, reflecting the strong and strict traditions of that rural area in the Eastern Province. In addition, fathers in Saudi Arabia seek to help in these early years their sons to prepare for their later lives as breadwinners and heads of the household, which will mean fulfilling certain responsibilities, including choosing food for the family. These fathers believe that educating boys about food shopping at an early age will help them for when they grow up and assume such responsibilities for their families. This finding is in stark contrast to findings in other

cultural settings, such as the study by Neeley (2005), who found mothers in America engage in more direct co-shopping with female children than with male children. This result may reflect the study place (the USA) and the gender of the parent in question (mother). In my study, the motivation of fathers to develop their sons' knowledge of food shopping instead of their daughters stems from the patriarchal nature of Saudi society.

My study provides additional evidence with respect to how fathers teach their sons about (un)healthy food choices in the context of food store shopping. The fathers find that taking their sons food shopping is an excellent opportunity to socialise and educate them about food consumption and other shopping skills. These findings complement the work of Makhal *et al.* (2020), Allirot, Maiz and Urdaneta (2018), Gram (2010) and O'Dougherty, Story and Stang (2006), which reported that parents use store visits to educate their children about healthy foods such as fruits and vegetables. In my study, fathers explained to their sons about food groups (healthy Vs unhealthy food) and their ingredients. For example, the fathers teach their sons how to check expiry date data before they choose food items. This behaviour of allowing sons to accompany fathers on food shopping trips means sons acquire the appropriate skills, knowledge, and attitudes with respect to (un)healthy food consumption (Ayadi and Muratore, 2020; Ek *et al.*, 2020; Grønhøj and Gram, 2020a). This sentiment extends to encouraging sons to make informed, healthy food choices by considering the consequences of unhealthy purchases (i.e., crisps and sweets). As a result, being involved with their fathers in food choices at stores may have an influence on their own (un)healthy food selections later in life (Calderon *et al.*, 2017; Sutherland *et al.*, 2008).

However, interestingly, some of the fathers believe that giving their sons space to choose whatever foods and drinks they choose when shopping, even unhealthy foods,

is another way to increase and develop their sons' shopping knowledge and skills. This finding has not been recognised by the existing of food socialisation literature. Those fathers possibly see this approach as a form of helping in learning and acquiring a consumer skill set (e.g., searching for and finding information, evaluating products, making choices) through the process of food shopping. These fathers do not teach their sons what to choose and give them the complete freedom to explore their own consumption preferences, including selecting unhealthy foods. This finding that some fathers permit their sons to have complete freedom to choose whatever foods they like may well be a contributing factor to childhood obesity in Saudi society as these children may go on to internalise choosing and consuming unhealthy foods.

Within consumer socialisation theory, this scenario whereby some fathers allow their sons to choose unhealthy foods during shopping trips is attributed to fathers' communication styles with their children. Those fathers are considered more 'permissive', giving their sons rights without concomitant responsibilities to select unhealthy food such as crisps, biscuits, and chocolates. These fathers acknowledge their behaviour as lenient, accepting, affirmative, and non-punitive (Mikeska *et al.*, 2017). Rodenburg *et al.* (2012) and Grusec and Goodnow (1994) argued that when parents are sincere and responsive, children are more presumably to model their parents' behaviour, and the parents' message is more likely to be listened to and internalised. A limited number of studies have examined parental styles in the food shopping context. For example, Lucas-Thompson *et al.* (2017) observed that warm/permissive parents were not significantly associated with being concerned about the healthfulness of parent-child food choices during grocery shopping. In the current study, although most fathers do teach their sons about healthy food and other shopping skills, permissive fathers socialise their sons into choosing unhealthy foodstuffs during accompanied

shopping trips. Consequently, these results have important implications for developing marketing campaigns that may help fathers and their sons to make healthy food choices instead of yielding to unhealthy food demands and habits.

Giving their sons a little amount of money and asking them to purchase food for their own use and/or for the household in general from grocery food stores was suggested by fathers as another facet of teaching their sons to acquire knowledge about shopping. In general, the fathers provide money to their sons who are aged 11 and above. This could be due to the cognitive ability of children (aged seven and above) to make a decision regarding food consumption (Tarabashkina, Quester and Crouch, 2017; Pettigrew *et al.*, 2013) compared to younger children, who arguably have limited cognitive abilities (Grønhøj and Gram, 2020b). These fathers appear to give their sons at this age some independence in food choices regarding product categories, prices, and using more than one dimension to evaluate products (Haugtvedt, Herr and Kardes, 2018; John, 2008, 1999). Fathers believe that their sons at this age are supposed to learn and acquire skills with respect to food consumption from their fathers directly or indirectly (by observation). This finding chimes somewhat with that of Hota and Bartsch (2019), who reported that among Indian adolescents, the parent-child relationship described by socialisation processes who stress communication about consumption involvement in purchase-linked decisions, and consumption independence. Similar results are found in my study, that fathers develop the shopping skills, knowledge, and attitudes of their sons aged 11 and above. However, giving sons independence and money to choose foods at age 11 may increase unhealthy food consumption, as the food diaries revealed a gravitation by these children towards foods high in fat, salt and sugar. Hence, interventions targeting fathers in Saudi Arabia are

required to restrict their older sons' food choices when they are given money for food consumption.

In terms of non-verbal communication in food shopping, some sons seemed to have learned (un)healthy food selection by observing their fathers (Bandura, 1977a, 1977b). Observing their fathers' behaviour may be important for their sons as cognitive affective norms are transmitted (Moschis, 1985). In other words, unintentionally, sons who are more involved with their fathers' food shopping trips experience and acquire different skills such as comparing between (un)healthy foods, food prices, and food brands. These behaviours lead to values, attitudes, and preferences being internalised, ultimately shaping the normative beliefs of their sons (Schindler, Lala and Corcoran, 2014; Moore, Wilkie and Lutz, 2002). This is attributable to the cognition processes associated with consumer behaviour norms being conveyed from parents through observation, with parents attempting to act as an example during shopping trips and expecting their offspring to learn and gain such norms (Moore, Wilkie and Desrochers, 2017; Moore and Lutz, 1988). Similar results are found in Makhal *et al.'s* (2020) study when, for example, one son asked a receptionist at a restaurant about the sources of chicken and meats they served before he ordered, just as his father usually did in front of him. Hence, these findings highlight those fathers serve as role models for sons to learn consumer skills during food shopping trips.

5.2.1.2   *Father-Son Interaction in Food Stores*

Although parent-child interaction in food stores has been documented (see Sections 2.2.2 and 2.2.3), it highlighted that father-son interaction in food stores research was limited. John (1999) called for examination of the family unit at a more disaggregate level, for example father-son communication. She argued that these individual interactions have as much, if not more, impact on consumer socialisation than overall

family dynamics. Kerrane, Bettany and Kerrane (2015) noted that studying socialisation behaviours within discrete and isolated family dyads, for example parent–child is, consequently, evaluated into consideration that the complex interplay of individual, relational and collective practices between family members is likely overlooked. Epp and Price (2008) argued that consumer scholars, on the other hand, need to investigate socialisation processes that are embedded within the wider family setting and as informed/affected by multiple familial relations and communications. Therefore, my doctoral research contributes to the consumer socialisation literature by providing additional evidence on father-son interaction during accompanied shopping trips.

The results of my study suggest that diverse strategies are used by sons in food stores to influence their fathers when they request food, particularly unhealthy one (see Table 4.3, in Chapter 4). These strategies employed by sons to influence their fathers during food shopping trips might be linked to the son's age. The sons in my study were aged 3-10 years old, possibly because sons over 10 years of age are considered more independent in Saudi society. This study confirms that these younger sons do exert an influence on their fathers' decisions directly, by, for example, grabbing unhealthy foods and drinks off store shelves and placing them in their father's shopping cart (Castro, Calderon and Ayala, 2017; Taghavi and Seyedsalehi, 2015; Buijzen and Valkenburg, 2008). This direct request strategy may reflect a low cognitive development as well as a lack of depth of analysis and specific operational thought on behalf of the younger sons. Older sons, in contrast, exert their influence in more subtle was and are more likely to apply an array of influencing strategies such as bargaining, persuasion, and emotional blackmail. These strategies reflect John's (2008, 1999) assessment that older children (aged 7-11) expanded the repertoire of strategies by using bargaining and persuasion and developing abilities to learn in more subtle ways to approach their parents. In

addition, similar to the work of Gaumer, Arnone and Ashley-Cotleur (2013), the current study suggests a lack of reporting of the use of reasoning by sons to influence their fathers in their unhealthy food requests. In their study, Gaumer, Arnone and Ashley-Cotleur (2013) focused on children aged 2-7, in contrast to my study, where the sons were aged 3-10. Reasoning strategies can be expected to be used by older children, aged 11-16, according to John (2008, 1999).

Various strategies were employed by the fathers in this study to deal with their sons' food choices during food shopping (see Table 4.4, Chapter 4). A possible explanation for father-son interaction during food shopping is father communication patterns. In most consumer socialisation studies, two categories of family communication patterns are notable: concept-oriented (conversation-oriented) and socio-oriented (conformed-oriented) (Moschis, Moore and Smith, 1984). Flurry (2007) suggested that through family communication and participation in family food choices, children learned from their parent's specific norms, roles, and consumer skills and are thus able to exert influence on buying decisions. In contrast to Buijzen and Valkenburg (2008), my study found fathers communication patterns appear to influence father-son communication and therefore, negotiation strategies. The fathers in my study exhibited different communication styles with their sons during food shopping. Some communicate openly when shopping for food by discussing and evaluating the food their sons select. Conversely, a minority of fathers use their authority to return unwanted food their sons choose and/or limit them to a small number of unhealthy food choices. Fathers who adopt concept-orientation communication patterns appeared to communicate with their sons via discussion to encourage the independent development of consumer skills, preferences, and attitudes regarding food consumption. This type of communication between father and son is based on reciprocity. Other fathers adopt

socio-oriented communication patterns, maintaining control and restricting their sons' food consumption. This communication is one-sided to overtly discourage the development of independent consumer skills, knowledge, and attitudes (Chan and McNeal, 2003).

Despite fathers applying different negotiation strategies to avoid conflict with their sons in accompanied shopping trips, the overwhelming majority of fathers appeared to be relatively powerless in the face of 'nagging' by their sons, preferring to give in to demands for food high in sugar and fat. This finding supports the findings in studies by Gaumer and Arnone (2009) and Marshall, O'Donohoe and Kline (2007). However, this outcome is contrary to previous studies, which have suggested that parents often do refuse food product requests and demands by children (Page *et al.*, 2019; Calloway *et al.*, 2014; O'Dougherty, Story and Stang, 2006; Atkin, 1978). This inconsistency may be related to parental desire to avert trouble that may result from rejecting requests in reference to strongly felt desires. Therefore, in my study, it can be concluded that fathers succumbing to their sons' requests for unhealthy food contribute to childhood obesity.

'Pester power' used by sons and negotiation strategies devised by fathers in food stores are part of the father-son food-socialisation process as sons grow up. In other words, it is part and parcel of learning specific rules, norms, and patterns of behaviour (Lawlor and Prothero, 2011). Despite the appearance of fathers being 'worn down' by pester power, in fact negotiations and arguments are key to a child's normal socialisation into marketplace realities (Keller and Ruus, 2014; Lawlor and Prothero, 2011; Grossbart, Carlson and Walsh, 1991). Previous literature on pester power has observed that strategies used by children in shopping stores, especially when choosing unhealthy food (e.g., Marshall, O'Donohoe and Kline, 2007), lead to negative

consequences for both parents and children. However, pester power can also be seen in a positive light by demarcating boundaries and ensuring positive learning and negotiation skills between parents and their children and, as a result, it develops children for the commercial experiences they will have to engage in in the marketplace (Vel, Mathew and Shirkhodaee, 2016; Lawlor and Prothero, 2011).

In summary, one of the contributions of my study is to build on previous research by adding a deeper understanding of father-son interactions and communications during food shopping. Due to Saudi customs and traditions, my study suggests that fathers are keen to take their sons - not their daughters - with them on shopping trips for food to teach them food shopping skills and knowledge. Fathers transfer the skills, knowledge, and attitudes to their sons regarding food choices in food stores through overt communications and other dynamics, thereby exhibiting a significant influence on the development of their sons' consumer skills, knowledge, and attitudes. The study also confirms that sons' influences are powerful enough to secure their unhealthy food requests in a food shop environment. Father-son interactions and communications during food shopping are based on son's age and the father's communication patterns. These interactions and communications constitute son's food socialisation in relation to food choices. Having discussed how fathers make food choices for their children, the next section moves on to discuss the factors affecting fathers' food choices for their children.

5.3 *Factors Influencing Fathers' Food Choices for their Children*

This section discusses the findings of one of the research objectives, focusing on why fathers in Saudi Arabia act as key agents of socialisation making food choices for their children. Firstly, endogenous - physiological, knowledge and beliefs, and social –

factors are discussed, before the focus switches to exogenous - economic, cultural and religious, and marketing - factors).

5.3.1   Endogenous Factors

5.3.1.1   *Physiological Factors*

The findings show that fathers' food preferences are indicated in different ways. Some fathers' food choices are driven by their children's preferences (e.g. fruits Vs. vegetables in terms of sweetness). These children's food preferences might be due to the role of repeated exposure and familiarity to such food, embedding a taste for such types of food that leading to the acceptance of sweet fruit rather than vegetables. From consumer socialisation theory, such food preferences are transferred norms from fathers to their children (Kharuhayothin and Kerrane, 2018). This transmission of food preferences from father to child is considered part of the process of children's food socialisation (Makhal *et al.*, 2020; Moore, Wilkie and Desrochers, 2017). In other words, fathers seem to be repeat purchasing fruits that their children prefer to consume, such as apples, mangos, and strawberries. However, these fathers prefer not to consume vegetables, and the children become less exposed to and less familiar with this type of food and thus go on to avoid them later in life. Children pick up norms early (Marshall, 2014) and are capable of imitating adult behaviours as early as the age of three (Drenten, Peters and Thomas, 2008), thereby displaying shared values and beliefs with their parents (Grønhøj and Thøgersen, 2009).

Even if the children are exposed to and become familiar with different types of fruit, their fathers do not impose this choice on them. This behaviour reflects the fathers own experiences as children, leading them to disliking choosing and consuming vegetables. These fathers seemed not to transfer such forceful behaviour to their children in order to encourage them to consume the fruits they prefer.

Some fathers suggested that their food choice preferences for their children derive from the value and properties of food products - such as nutritional value, quality, and freshness - although such food products could be expensive. This finding explains that food preferences based on nutritional value, quality and freshness are socialised through the routinisation of fathers' food choices for their children. In social learning theory, children observe, model, and learn the behaviour of their fathers regarding the value and properties of food products they prefer to choose for their children (Bandura, 1977b). Therefore, when fathers are eager to choose nutritionally good food items, they are conveying the value and norm of these foods to their children (Makhal *et al.*, 2020; Judd *et al.*, 2014).

In summary, my research argues that fathers play a key role in increasing exposure to various types of fruit and the nutritional value and properties of food items early on in childhood, which may influence the food preferences their children make throughout their lives. This is consistent with other studies (.e.g., Rahill, Kennedy and Kearney, 2020; Kharuhayothin and Kerrane, 2018; Judd *et al.*, 2014; Ayadi and Bree, 2010; Hughner and Maher, 2006). The next section discusses nutrition fathers' knowledge and beliefs of it.

5.3.1.2 *Nutritional Knowledge and Beliefs*

The results of my study suggest that the majority of fathers are aware that the food products they choose were in the main unhealthy. They are conscious that the unhealthy food they select for their children are linked to health problems such as hyperactivity, diabetes, tooth decay, and obesity, among other ailments. These results might correlate with education levels, whereby more educated and knowledgeable fathers recognise the unhealthy food they choose and understand the consequences of such unhealthy food. This was also apparent to fathers who have less nutritional knowledge. Despite these

fathers having important nutritional knowledge and aware about health issues related to unhealthy food, they nevertheless allow their children to consume unhealthy food such indomie noodles, chocolates, and sweets, etc. This contradictory finding might reflect fathers indulging communication with their children's unhealthy food consumption. Those fathers have a propensity to be comparatively permissive regarding their children's food choices. Even though these fathers are aware of the ailments that consumption of unhealthy food causes, such as tooth decay, they are not puritanical about their children's food choices (Grønhøj and Gram, 2020a). This type of communication style has an adverse impact in terms of children's socialisation of food consumption (Hughner and Maher, 2006). Earlier research has shown that a higher level of parental knowledge about nutrition might result in better food consumption habits (Mahmoud and Grigoriou, 2019; Zahid, Davey and Reicks, 2017; Tarabashkina, Quester and Crouch, 2016; Campbell *et al.*, 2013). My study, however, did not appear to support this argument. Although fathers, in the interviews, seemed to have an understanding of nutritional knowledge, the food choice diaries and accompanied shopping trips did not indeed consistently reflect this nutritional knowledge, and they frequently chose unhealthy food for their children. Thus, fathers with a higher knowledge of nutrition may assist the consumption of *unhealthy* foods by allowing their children to develop favourable attitudes to the consumption of such foods, contributing to childhood obesity.

One clear and interesting finding emerging from the data is that fathers who have less nutritional knowledge appear to have illogical beliefs about unhealthy food. They believe that ice cream, chocolate and sugary drinks are healthy options for their children. Others allowed their children to drink soda drinks after having a large meal, believing that doing so helps them to digest the food consumed. These misperceptions

about unhealthy food beliefs seem to be widespread throughout Saudi society. Those fathers justified their erroneous beliefs about unhealthy food by claiming that such foods include healthy ingredients (e.g. ice cream is made from milk). Although this I effect true, these fathers appear not to recognise that ice cream and other foods that might contain certain nominally healthy ingredients also have large amounts of sugar and preservatives. Children have continuous opportunities to learn and ultimately to internalise the beliefs, attitudes, and values they observe in their fathers concerning such illogical beliefs about unhealthy food, accepting these beliefs as the norm (Moore, Wilkie and Lutz, 2002). This situation, in turn, might entail an enhanced risk of obesity and other health problems for their children.

Following the above discussion, this study proposes a series of educational programmes that target fathers' nutritional knowledge as a practical initiative to increase and convey healthy food consumption norms to their children. Educational programmes are also needed for fathers to help address misperceptions about the healthfulness of many products. Hence, improving fathers' and mothers to a lesser extent nutritional knowledge could contribute to reducing childhood obesity.

In sum, this study confirms that although fathers do seem to have some nutritional knowledge about the hazards of consuming of unhealthy food, this knowledge is not consistently applied to the food choices they make for their children. The fathers also continue to allow their children to consume unhealthy food. Additionally, this study argues that fathers' beliefs about unhealthy food being less harmful than they actually are (or even healthy) may be a factor that contributes to the socialisation of unhealthy food to their children. These fathers' nutritional knowledge and beliefs about unhealthy food may remain with their children as they grow older,

increasing the problem of obesity among children in Saudi Arabia. The next section discusses social factors.

5.3.1.3 *Social Factors*

Interestingly, the results of my study demonstrate that many interactions occur between fathers and other family members (wives, grandparents, siblings) in the context of social pressure in relation to the food socialisation process. Moore, Wilkie and Desrochers (2017) called for such family interactions in the context of dietary matters and obesity and with what outcomes. First, the findings of my study expand and deepen our understandings of how fathers' *wives* influence fathers in terms of food socialisation for their children. There appears to be four categories of interaction between fathers and their wives in this regard. In the first group, fathers and mothers disagreed regarding unhealthy food selected for their children (e.g., indomie noodles, chocolates, and sweets). In contrast, the second group of fathers followed the advice of their wives and chose healthier food for their children. In the third group, the fathers agreed with their wives in selecting unhealthy food and drinks for their children. In the fourth group, the fathers selected healthy food such as fruits for their children while their wives were not able to make healthy dietary choices.

These tensions and disagreements between fathers and their wives regarding food choices for their children reflect the gender roles of Saudi families. While fathers in Saudi Arabia usually take responsibility for food shopping for the family, mothers assumed responsibility for preparing food for the family at mealtimes. This division of labour within the family suggests fathers are responsible for the (un)healthy food choices outside home for the family, including the children. Moreover, when the fathers return home, the wives seem to advise (see group 2), encourage (see group 3), and/or sometimes reproach their husbands when they have selected unhealthy food (e.g.,

indomie noodles, chocolates, and sweets) (see group 1). The fathers sometimes appear to reject their wives' advice or admonitions and try to purchase what they want anyway, resulting in family disagreements. Saudi fathers are raised in a patriarchal culture which minimises women's roles in society, including in the family. Chowbey (2017) and Henthorne, LaTour and Hudson (1997) pointed out that in this kind of society, men are sensitive to the notion that the wife might dominate family purchase decision-making. Fathers' wives in group 1, 2, and 4 may disagree with their husbands regarding food socialisation for their children, while their husbands appear not to consider, or to look down on, their wives' opinions. In my study, because the priorities of fathers and wives are not constantly congruous, there are major tensions and disagreements between fathers and their wives regarding food choices for their children. This finding is contrary to previous research, which found that there are no main discrepancies in terms of food socialisation between mothers and fathers, with both parents seeming to acknowledge the need to choose healthy food for their offspring (Grønhøj and Gram, 2020a). This contradiction between my study's findings and the results of Grønhøj and Gram (2020a) could be attributed to cultural matters. While Grønhøj and Gram (2020a) conducted their study in Denmark, a nation in which gender equality has become a cultural norm, my study was conducted in one of the most conservative countries (Saudi Arabia) in the world in terms of traditions, customs, religious beliefs, all of which stipulate that male are the decision-makers in almost all family matters, including food consumption for their children. It is thus apparent that, due to the allocation of familial responsibilities, the role of wives is not important in terms of food socialisation for children in Saudi Arabia. As noted, the fathers in my study frequently assume the main responsibility for interaction with the sons, including allowing boys to accompany them to food stores. Accordingly, my study observed that fathers play a major role in

developing their sons' cognitive and social capacities, food decision-making skills, and understanding of marketing activities (John, 2008, 1999), and this responsibility includes choosing (un)healthy food during shopping trips.

Second, in relation to *intergenerational influences*, while several fathers in my study said they choose unhealthy foods and drinks for their children because they recall such food and drinks from their childhood, others recalled healthy foods from when their parent's prepared and consumed food. Whilst these fathers expressed nostalgia for healthy traditional foods such as whole grains (e.g., flour porridge gruel), they also recalled certain types of biscuits and chocolates that their parents bought for them. Kharuhayothin and Kerrane (2018) suggested that the social dimensions of food that caused positive feelings of nostalgia/family connections and caring for your family through suitable nutritional consumption might contribute to the promotion of healthy food consumption. Rhodes *et al.* (2016) indicated that an intergenerational influence from grandmother to mother can be seen with respect to particular food groups, including encouragement to consume nutritious food such as fruit and vegetables. The fathers in my study, however, mentioned both positive and negative influences (choosing and/or memorising (un)healthy foods as a result of intergenerational influences). These fathers reflected on those food choices in the form of rules and norms that their parents tried to instil in them when they were young. These fathers continued the (un)healthy food choice patterns they were raised with, transmitting these behavioural norms and rules from their own parents to their children. Hence, in this way, (un)healthy food choices are transmitted from generation to generation, forming the early dietary preferences and habits of their children which will possibly persist into adulthood (Kharuhayothin and Kerrane, 2018; Moore, Wilkie and Lutz, 2002).

In contrast, some fathers consciously disregard the food choices they experienced as children. These fathers reject the inheritance of their parent's food norms and are adamant that they will not pass on unhealthy food choices to the next generation. Consequently, these fathers are transferring the learning and habits of healthy food socialisation to the next generation.

Third, the findings of my study enhance our understandings of the role of *grandparents* in influencing fathers when they socialise (un)healthy food for their children. The parents of some fathers seemed to play a significant role in socialising unhealthy food for their grandchildren. The fathers disagreed with them on dietary issues. This interesting finding may be related to family structure. In the context of Saudi Arabia, despite the furious pace of modernisation that has occurred in the country in recent decades, the traditional extended family shapes social organisation (Long, 2003). The data show that fathers who were influenced by their parents are those that live with their parents in the same house (i.e. extended families - see Table 3.5 for more details about fathers' living arrangements). Despite these fathers not agreeing with their parents about the food they offered to their children, they did not openly resent them. This cultural-religious trait may thus lead to over-feeding of energy dense food to children (Jongenelis *et al.*, 2020; Sadruddin *et al.*, 2019). It is clear that grandparents put pressure on fathers to choose unhealthy food for their children. This finding is contrary to that of Hota and Bartsch (2019), who found that extended families in India impose strict restrictions on the consumption of food. The fathers in my study seemed to be place fewer restrictions on food consumptions and are willing to meet their children's demands and desires for unhealthy food due to the influence of their own parents. In situations where fathers do not meet the requests of their children for unhealthy foods, the children know there is a chance that their grandparents will oblige

them. This observation concurs with the findings of other studies which have found that parents experience challenges and tensions in terms of food choices in extended families (Damen *et al.*, 2020a; Fuster *et al.*, 2019; Boak *et al.*, 2016; Walsh, Meagher-Stewart and Macdonald, 2015). These studies hold that familial networks play a major role in the food decisions of children by modifying the food environment. In contrast, the other fathers who were less affected by their parents tended to live separately (i.e., nuclear families). A study by Darwish *et al.* (2014) found that children living in *nuclear* families consume more unhealthy products such as pizza and burger than children living in extended families in Saudi Arabia. Nonetheless, in my study, fathers in nuclear families appear to be able to control (un)healthy food choices for their children when their own parents are not present. Even if these fathers live separately, they visit their parents with their children almost daily, in line with the norms in Saudi Arabia. These fathers may not be able to fully control their children when they visit their parents. Moreover, even if they disagree with their own parents giving 'treats' to their grandchildren, out of respect for elders they allow this habit to occur.

Finally, the data suggested that whilst fathers restrict certain food for their children, daughters sometimes ask their older male *siblings* to select particular food for them from stores in ways that are concealed from their fathers. This study's data adds to the existing research by showing that even where girls are older than boys, the latter have the responsibility for buying food from the nearest food store for the family, especially if the father is absent from the home (Damen *et al.*, 2020a; Boak *et al.*, 2016). These fathers disagreed about the food that some siblings were providing to their other children. In the context of Saudi Arabia, as noted in Section 5.2.1, because fathers prepare and rely on male members of the family to assist in handling family affairs, including food choices, the male children exploit these responsibilities to meet their –

female - siblings' desires for unhealthy food. This is evidence of the greater role that boys play in Saudi families, a result of social and cultural norms. This result supports the work of Vilela *et al.* (2015) and Northstone and Emmett (2005), who also reported that older siblings influence the food intake of younger relatives by bringing into the household certain food items requested by the latter, for instance sweetened beverages, crisps and nutrient-poor snacks.

Summing up, my study confirms that social connections - such as wives, intergenerational influences, grandparents, and siblings – have a substantial influence on fathers' food socialisation choices. The sections below turn to the exogenous factors that affect fathers when they are making food choices for their children.

5.3.2   Exogenous Factors

5.3.2.1   Economic Factors

The results of my study indicate that limited fathers' budgets act as barriers to their attempts to socialise food and drinks for their children. The majority of fathers have a fixed budget for food expenses which they cannot surpass. This result can be explained by those fathers having a limited income. Commonly, fathers in Saudi Arabia are motivated to purchase all the family's needs, including their children's food requirements, as soon as they receive their salary (usually the first day of every month). However, in the middle and at the end of the month they struggle to meet their children's needs, especially for healthy eating such as fruits and vegetables, as they have spent their food budget and apportioned their other financial commitments (such as existing bank loans and other debts). Judd *et al.* (2014) and Cortés *et al.* (2013) suggested that households with a lower income are less able to spend large amounts of money on food, particularly fruits and vegetables, and that this forms part of their food socialisation. Of importance is that lower income families face financial obstacles to pursuing a healthy diet, leading to adverse results for the family's nutritional status and

health (Daniel, 2016; Nepper and Chai, 2016; Turrell and Kavanagh, 2006). Fathers in my study have limited budgets for household expenses, including food consumption, and this fact may shape the food consumption options, particularly healthy foods, available to their children in rural areas in Saudi Arabia (where my study was conducted).

This study observed that fathers who have limited income found food prices continued to be an impediment to the socialisation of healthy foodstuffs. Comparing prices when shopping, the fathers in my study noted the differences in prices between healthy and unhealthy food and drinks. Similar to Judd *et al.'s* (2014) study, the fathers in my study seem to view the cost of healthy food such as fruits as prohibitively high and, as a result, they limit or avoid buying such foods. Consequently, children might not develop the skills, knowledge, and attitudes which would develop the habit of consuming healthy foods. These findings highlight a need to encourage food manufacturers in Saudi Arabia to provide healthy food at affordable prices, especially for families with less income family.

To conclude, my study argues that even if the fathers would like to select healthier food for their children, a lack of financial resources and increasing food prices have a direct impact on the types of food that are chosen for their children. This may lead to a negative downstream impact on the children away from experimenting with healthy food habits later in life (Scott and Vallen, 2019). The next sections discuss cultural and religious factors.

5.3.2.2   *Cultural and Religious Factors*

The results of my study suggest that some fathers did acknowledge several negative aspects of their food habits. These negative aspects are: (a) consuming unhealthy snacks between meals; (b) no fixed time for meals; (c) regular consumption of food with

saturated fats and high in sugar; and (d) consuming large portions. There is a general agreement among these fathers that these negative food habits may be attributable to social norms in Saudi Arabia which influence people when they choose food for their family in general and for their children in particular. Saudi society is a collective society in which social ties between families are strong and cohesive. Hogreve *et al.* (2020) suggested that parents with a high tendency to engage in social comparisons are more likely to conform to the social norms and trends they observe in their parental social network. Given that the norm in the population studied is to order less healthy products, such as fries, over healthy ones, such as fruit, conforming outcomes are likely (Hogreve *et al.*, 2020). In my study, social norms appear to influence what fathers choose for their children food, not just the amount of food (Vartanian, 2015), as one way to comply with group norms (Cruwys, Bevelander and Hermans, 2015; Cruwys *et al.*, 2015). There is a general consensus among these fathers that these negative food habits are attributed to social customs and traditions that will not be easy to cannot be abandon. It is possible that fathers who have unhealthy food habits may potentially influence their children's preferences for unhealthy foods (Tarabashkina, Quester and Crouch, 2017), contributing to childhood obesity. Consequently, based on these findings, education is needed to correct misperceptions of group norms in order to decrease unhealthy food consumption behaviours and to instil healthy ones.

In terms of religion, it should be first noted that, as stated the Methodology Chapter, my study was conducted in a rural area in the Eastern Province of Saudi Arabia. The majority of the population in that area are "Shia" Muslims (as were all the fathers in my study), one of the two major denominations of Islam (the other being "Sunni"). Each of these sects has its own rulings on food and how food are chosen.

Cook (1986) noted that specific dietary alterations exist between the two Muslim sects with Shia Muslims facing further restrictions compared to their Sunni counterparts.

My study has provided additional evidence in the literature of food socialisation by highlighting how religion influences fathers when they choose food for their children. Unsurprisingly, there is an agreement among all the fathers that religion does influence them when they choose food for their children. These influences revolve around the search for permissible ("Halal") foods and avoidance of forbidden ("Haram") foods. Indeed, all the fathers in my study see the religious imperative as the single strongest influence on the food choices they make for their children. Even if a father was not particularly observant, all of them displayed strict adherence to religious commands in general and sectarianism in particular regarding food consumption for their family in general and for their children in particular. This reflects the religiously conservative nature of Saudi society.

The religious imperative to select certain foods and reject others takes several forms. Firstly, all fathers expressed a choice for food produced in Muslim countries, even local butchers, local restaurants, and local food companies. These intriguing findings could be explained by fathers' authoritarian communication styles with their children. Because of the adherence to religious teachings in general and Shiite commands in particular, the fathers are strict in terms of choosing food that is compatible with their beliefs. These fathers do not give their children any chance to choose food that contradicts their Shia beliefs. Throughout the accompanied shopping trips, I observed that fathers were keen to read the ingredients of the food products on the food labels and check whether the food products came from an Islamic country or not and whether they were "Halal". Although there are different types of tuna fish, for example, from many different countries, the fathers appeared to choose tuna fish from

Islamic countries such as Oman and/or Indonesia. Indeed, Shia clerics emphasise the importance of choosing food from Muslim countries as food from non-Islamic countries, although it may claim to be "Halal" (i.e., prepared according to Islamic teaching), may be doubtful in terms of its purity. Also, while some fathers in my study accepted vegetable gelatine, many distrusted food products that contain animal gelatine such as beef or pig gelatine, particularly from non-Muslim countries. On the accompanied shopping trips, I observed that many fathers were careful not to choose food for their children that contained animal gelatine, including candy, cake, and chocolate. These fathers read the food label very carefully for fear of choosing such food for their children. It is apparent that fathers did not accept any discussion and did not even enter cordial conversations with their children regarding buying candy, cake, chocolate, and other foods that contain animal gelatine. This kind of food is considered "Haram" by Shia clerics. Shia clerics believe that any animal gelatine is prohibited unless it is from an Islamic country (Farah, 2020; Freidenreich, 2011). In Gulf countries, including Saudi Arabia, Musaiger (1982) stresses that parents believe that gelatine, which is used in jelly, is produced from pig bones and Islam prohibits the consumption of pork.

Another manifestation of fathers' strictness regarding food consumption is that many they prefer local butchers, local restaurants, and local food companies from the same religious sect as themselves (Shia). Although Saudi Arabia is a Muslim country, as noted, it is divided between two sects – Sunni and Shia. The fathers in my study are all Shia and felt more reassured when choosing food products from the local community and which Shia clerics approve of. These fathers also consumed food at Shia restaurants as they could be more confident that meats and poultry had been slaughtered in the Islamic way in general and in the Shia manner in particular. Doctrinal

orthodoxy seemed to be a factor for these fathers when restricting choosing food products for their children. As Shia are a minority in Saudi Arabia, these fathers felt to some extent discriminated against and considered it their moral duty to consume and support local retailers. For example, on the accompanied shopping trips, several fathers only bought from the Prima cereal brand for their children because the owner of this company is known to be a Shia businessman. Several fathers also stated that they have stopped visiting American fast-food outlets and prohibited their children from choosing and consuming from these companies. These fathers believe that not only American food products but also fast-food outlets such as Burger King, McDonald's, KFC, and Pizza Hut are not Halal.

Accordingly, some fathers use an authoritarian communication style with their children to control and monitor their children's food consumption activities and shape the development of their children's consumer skills, knowledge, and attitudes. Therefore, the well-established norms of (un)healthy food consumption from the religious viewpoint were not of any consequence to fathers in cases Islamic teaching urges healthy food consumption habits and deters unhealthy ones.

My study suggests that the categorisation of food choices by fathers plays a significant role in shaping their children's food preferences and consumption behaviour. Following Shia teachings, evaluation of food categorisations of food choices took three forms, with the fathers categorising: (a) food sources (country of origin: Muslim vs non-Muslim countries); (b) local restaurants vs international fast-food restaurants; and (c) food types (animal gelatin vs vegetable gelatin and burgers from local butchers vs frozen burgers from international companies). Fathers shape and develop the skills and knowledge of their children's food choices, and children learn from their fathers through observation and imitation (Bandura, 2004, 1977b). In this regard, fathers are

strong influencers when it comes to forming a variety of behaviours in their children, including choosing food based on the fathers' Shia beliefs (more details about father's role modelling will be discussed in Section 5.4.1). Consequently, fathers, through food categorisation and observation, internalises, normalise, and transfer their Islamic religious (Shia) beliefs about food preferences to their children.

Another finding from the data reveals that some fathers claim they do not select American foods at all as they are boycotting American products. These fathers warned their children not to choose and consume food from America. Muslim consumers, including Saudi Arabian citizens, have long been involved in a boycott of American brands on account of US governmental support for Israel, whose governments had implemented repressive policies against Palestinians (Blaydes and Linzer, 2012). Muhamad, Khamarudin and Fauzi (2019) and Kalliny, Minton and Benmamoun (2018) argued that such campaigns in various Muslim countries were motivated more by the religious dimension of the boycott more than anything else. In addition, several fathers indicated that they had also boycotted food products from Denmark due to the events surrounding the caricature of the Prophet Mohammed in a Danish newspaper in 2005. In 2006, both religious sects in Saudi Arabia called for a boycott of Danish products, including food product, as response to the cartoons (Auf, Salleh and Yusoff, 2016; Al-Hyari *et al.*, 2012). The fathers in my study seemed to be targeting products originating from countries that had allowed Islam to be disrespected. Abosag and Farah (2014) suggested that religious animosity was a factor in the boycotting of the Danish company Arla Dairy Food by Saudi consumers. From the perspective of consumer socialisation, certain behaviours and attitudes towards behaving in a certain manner are learned in the family context (in this case from the fathers), through observational learning and direct influence (Grønhøj and Thøgersen, 2009). It seems that these fathers have negative

behaviours and attitudes towards American and Danish food products as a result of religious animosity to these countries. Although some fathers said they did not explicitly teach their children about why this is the case, they can nevertheless learn such habits from their fathers through observation when accompany their fathers to food stores or when their fathers provide food at home. Prior research in conservative Islamic countries, for instance Jordan, Iran, Pakistan, Morocco, and Saudi Arabia, have found animosity towards American products, involving fast-food outlets and services (Maher and Mady, 2010; Bahaee and Pisani, 2009; Chiozza, 2009; Leong *et al.*, 2008). Thus, fathers – either implicitly or explicitly - transmit norms, behaviours and attitudes towards food from America and Denmark, which is observed and reproduced by the children.

Finally, the results suggested that some fathers choose energy-dense food products for religious reasons, namely on certain celebrations. In religious festivities such as Eid (a feast celebrated after the end of Ramadan), Saudi fathers habitually bring sweets, nuts, and cakes to celebrate the festivities with their children. These kinds of unhealthy food social norms are commonly seen in Saudi society. As a result, they are likely to be transmitted from fathers to their children. Kharuhayothin and Kerrane (2017) also found that parents permit their children to have sweets on such special occasions. In their study, parents justified giving unhealthy food to their children by a number of reasons, including: (1) it was not a regular occurrence; and (2) such food consumption occasionally falls outside their control. Similar reasons were found in my study for fathers who selected unhealthy food for their children at Eid. This finding is inconsistent though as concerns about the nutritional value of such food seemed to be the primary concern for other fathers.

In brief, my study argues that tradition and custom inform the fathers' food habits as well as religious teachings. It is highly, therefore, that these food habits, given the place of religion in Saudi society, will be instilled and transmitted to their offspring through the socialisation process. Marketing factors are turned to below.

5.3.2.3   *Marketing Factors*

The results of my study suggested that fathers have mixed reactions to the influence of marketing activities (price promotions and advertising) on their food buying habits. In the case of price promotions, the first group of fathers I observed on the accompanied shopping trips appeared to attach particular importance to them when choosing food for their children. Some of these fathers also move from store to store seeking out good price promotion deals for their children's food. These results are important in furthering our understanding of the role of food price promotions which influence fathers' food purchase decisions. Experimental research has shown that consumers' 'demand sensitivity' for healthy food is greater for a price rise than a decline, but the opposite is the case for unhealthy food (Talukdar and Lindsey, 2013). This point underscores how consumers are more responsive to price promotions offered on unhealthy foods than those offered on more nutritious choices (Moore, Wilkie and Desrochers, 2017). In my study, food price promotions can be seen as the most significant factor for both healthy and unhealthy food choices by fathers. Raskind *et al.* (2017) suggested that the majority of mothers have careful food budgets, and this includes using different in-store cost-saving strategies, for example choosing sale items and generic brands, using coupons, and shopping at different stores according to where an item might be bought at the lowest cost. This could be true for the fathers in my study as well. Budgetary constraints, as discussed in Section 5.3.2.1, appear to mean that fathers want to take advantage of the chance to buy food products at the lowest possible prices. This finding

suggests that initiatives are required for food stores to increase promotions of healthy vis a vis unhealthy food promotion.

Although the fathers usually preferred to take their sons with them to food stores (see Section 5.2.1.1), they did not do so when I was present so as not to ensure that, in their words, we would not be 'disturbed'. It was not evident to me, therefore, how the fathers communicated information and attitudes to price promotions. It is possible, however, that these fathers discussed different stores' price promotions at home with their children, which would develop their children's food shopping skills and knowledge.

Another group of fathers did not opt to buying food on special offers because they saw them as a form of 'deception'. Koo and Suk (2020), Jamal, Peattie and Peattie (2012) and d'Astous and Landreville (2003) all found that consumers had negative views of marketing efforts, including gimmicks such as sales promotions to attract them. My findings support this argument, with some fathers believing that some food stores decreased prices for some food products while at the same time *raising* prices for others as they are feeling of being cheated or betrayed (Le Borgne, Sirieix and Costa, 2018). During accompanied shopping trips, these fathers explained with examples how the owners of the food stores deceive in the prices of food products. For example, one father pointed out that how the food stores raise the prices of yogurt and lower the prices of dairies. Fathers' negative attitudes towards exposure to marketing tactics in food stores, such as sales promotions, may influence their children. As a result, such negative attitudes toward food sales promotions may lead their children to internalise certain normative beliefs about food sales promotions.

With respect to food advertisements, unlike earlier research, my study found that social media platforms, such as Snapchat, have a strong influence on fathers when

it comes to choosing food for their offspring. The majority of Saudi Arabian citizens use Snapchat, and the country had, as of January 2021, the fourth biggest Snapchat user base in the world, with an audience of 21.1 million users (Statista, 2021). Companies exploit social media platforms to reach their target audience, including children and their parents.

The fathers in my study fell into one of two groups. The first group reported that they were not affected by advertisements with regards to the food choices they made for their children. They believed they were immune to these kinds of advertisements and had the cognitive ability to distinguish between appropriate and inappropriate advertisements for food (John, 2008, 1999). However, they did report that advertising can induce them to evaluate the food products advertised, especially unhealthy foods, influencing their perceptions of the desirability and acceptability of such foods (Pettigrew *et al.*, 2013). It seems that those fathers were aware that frequent exposure to unhealthy food advertisements should not lead to the internalisation of consumption patterns of such unhealthy foods. It is thus possible that the behaviours and attitudes of those fathers towards unhealthy food advertising are conveyed to their children.

The second group of fathers claimed that they were influenced by advertising on different social media platforms such as Snapchat, especially for certain foods requested by their children, such as cakes and chocolate. In highlighting how fathers' exposure to Snapchat advertisements such as newly launched food products influences their behaviour, the current study adds to a growing body of literature on whether advertisements aimed at parents impact them in relation to the food choices they make for their children (Tarabashkina, Quester and Crouch, 2017; Pettigrew *et al.*, 2013; Grier *et al.*, 2007). It is generally presumed that parents are knowledgeable consumers (Seiders and Petty, 2004). However, my study suggests that frequent exposure to

unhealthy food advertising on different social media platforms might have an impact on purchasing behaviour in terms of unhealthy food choices, contributing to some degree to the obesity crisis in Saudi Arabia. Based on these results, it is advisable that policymakers in Saudi Arabia propose a means of intervening to restrict advertisements of unhealthy food on social media platforms.

Within consumer socialisation theory, the discrepancy between fathers in terms of dissimilar responses to marketing communications activities (for example price promotions and advertising) are attributed to father's communication patterns. The fathers can be divided into two groups. The first group comprises the fathers who adopt concept-oriented communications with their children regarding food marketing communications (food advertising and food sales promotions). This reflect that these fathers are influenced by such food marketing communications. My study suggests that concept-oriented communication by fathers to children means the latter have more exposure to food advertising (Grier *et al.*, 2007) and food sales promotions, in turn leading to the learning of consumer skills, knowledge, and competencies. Communication between fathers and their sons are directly through shopping trips. In this scenario, communications revolve around why these items of food are chosen instead of others, and the promotional offers may be the reason (Beck *et al.*, 2019; Kim *et al.*, 2017; Steenhuis, Waterlander and De Mul, 2011). Interacting and exposing children to food advertisements appears to be another channel fathers use to communicate information to their children, with fathers explaining the purpose of food advertising and food sales promotions (Grier *et al.*, 2007). Communications between fathers and their children may take an indirect way, through children observing their fathers. It seems that children of fathers who use concept-oriented communication consume healthy food.

The second group of fathers adopts a socio-oriented communication style with their children. These fathers tend not to be influenced by food marketing communications (food advertising and food sales promotions). Fathers who engage in socio-oriented communication teach their children to be obedient to them, and they limit their children's exposure to food advertising and food sales promotions. This type of father-children communication leads to decreased communication about food advertising and food sales promotions. Accordingly, fathers who adopt this communication seemed not to provide a valuable learning environment for their children, who appear to be more likely to consume unhealthy food (Tarabashkina, Quester and Crouch, 2017).

Taken together, my study shows that fathers have different reactions to marketing communications activities such as price promotions and advertising. While some fathers acknowledged that they were influenced, others claimed not to be. The next section will discuss fathers' perceptions of their responsibilities for the food they choose for their children.

All the above-mentioned factors are of importance to fathers in terms of how they influence their children about (un)healthy foods. Some are more widespread than others, possibly due to the nature of the study location. My study was conducted in a rural area in Saudi Arabia, a region which represents: (a) collectivist society, (b) low-income families, and (c) a conservative society shaped by Islamic values in general and Shia values in particular. Hence it is the case that economic, and religious factors are the most influential factors, respectively. Although they are significant, physiological, nutritional knowledge and beliefs, and marketing factors are less influential factors.

5.4 *Fathers' Perceptions of their Roles and Responsibilities for the Food they Choose for their Children*

This section discusses the results of the research, focusing on how fathers in Saudi Arabia perceive their roles and responsibilities as food socialisation agents for their children. These fathers' responsibilities are shaped by various feeding practices. They are: (1) food availability, (2) role modelling, (3) teaching children about, (4), food restricting and controlling children's unhealthy food consumption and (5) encouraging children to consume healthy food and rewarding them for doing so.

5.4.1   Food Availability

The findings of my study reveal two groups of fathers when it comes to (un)healthy food availability at home. The first group of fathers routinely offer different types of healthy food for their children (e.g., fruits and vegetables, dairy, whole-wheat flour bread). This may lead children to be exposed to healthier foodstuffs at home. However, while Litchford, Roskos and Wengreen (2020), Soares, de França and Gonçalves (2014) and Neumark-Sztainer *et al.* (2003) argued that the availability of healthy food at home has a considerable impact on the consumption of these foods by children, my study does not support this finding. Even if these fathers purchase fruit and vegetables weekly or bi-weekly, some of them complained that their children did not want to consume them. The purchase and availability but lack of consumption of these foods leads to spoilage. Although these fathers provide healthy foods such as fruit and vegetables, they are not strict with their children about consuming these foods. Adopting this permissive style of communication does not lead to an increase in children's consumption of healthy food *even if such food is available at home.*

However, the second group of fathers said they choose unhealthy food and beverages (e.g., chocolate, cakes, pastries, indomie noodles, high sugar juices) for their children on a daily basis. My study extends the extant literature on food socialisation by providing insights into the reasons why these fathers provide and socialise unhealthy

food to their children. They identified four reasons for offering unhealthy food. These reasons are: (1) out of a sense of love; (2) out of a sense of remorse; (3) not wanting their children to feel inferior or 'different' when comparing themselves with other children's food; and (4) not wanting their children to have a feeling of being 'deprived' of such food in their childhood. These reasons stem from fathers' emotions and desires to see their children content and happy although they recognise that less nutritional food is unhealthy. They reflect on their own 'deprived' childhoods and do not wish to see their own children suffer in the same way. These emotions make fathers adopt a permissive feeding style whereby they purchase unhealthy foods in large quantities for their children. They always feel emotionally unstable until they respond to all the demands of their children of food and drinks, even if they are unhealthy food and drinks. This might reflect an inability to socialise fruits and vegetable consumption into their children's daily diets. In this case, these fathers' children might go on to like and prefer unhealthy food and drinks, internalising unhealthy food behaviours and continuing to demand that their fathers provide them, in the end leading to childhood obesity. Consequently, it is advisable that fathers do not use such emotional behaviours when choosing and socialising unhealthy food for their children.

Summing up this section, my study suggests that home food availability is an important factor which influences whether or not children make healthy food choices or prefer energy-dense food. Hence, (un)healthy home food availability can predict children's consumption of those food. The next section investigates how fathers act as role models for their children's (un)healthy food and drink consumption.

5.4.2   Role Modelling

One interesting finding is that fathers serve as role models both intentionally and unintentionally, and either positively or negatively, in order to teach their children

about (un)healthy food consumption. The data suggests that the fathers themselves have positive and negative dietary habits. The first group of fathers had shifted to consuming healthy food instead of unhealthy food as a daily routine over the course of their lives. This food consciousness led them to consume healthy foodstuffs such as whole-wheat breads and fruits and avoid unhealthy foods and beverages such as sugary juices, fizzy drinks, energy drinks, and fast-foods. Several factors could explain these observations. Firstly, as mentioned in section 5.3.1.1, these findings might be related to these fathers' healthy food habits and preferences. Secondly, rejection of fast-food outlets could be due to the religious reasons noted in section 5.3.2.2. Thirdly, these fathers may have experienced adverse health issues from the consumption of unhealthy food items. In my study, these fathers attempt to act as role models based on their positive dietary habits and seek to socialise their children into avoiding unhealthy products. These observations confirm that these fathers' children go on to internalise and normalise their father's healthy dietary habits. This finding supports the idea previously identified in the literature that parents' intentional modelling of healthy food habits influences their children's consuming healthy food (Rahill, Kennedy and Kearney, 2020; Chan *et al.*, 2018; Yee, Lwin and Ho, 2017; Draxten *et al.*, 2015; Pearson, Biddle and Gorely, 2009). In my study, these fathers appear to relish choosing and consuming healthy food such as fruits and salad in front of or together with their children. These fathers seemed to be socialising the benefits of family meals as events that reduce unhealthy food and soft and sugary drinks consumption. These findings concur somewhat with research conducted by Watterworth *et al.* (2017), who suggested fathers' role modelling, including advising children in meal preparation, was linked to decreased nutritional risk scores in preschool Canadian children. Therefore, the outcomes here reveal that these fathers play an important role in teaching consumer skills in food related practices such

as role modelling to influence their children to consume healthy foods and avoid unhealthy ones.

The second group of fathers, however, choose energy-dense products such as (consuming soft drinks, high calorific chocolates and biscuits, and ice cream) for their own diets. One challenge in the present literature is the emphasis on the intentional modeling of healthy habits. Vaughn *et al.* (2016) noted that although it might not be intentional, parents can (and do) model unhealthy consumption behaviours. Hebestreit *et al.* (2017), Palfreyman, Haycraft and Meyer (2014) and Campbell *et al.* (2007) suggested that parental role modelling can lead to negative dietary outcomes, for example when the eating of unhealthy food in the home setting includes soft drinks and sweet and savoury food. Likewise, in my study, the fathers who choose and consume unhealthy foods were found to be consuming unhealthy food in front of their children and shared such food and drinks with their children, leading to their children becoming socialised into the same habits (Vaughn *et al.*, 2016).

The discrepancy between these fathers regarding positive and negative food role modelling practices could be due to fathers' feeding styles. Fathers are revealed to employ different feeding style. For fathers who practice positive food consumption seemed to be authoritative fathers. In this regard, these fathers have a tendency to communicate quite effectively with their children (Mikeska *et al.*, 2017). They appear to discuss, explain, and justify to their children why they do not consume certain unhealthy foods and reject the consumption of such foods. Similarly, Vollmer (2019) suggested that children of authoritative parents who model healthy eating are less likely to consume foods high in fat and/or sugar. Thus, I argue that when fathers adopt an authoritative communication style, there is a possibility that their children increase their consumption of healthy foodstuffs. Authoritative fathers appear to have more positive

interactions with the marketplace for foodstuffs (Mikeska, Harrison and Carlson, 2017). Conversely, fathers who practice negative food consumption habits are more likely to adopt a permissive feeding style. Permissive (low demands of their children, high responsiveness to children's requests) fathers do not impose demands on their children and demonstrate a more open and accepting mode of behaviour with their children (Maccoby, 2007). These fathers were also found to consume unhealthy foods in front of their children and hence are more likely to socialise unhealthy food choices. My study, therefore, confirms that permissive fathers might increase their children's unhealthy food consumption by modelling unhealthy food choices.

Overall, with respect to food socialisation, my study suggests that fathers' (un)intentional role modelling can be a guide to healthy and unhealthy food selections for their children. The next section discusses how fathers teach their children about food.

5.4.3   Teaching about Food

The results of my study additionally advance understandings of how fathers see educating, guiding, and socialising their children in relation to (un)healthy food consumption through various approaches as an important fatherly responsibility. All the fathers used one or multiple approaches (see Table 4.9, Section 4.4.3.1). The teaching approaches employed by fathers are likely to be related to father communication patterns (concept-orientation vs. socio-orientation) (Moschis, 1985). The fathers in my study seemed to adopt concept-orientated communication styles with their children when teaching them about (un)healthy food. These fathers communicated with their children in an open manner. They teach their children to consider more than one side of an issue by explaining the advantages and disadvantages of the food that their children wish to choose and consume. They encourage their children to evaluate all food

alternatives before making choices and are likely to expose their children to debate, either by openly not choosing unhealthy food or by discussing with them why it is better to select healthy food. They also targeted the internalisation of favourite healthy food through food socialisation. Thus, concept-orientation communication increases and fosters the independent development of consumer skills in children (Mikeska *et al.*, 2017) and hence has a long-term impact in the form of proactive consumer socialisation efforts (Moschis, 1985).

Some fathers, in the interviews, highlighted that educating their children is part of their responsibilities towards their children, and they strive hard to teach their children to take into consideration the reasons why it is better to consume healthy food. In practice, however, it is notable that the food choice diaries and accompanied shopping trips revealed that these fathers actually do the opposite than stated in the interviews, making unhealthy food choices for their children (as discussed in Section 5.4.1). This contradiction may reflect the factors noted above, namely that some fathers employ a permissive communication style (see Section 5.4.1).

My study extends the extant literature on food socialisation by highlighting that father had mixed experiences in their attempts to educate their children about the benefits of healthy food and, conversely, the problems of unhealthy food. These experiences were either generally positive or negative. Whereas some fathers reported that their children responded positively by stopping their consumption on unhealthy foods and increased their consumption of healthy food, others found it hard to persuade their children to replace nutritiously poor choices with healthier alternatives. These findings may be linked to the age of the children. It appears that whilst children aged 2-10 years old were found to be highly receptive to the advice of their fathers, those aged 11 year and above are less likely to obey their fathers' requests advice about

(un)healthy food choices. Because children at the younger ages have limited cognitive development cognitive, they rely on their fathers and consider them to be their role models. As a result, they are more easily influenced by their fathers' teaching of heathy food consumption. Alternatively, as noted in section 5.2.1.2, because fathers rely on their sons aged 11 and over to help with household responsibilities, including selecting food for the family, the sons have already developed a degree of independence in their food choices. Children at this age feel they have consumer skills that they can rely on. The fathers in my study seem to believe that from this age onwards the children should be given the freedom to choose what they want. They perceive that the children have reached a stage of mental maturity sufficient to make decisions including the selection and consumption of food. This is in-line with John's (1999) argument highlighting that children at this age begin to have a more reflective way of thinking as they move into adolescence and become more familiar with the social meanings and foundations of the consumer marketplace. Consequently, this leads to the sons being less willing to take the advice of their fathers into account regarding foods and being more likely to choose and consume unhealthy foods.

An alternative explanation of fathers' positive/negative experiences regarding their children's reactions to their teaching and socialising about (un)healthy food consumption concerns role modelling (as discussed in Section 5.4.2). Teaching children about avoiding unhealthy food consumption by fathers has no value, especially when the fathers act as a negative role model by practicing and providing unhealthy food for their children. Therefore, children do not take into account their fathers' advice about healthy food consumption. In contrast, when fathers act as positive role models in terms of healthy food consumption and avoiding unhealthy food, their children are more

obedient to their fathers' warnings about unhealthy food and encouragement to choose and consume healthy food.

In sum, my study suggests that fathers consider educating children about (un)healthy food to be one of their responsibilities. While some fathers had positive experiences regarding children's response to the approaches deployed to influence their children about food, others had negative experiences. The next section investigates how fathers restrict and control their children's unhealthy food and drink consumption.

5.4.4   Restricting and Controlling Children's Unhealthy Food

 The results of my study indicate that some fathers utilise several strategies to restrict unhealthy food consumption by their children: (1) they limit the quantity and the types of unhealthy food and drinks; (2) they allow their children to consume unhealthy foodstuffs after they have eaten healthy food ; (3) they use a procrastination strategy if they do not agree with their children's food demands (especially unhealthy food); and (4) they ban certain food and drinks at home for their children such as (e.g., indomie noodles, mayonnaise and ketchup, soda drinks, etc.). These restriction strategies have been identified in previous research (Grønhøj and Gram, 2020a; Mâsse *et al.*, 2020; Marshall, O'Donohoe and Kline, 2007). Despite fathers employing different strategies to restrict and/or ban unhealthy food, they experience difficulty controlling their children's desire to consume unhealthy food and drinks. These difficulties revolve around: (a) children's age, (b) gender, and (c) and fathers' absence from home, and; (d) children visits to relatives.

With respect to children's age, the fathers strictly monitor and control the food consumption of *younger* children (2-10 years old). This finding is contrary to that of Yee, Lwin and Ho (2017), who found food restrictions to be more effective in reducing unhealthy food consumption among *older* children than younger children. Their

findings might reflect that younger children in the pre-operational stage (age 2 to 6) are less able to follow rules or limits imposed by parents because of limited self-regulation capabilities (Williams, Gazley and Ashill, 2020; Williams, Ashill and Thirkell, 2016; Gaumer, Arnone and Ashley-Cotleur, 2013; John, 1999). In contrast to Yee, Lwin and Ho (2017), my data suggests that fathers experience difficulty controlling children aged over ten. Building on the arguments discussed in Sections 5.2.1.2 and 5.4.3, two lines of interpretation may account for this pattern of findings. On the one hand, it could be related to how children aged over ten have already secured some degree of independence in terms of choosing the food they prefer. On the other hand, it is possible that children over ten years of age may have greater access to food outside the home, especially the sons, such as convenience stores. Where I conducted my study, there are several conveniences stores close to the fathers' residences. Thus, children can find in these stores an opportunity to purchase the food (especially unhealthy food and drinks) that their fathers forbid or limit at home.

In terms of children's gender, my study adds to a growing body of literature on how the restrictions or bans those fathers impose on the consumption of certain foods by their children is related to gender. While the fathers were less reluctant to satisfy their sons' food and drink requests, they did for their girls even in instances where the food are not healthy choices. In short, these fathers appeared to be treated their children differently according to their gender. The fathers are tougher with their sons regarding food and drink requests. This finding could be linked to the nature of Saudi society in terms of fathers' relationships with daughters and sons. Saudi fathers consider it the norm to treat their boys with a degree of strength and toughness to prepare them for the difficulties they will face when they are adults. In contrast, fathers tend to show more 'softness' to their daughters, possibly because they believe that females are in general

treated more harshly and lead restrictive lives when they grow up, and hence meeting their requests when they are children is a way of showing love, even if the choices may lead to health issues. Bouhlal *et al.* (2015) reported that mothers were commonly more considerate about selecting food when the indicator children were daughters, trying to choose healthy food for them. Boys, in contrast, were given less healthy foods. In my study, however, fathers possibly choose food in line with their daughters' preferences (i.e. be more receptive to requests for sweets and other sugary foods) but might take into account other factors when selecting food for their sons. These differences in food choices made for daughters may be a contributing factor to the development of childhood obesity in young girls. This difference in findings between some existing studies and my study are attributable to the cultural setting of these studies and parental views of gender differences.

Nonetheless, some fathers experience another issue controlling their children's consumption of unhealthy food - absence from home or visits to relatives. It is likely that children who are strictly controlled and monitored in terms of their consumption of unhealthy food feel more 'free' and relaxed when their fathers are absent or when they visit relatives such as grandparents.

Overall, my study argues that while some fathers see it as their role to ban and/or restrict their children's unhealthy food consumption, they find it hard to control unhealthy food and drink consumption by their children. The next section discusses food encouragement and rewards as another food practice adopted by fathers in socialising their children's consumption of healthy food.

5.4.5 Encouraging and Rewarding Children's Consumption of Healthy Food

Contrary to unhealthy food restriction and control discussed in Section 5.4.4, the results of my study note that fathers deploy various strategies to encourage their children to

consume healthy food and drinks. These strategies are: (1) cutting fruits and making green salads for their children during family snack and/or mealtimes; (2) using external cues (*this food is good for you*); (3) not pressuring children to consume specific healthy food; and (4) using unhealthy rewards. These kinds of food practice show that these fathers take an active role in their children's food socialisation with respect to consuming healthy foods (strategy 1). Additionally, the fathers believe that pressuring their children into consuming certain healthy foods may be counterproductive and lead to a distaste for such foods (strategy 2). They also employ external cues to explain and convince children to change their consumption behaviour in favour of healthy food (strategy 3).

Taken together, these strategies are likely to be related to fathers' communication patterns (socio-oriented vs. concept-oriented). It is clear that fathers utilise concept-oriented communication patterns when they discuss food matters with their children. They attempt to foster development of their children's skills, norms, knowledge, and attitudes related to the marketplace for foods by encouraging them to consume healthy foods in order to develop their own healthy food consumption preferences and competencies as consumers (Moschis, 1985). Hence, such learning and interaction between fathers and their children might influence and develop their children to consume and prefer such healthy food in both the short and long terms (Moore, Wilkie and Desrochers, 2017; Moore, Wilkie and Lutz, 2002).

Even if fathers used concept-oriented communication patterns, they have difficulty encouraging their children to consume healthy food. For example, allowing unhealthy foods as a reward was employed in two cases (strategy 4). The first case was when the children behave well, such as helping with cleaning the house. The second case when other fathers acknowledged the irony of utilising unhealthy food high in fat,

salt, and sugars as a reward for their offspring when they consumed healthy food. However, providing children with such unhealthy food as a reward may internalise and normalise a preference for such food. This may in turn lead to childhood obesity. A plausible explanation for why these fathers use unhealthy food as a reward seems to be that doing so is related to a permissive feeding style. Lora *et al.* (2016) suggest that fathers of pre-school children using food as a reward is related to children's consumption of sugar-sweetened drinks in Latino children. In my study, however, despite the permissive feeding style of fathers leading to consumption of unhealthy food to encourage them to consume healthy options first, these fathers' children do not seem to actually consume healthy foods at all. Therefore, it is advisable that fathers do not to utilise the offer of less nutritious food to influence their children's behaviour. Instead, they should urge their children to consume various healthy foods.

In summary, my study suggests that although the participating fathers employed different strategies to motivate their children to consume healthy food, they struggled to balance healthy and unhealthy food consumptions and selections for their offspring.

5.5   Conclusion

The overall research aims of my study are:

(1) to explore the role of the male heads of the family – fathers – as key agents of socialisation who influence their children's (un)healthy food consumption in the culturally distinctive nation of Saudi Arabia.

(2) to identify salient issues from the data to inform more efficacious healthy food marketing policy to address the obesity problem in Saudi Arabia.

My study pursues the following research objectives:

- How fathers make food choices for their children.

- Factors influencing fathers' food choices for their children.

- Fathers' perceptions of their roles and responsibilities for the food they choose for their children.

It is evident from consumer socialisation theory that fathers are more engaged and keener to transfer knowledge, skills, attitudes, and behaviours to their children, particularly when it comes to shopping for food in food stores.

In spite of fathers influencing their children's food socialisation, multiple factors are involved in this (see Section 5.4). Although all of these factors affect fathers, some have more influence than others, namely social, economic, and religious factors.

When observing the food practices of fathers in the home such as type of food availability, role modelling, restricting and controlling of unhealthy food, and encouraging and rewarding for consumption healthy food, it is clear that fathers socialise healthy and unhealthy foods for their children.

Overall, coming back to the overriding aim of my study, the main argument of my findings is that fathers encounter different and diverse challenges balancing healthy and unhealthy food consumption for their children.

The next chapter begins by setting out my study's contributions to the field. Then, I highlight the study's limitations and point to possible avenues for further research. Finally, I reflect on my doctoral programme experiences.

6   Chapter Six: Conclusion

6.1   Introduction

As noted in the Introduction Chapter, the central research aim of my study is to explore the role of the male head of the family – fathers – as key agents of socialisation who influence their children's (un)healthy food consumption in the culturally distinctive nation of Saudi Arabia. The second aim of my doctoral research is to identify salient issues from the data to inform more efficacious healthy food marketing policy to address the obesity problem in Saudi Arabia.

To fulfil these aims, my doctoral research objectives were:

a. To critically review the literature on consumer socialisation theory and family food choices.

b. To explore how and why Saudi fathers make (un)healthy food choices for their children, and the implications for the child obesity problem in Saudi Arabia.

c. To explore how fathers in Saudi Arabia perceive their roles and responsibilities as socialisation agents for the food they choose for their children.

d. To contribute to consumer socialisation theory on male heads of family as key socialisation agents on their children's food consumption within the cultural context of Saudi Arabia.

e. To identify the salient issues from the data to inform a more efficacious healthy food marketing policy to address the child obesity problem in Saudi Arabia.

This concluding chapter begins by setting out my study's contribution to research based knowledge. This is followed by presenting the study's limitations and mapping some directions for future investigation in the field. Finally, the chapter concludes by offering some broader reflections on the doctoral programme experience.

6.2   Research Contributions

6.2.1   Contribution to Knowledge

Previous studies in the field of food consumer socialisation have been conducted in the west, for example in Denmark (Grønhøj and Gram, 2020a), the UK (Kharuhayothin and Kerrane, 2018), Australia (Judd *et al.*, 2014), and the USA (Hughner and Maher, 2006). However, my research is the first study to adopt consumer socialisation theory in family food consumption, specifically fathers' food choices for their children, in the context of Saudi Arabia culture. Saudi Arabia is a developing country that is evidently different from western developed countries in various aspects. Saudi Arabia is a conservative Islamic country in which citizens demonstrate a religious commitment in all aspects of their lives, including fathers' choice of food for their children. In addition, despite the recent openness in Saudi society that women have been able to enjoy, many families still depend on male family members in many aspects of life. Males take or shape most decisions regarding family activities and lifestyle, involving food selections, as a result of social and religious beliefs that value masculine authority. Therefore, my research extends consumer socialisation theory by applying it in a vastly different culture to western countries.

Three areas of theoretical contribution can be emphasised in light of the existing literature on consumer socialisation with respect to family food socialisation processes (see Figure 6.1): *how fathers make food choices for their children* (objective a); *factors influencing fathers' food choices for their children* (objective b and *fathers' perceptions of their roles and responsibilities for the food they choose for their children* (objective c). Each theoretical contribution will be discussed in sequence.

Figure 6.1 Role of the fathers as key agents of socialisation who influence their children's (un)health

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┌─────────────────────────────────────────────────────────────────────────────────┐
│   ┌──────────────────────────────┐                    ┌──────────────────┐        │
│   │  Food socialisation process  │                    │     Outcome      │        │
│   └──────────────────────────────┘                    └──────────────────┘        │
│                  ↓                                             ↓                   │
│  ┌ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ┐         ┌ ─ ─ ─ ─ ─ ─ ─ ─ ┐         │
│    ┌────────────────────────────────────┐                                         │
│  │ │ Fathers (Agents) – Father-child    │ │       │                     │         │
│    │ food interaction                   │                                         │
│  │ │   ▪ Food shopping involvement      │ │       │                     │         │
│    │   ▪ Father-son interaction in food │                                         │
│  │ │     stores                         │ │       │                     │         │
│    └────────────────────────────────────┘                                         │
│  │                ↓                       │       │                     │         │
│    ┌────────────────────────────────────┐                                         │
│  │ │ Fathers (Agents) – Factors         │ │       │                     │         │
│    │ influencing                        │                   →  Children's food     │
│  │ │┌──────────────┐ ┌────────────────┐ │ │       │             socialisation      │
│    ││ Endogenous   │ │ Exogenous      │ │                                         │
│  │ ││ factors      │ │ factors        │ │ │       │                     │         │
│    ││▪ Physiological│ │▪ Economic      │ │                                         │
│  │ ││  factors     │ │  factors       │ │ │       │                     │         │
│    ││▪ Nutritional  │ │▪ Culture and   │ │                                         │
│  │ ││  knowledge   │ │  religion      │ │ │       │                     │         │
│    ││  and beliefs │ │  factors       │ │                                         │
│  │ ││▪ Social      │ │▪ Marketing     │ │ │       │                     │         │
│    ││  factors     │ │  factors       │ │                                         │
│  │ │└──────────────┘ └────────────────┘ │ │       │                     │         │
│    └────────────────────────────────────┘                                         │
│  │                ↓                       │       │                     │         │
│    ┌────────────────────────────────────┐                                         │
│  │ │ Fathers (Agents) – Food practices  │ │       │                     │         │
│    │  ▪ Food Availability               │                                         │
│  │ │  ▪ Role modelling                  │ │       │                     │         │
│    │  ▪ Teaching about foods            │                                         │
│  │ │  ▪ Restricting and controlling     │ │       │                     │         │
│    │    children's unhealthy foods      │                                         │
│  │ │  ▪ Encouraging and rewarding       │ │       │                     │         │
│    │    children's consumption of       │                                         │
│  │ │    healthy foods                   │ │       └ ─ ─ ─ ─ ─ ─ ─ ─ ┘         │
│    └────────────────────────────────────┘                                         │
│  └ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ┘                                      │
└─────────────────────────────────────────────────────────────────────────────────┘
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6.2.1.1   How Fathers Make Food Choices for their Children

Present theories of consumer socialisation are revisited (Kerrane and Hogg, 2013), as recent studies have been addressing at a disaggregated level of family. Several studies were done to investigate a gender in consumer socialisation, for example, mother-daughter (Gillison et al., 2015; Ogle, Hyllegard and Yan, 2014; Minahan and Huddleston, 2013, 2010). Although these studies respond to a call of studying at a disaggregated level of family and look at the specific gender in one family (Ekström, 2006; John, 1999), this type of study is still in its infancy stage (Harrison *et al.*, 2021; Kerrane, Bettany and Kerrane, 2015; Kashif, Ayyaz and Basharat, 2014). In this sense, consumer socialisation is under-theorised, and theories relating to the operations of the family relationship represent an important gap in present family consumer research (Kerrane, Bettany and Kerrane, 2015). Therefore, investigating consumer socialisation within discrete and isolated family dyads (e.g. father-son communication) is scarce (Al-

Zu'bi, Crowther and Worsdale, 2008; John, 1999), especially within the context of food socialisation. This doctoral research responds to this gap, highlighting how father-son communication shapes the food socialisation practices of the latter. As John (1999) points out, the relationship between such interactions have as much if not more influence on consumer socialisation than broad family dynamics. Moore, Wilkie and Desrochers (2017) highlight that previous childhood obesity studies have been largely concentrated on mothers; therefore, the influence of other family members, such as fathers, is less well understood. Thus, my study is particularly valuable with regard to the roles fathers play in their children's food socialisation, particularly how they contribute to the formation of (un)healthy food consumption behaviours. My research has created disaggregation of family activities into the father-child and father-son interaction which has provided a more nuanced understanding of food socialisation and (un)healthy food choices.

My study provides important insights into how and why Saudi fathers take their sons instead of their daughters for food store shopping, something absent in the current literature on food socialisation. Through interviews, the fathers in this study explicitly pointed out that shopping with daughters is considered dishonourable in this society. Given the patriarchal nature of Saudi Arabian society, fathers take only their sons shopping with them in order to (1) prepare and teach them for when they build a family and are faced with the responsibility of choosing (un)healthy foods, and (2) get them to assist with household chores, including food purchasing for the family. In Saudi culture, sons begin to get a sense of manhood when they learn with their fathers about the responsibilities that will assume later in life. Therefore, even though daughters may increase their food skills and knowledge only by observation when the fathers buy food

and provide it at home, fathers give more importance to their sons in Saudi society in terms of food socialisation *outside* the home.

My research has provided specific additional evidence with respect to how fathers teach their sons about (un)healthy food in food stores, as called for in research by Moore, Wilkie and Desrochers (2017). Most prior research has concentrated on parent-child interactions in food stores from the standpoint of family decision making (Rachmi *et al.*, 2018; Calderon *et al.*, 2017; Chikweche, Stanton and Fletcher, 2012; Nørgaard and Brunsø, 2011; Flurry and Veeck, 2009; Nørgaard *et al.*, 2007; Belch, Belch and Ceresino, 1985; Atkin, 1978). In contrast, little is known about how fathers undertake food shopping and how they see their role in food stores (Grønhøj and Gram, 2020a; Gaumer, Arnone and Ashley-Cotleur, 2013; Lawlor and Prothero, 2011; Buijzen and Valkenburg, 2008). Unlike previous research (Makhal *et al.*, 2020; Allirot, Maiz and Urdaneta, 2018; Gram, 2010; O'Dougherty, Story and Stang, 2006), the current research finds that fathers educate their sons about food groups (healthy VS unhealthy food). In more detail, some fathers ask their sons to read the ingredients in order to understand the contents of the food products. Other fathers make sure their sons read the production and expiry dates of food products. In addition, interestingly, the findings also suggest that fathers have devised another way to develop their sons' skills and knowledge, namely, letting them choose whatever they want - even unhealthy food - in food stores. In so doing, fathers believe that they can prepare their sons to assume responsibility for how to make (un)healthy food selections for themselves and for their family in the future. Consequently, my study extends the literature of food socialisation when fathers teaching their sons about (un)healthy food choices during accompanied shopping trips.

Furthermore, my research extends the body of literature on food consumer socialisation by highlighting how the strategies employed by fathers and their sons during food shopping trips. There has not been much focus on the influencing and negotiation strategies of children and/or parent's reactions to this (Lawlor and Prothero, 2011). John (1999) calls for for additional research into the links between influencing and negotiation strategies and other facets of children's consumer knowledge and behaviour. My study answers this call. Lawlor and Prothero (2011) acknowledge that while a parent's refusal to buy a requested item can commonly cause parent–child conflict, it can equally be considered as an inevitable part of childhood and family interaction. They argue such communications socialise children into the behaviours, values, resources, and restrictions underlying the family unit, and more general, they prime children for the commercial truths of the marketplace. Although fathers experienced 'pester power' from their sons by employing various strategies to choose certain unhealthy foods (see Table 4.3 in Chapter 4), they have different reactions to this. On the one hand, some fathers apply conversation-oriented techniques and openly discuss their sons' food choices. Other fathers deploy their parental authority to return unwanted items selected by their sons and limit them to a small number of unhealthy food choices. Despite these fathers using different communication strategies with their sons to avoid conflict during accompanied shopping trips, the majority of them feel comparatively powerless in the face of pestering by sons requesting unhealthy food products.

6.2.1.2   *Factors Influencing Fathers' Food Choices for their Children*

Whilst parents' beliefs about healthy food has been documented elsewhere (for example, Dennison, Erb and Jenkins, 2001), the findings of my research extend the food socialisation literature by highlighting how illogical beliefs about unhealthy foods

held by fathers influences their food choices for their children. Munsell *et al.* (2016) suggest that it is important to understand possible misperceptions among parents related to certain unhealthy foods. Through the food choice diaries and interviews, some fathers explained their erroneous beliefs about unhealthy food being healthy by emphasising that these foods include nutritious ingredients (i.e. ice cream contains milk). Other fathers allow their children to drink soda beverages after a large meal, believing that doing so improves digestion. These beliefs about unhealthy food are explicitly transferred to their children. This may in turn lead to childhood obesity.

My results provided greater insights into interactions that occur between fathers and other family members. Moore, Wilkie and Desrochers (2017) and Rhodes *et al.* (2016) called for more research on family interactions in the context of eating disorders and obesity. Answering this call, my study explores interactions between fathers and their wives regarding how the food socialisation process is formed and how wives might influence their husbands to socialise their children in terms of food consumption. Earlier research indicated that the wife plays a major role in the process of making food decisions for the family (e.g., Rachmi *et al.*, 2018; Chikweche, Stanton and Fletcher, 2012; Flurry and Veeck, 2009). Moore, Wilkie and Desrochers (2017) asked about how often wives and husbands agree on their children's food consumption and with what results. Tarabashkina, Quester and Crouch (2017) called for additional studies highlighting the role of wives in choosing unhealthy foodstuffs. Intriguingly, my study reveals that husband-wife interactions can be divided into four categories: (1) some fathers disagree with their wives about the foods they chose, (2) others agree with their wives, (3) other fathers followed the advice of their wives and choose healthier food for their children, and (4) still others choose healthy food for their children while their wives are not able to make healthy nutritional choices. However, in my study such

father-wife interaction does not appear to influence the fathers in the food socialisation process as the fathers did not pay much attention to their wives' advice and guidance regarding the foods they choose for their children. Consequently, because fathers in Saudi Arabia are responsible for providing food for the family in general and for their children in particular, children are more likely to internalise food consumption habits through their fathers.

Another familial interaction observed in my research concerns siblings. Siblings are significant social agents in the consumer socialisation of children (Kerrane, Bettany and Kerrane, 2015; Kerrane, Hogg and Bettany, 2012), and considerably affect young people's consumer behaviour (Ragelienė and Grønhøj, 2021). Siblings are developing blocks of the family structure and important players in family dynamics (Ragelienė and Grønhøj, 2020). They have direct influence on one another's advancement, behaving as social allies, role models, and foils (McHale, Updegraff and Whiteman, 2012). This can have a significant effect on children's food selection and consumption habits (Ragelienė and Grønhøj, 2020). Contributing to the small volume of research on siblings, the findings of my research enhance our understanding of the role that sibling gender plays in food socialisation. For example, the evidence here reveals that fathers disagree about the unhealthy food that male children offer to their female siblings. As a result, this finding signifies the major role that boys in particular play in Saudi families, itself a result of prevailing social and cultural norms.

My research demonstrates, for the first time, the influence of religion on fathers when they select food for their children. The extent to which religion plays a role in food socialisation remains poorly understood (Scott and Vallen, 2019). In general, Saudi Arabia is a religious society. Throughout the food choice diaries, interviews, and accompanied shopping trips, the evidence suggests that religion in general, and

sectarian (Shia) doctrine in particular, play a vital role in fathers food socialisation habits. "Halal" and "Haram" foods are considered to be the main criteria for all fathers in food socialisation, according to Muslim teachings. For example, throughout the accompanied shopping trips, it was found that fathers give high priority to food from Muslim countries and reject food from non-Muslim countries. In addition, the evidence shows that fathers avoid selecting food for their children that contains animal gelatine, such as cakes, chocolates, and candies, as these foods are considered Haram. Furthermore, I show that although the fathers trust food from Muslim countries, they nevertheless try to select *local* outlets and/or outlets from the same religious sect as themselves (Shia). Thus, the evidence in my research suggests that the religious factor is instilled and transmitted to children through the socialisation process.

Finally, the findings of my research add directly to the growing body of research on the influence of advertising by highlighting the influence of food advertising in social media platforms such as Snapchat. While it is assumed that adults are capable of resisting the influence of food marketing (Tarabashkina, Quester and Crouch, 2017), a recent experimental study has demonstrated that parents form favourable impressions of, and a greater desire to consume, foods targeted at children after exposure to certain adverts (Pettigrew *et al.*, 2013). There is a limited amount of research on how parents are influenced by advertisements with regard to the food choices they make for their children (Tarabashkina, Quester and Crouch, 2017; Pettigrew *et al.*, 2013; Grier *et al.*, 2007). These studies evaluated this phenomenon without giving a comprehensive breakdown across various marketing communication channels. Tarabashkina, Quester and Crouch (2017) called for further research on parents' exposure to unhealthy food advertising in different channels, such as digital advertising. In addition to previous studies, the results of my study show that some fathers are influenced by food

advertising in the social media platform Snapchat for specific unhealthy foods requested by their children. It would therefore appear to be the case that repeated exposure by these fathers to unhealthy food advertising on social media platforms like Snapchat may result in favourable social norms developing about unhealthy food choices.

6.2.1.3   *Fathers' Perceptions of their Roles and Responsibilities for the Food they choose for their Children*

The findings of my research provide further evidence as to the reasons why fathers socialise and offer unhealthy food to their children. (Un)healthy food availability at home is imitated and internalised by children as they grow up (Harris and Ramsey, 2015; Sutherland *et al.*, 2008). However, perhaps surprisingly, little is known about *why* parents choose unhealthy food for their children in the first place. The evidence from my research highlights four factors that influence fathers to select unhealthy food for their children: (1) out of a sense of love; (2) out of a sense of remorse; (3) not wanting their children to feel inferior or 'different' when comparing themselves with other children's food; and (4) not wanting their children to have a feeling of being 'deprived' of such food in their childhood. These reasons derive from fathers' emotions and a natural desire to see their children satisfied and happy, even though they acknowledge that less nutritional food is unhealthy.

My research expands the literature on food socialisation by providing evidence with respect to different teaching strategies employed by fathers to educate their children about (un)healthy food consumption. Research in the field of parental mediation has suggested that active discussions are an effective parental socialisation method to shape desirable results (Buijzen, 2009). However, this study was not conducted in the context of food consumption, and parents teaching children about food consumption is under-developed and under-investigated in this regard. Yee, Lwin and

Ho (2017) called for additional research on how parents teach and discuss matters with their children in the domain of food consumption. They also called for greater understanding of how positive or negative teaching can influence children's food consumption. My study demonstrates that fathers use various communication strategies approaches to teach their children about (un)healthy food consumption. These approaches are: (1) advise and warn about consuming unhealthy food, (2) dangers of unhealthy food and benefits of healthy food, (3) repeat stopping eating unhealthy food, and (4) offer alternatives to unhealthy food. Accordingly, even though some fathers stated that their children responded positively by stopping consuming unhealthy food and raising their consumption of healthy food, others found it hard to persuade their children to replace unhealthy food choices with healthier options.

With regard to restricting unhealthy food choices, my research extends knowledge of food socialisation in terms of the role children's gender plays. However, little is known about how parental food selections vary when they are chosen for young girls versus young boys, and what factors drive parents to make certain food selections for each (Bouhlal *et al.*, 2015). The evidence from my research suggests that Saudi fathers treat their children differently according to gender. The fathers here appeared to be less willing to fulfil their sons' food and beverage demands than is the case for their daughters when the food is not a healthy option. Fathers tend to be 'softer' with their daughters because they believe that females are in general treated more harshly and lead more restrictive lives when they grow up, and thus meeting their desires when they are children is a way of showing affection, even though some fathers are aware that these choices could lead to poor health outcomes. Hence, fathers play important roles in shaping their children's food consumption based on gender (Bouhlal *et al.*, 2015). The next section addresses managerial and marketing issues.

6.2.2   Implications for Practitioners and Policymakers

The second aim of my study is to suggest a more efficacious healthy food marketing policy to address the obesity problem. The results of my study lead to important implications for developing healthy education campaigns and marketing campaigns for policymakers. These implications aim to encourage fathers to socialise healthy food choices for their children. The following implications from my research aim to help fathers socialise their children into healthier food choices.

6.2.2.1   *Healthy Education Campaigns*

The consumer socialisation literature indicates that consumption patterns are shaped in childhood (Moore, Wilkie and Desrochers, 2017). If children are given and socialised into unhealthy food instead of healthy food, they internalise poor dietary habits and choices into adulthood. In sum, parents setting their children up for poor dietary habits and choices in adulthood, perhaps for life, leading to potentially life-long health issues (Steptoe, Pollard and Wardle, 1995b). Currently, no health educational programmes target parents in Saudi Arabia. In order to increase parents' healthy food consumption, it is important to take action and employ such interventions.

According to Seiders and Petty (2004), the aim of health education campaigns in general is to increase consumer knowledge of obesity-related health problems and shift focus to prevention, instead of treatment, of obesity. The data from my study reveals that fathers appear to have some nutritional knowledge about the hazards of consuming unhealthy food. The data also shows that fathers teach their children about (un)healthy food. Through the accompanied shopping trips, however, it was clear that this knowledge is not consistently employed in the food selections they make for their children. Another issue emerging from the data is that some fathers have illogical beliefs about unhealthy food. If parents are to make healthier food selections, they need to be better educated (Hughner and Maher, 2006). The results of my study suggest a

need for consumer education in Saudi Arabia regarding fathers' choices of food for their children. Consequently, such national health programme would assist fathers make more educated food selections on behalf of their children.

In addition, understanding how fathers act as role models has important consequences for health education programmes. It is clear that some fathers act as a negative role model in choosing and consuming unhealthy food in front of and for their children. Moreover, some fathers were found to be encouraging their children to consume unhealthy food as a "reward" for consuming healthy food. Thus, children are socialised into such observed food practices (Bettany and Kerrane, 2018). Launching healthy consumption campaigns aimed at fathers could reduce these negative food practices.

I suggest several strategies could be used to implement these interventions. First, Saudi Arabia is a Muslim country, and the people in Saudi Arabia are strongly influenced by religious opinion leaders. People generally pray five times a day. Within a Muslim society such as Saudi Arabia, religious leaders lead congregational prayers in the mosque setting (Mustafa *et al.*, 2017), acting as the 'gatekeepers' for various social and cultural problems. Hence, health interventions could be led by religious leaders and at places of worship (mosques).

Second, a collaboration between the Ministry of Health and the Ministry of Education launched a agility (RASHAKA) programme in children's schools (Al Eid *et al.*, 2017). The goal of this programme is to promote healthy lifestyles by enhancing dietary behaviour, improving physical activity, and raising awareness of obesity risks. I recommend that policymakers in Saudi Arabia design and develop health initiatives, including how to select food for both fathers and their children, and that schools be the place where fathers and their children attend these initiatives.

Thirdly, the Ministry of Health in Saudi Arabia could communicate with people through social media platforms such as Twitter in order to promote health awareness for the community. Nevertheless, this communication is limited and intermittent, so more actions should be taken to target parents by Saudi government agencies through various media channels such as digital nutrition websites, apps, and different social media platforms to support and influence children' food consumption. Such education campaigns should be implemented in the long term and not be ad hoc and sporadic.

These potential strategies could help Saudi government agencies take the lead in implementing healthy food education interventions. In turn, these strategies might influence parents to enhance, improve, and socialise healthy food consumption for their children.

6.2.2.2 Marketing Campaigns

Food stores are places of parent-child interaction. Parents see themselves as the key consumer skills' teachers for their children in this environment. Through parent-child interaction, children develop different skills and acquire knowledge, which assists their general active agency (Keller and Ruus, 2014). The results of my study indicate that food stores are natural places for sons to be socialised about (un)healthy food. The fathers were found to be using different strategies to encourage their sons to acquire (un)healthy food consumption skills and knowledge as consumers in the food store environment. Hence, food stores could create the environment, which to help children develop their skills and knowledge about healthy food choices by offering educational labelling of food and drink to make it easier for fathers to socialise their children into choosing healthy options (Elliott, 2008). For example, food stores could implement warning labels on unhealthy food in order to infuse more emotion into health messaging

for consumers. Additionally, health tick logos could be implemented to increase awareness of healthy food and drinks.

6.2.2.3   *Policy Implications*

The Saudi Arabian government implemented a 50% excise tax for sugar-sweetened beverages and a 100% excise tax on energy drinks, followed by an additional 15% VAT on all consumption goods, including beverages (Alsukait *et al.*, 2020, 2019; Backholer, Blake and Vandevijvere, 2017). As a result, soda and energy drink purchases decreased by 41% and 58% respectively in 2018 compared to 2016 (Alsukait *et al.*, 2020).

One of the issues emerging from my study's findings is that the cost of healthy food was a significant factor influencing fathers in their socialisation of food behaviour. Healthy food tends to be costly, and the fathers in my study have a limited household budget. Additional consumption taxes would add a financial burden to fathers, driving them to seek cheap food such as preserved food in tins, which are less healthy than fresh food. In this case, Saudi government agencies could support food companies in the form of tax incentives to produce low-cost food item lines featuring high quantities of healthy food such as fruit and vegetables. By offering such an incentive for food companies to offer new healthy food lines, it can be assumed that food companies would provide healthy food at reasonable prices. In turn, consumers would be more likely to choose and promote them for their children.

The majority of fathers in my study said they were influenced by price promotions when they socialise and select food for their children. Such sales promotions can lead to a considerable rise in consumption (McDonald and Milne, 2018; Taillie *et al.*, 2017). As yet, no laws and regulations restrict unhealthy food sales promotions in general and price promotions in particular in Saudi Arabia. Hence policies must be implemented to prohibit food stores from providing sales promotions

such as price promotions or other volume price promotions ("buy-one-get-one-free", "3 for 2", etc.) on high in fat, salt or sugar products. Instead, Saudi government agencies could encourage food stores to launch price promotions for healthy food rather than unhealthy foodstuffs. In this case, the government could create initiatives for food stores that promote healthy food such as price promotions. My study proposes that any food stores that enters this program must be committed to promoting healthy food, for which they receive certain incentives. Examples of incentives might be receiving new equipment such as food refrigerators and new shelving. Food stores could also obtain technical support from a consulting architect, help with marketing, store branding and other ideas. Such policy initiatives could encourage food stores to promote healthy food and in turn the consumers might be induced into selecting healthier food choices.

Some fathers in my study were also influenced by social media advertising such as Snapchat food advertising when they select food for their children. The only law in Saudi Arabia is to ban the advertising of energy beverages on TV (Al-Jawaldeh *et al.*, 2020). There are no comprehensive polices restricting advertising of unhealthy food and drinks in Saudi Arabia. Due to the development of new media such as branded websites, social media, mobile applications, mobile phones, banner advertisements, iPods, podcasts, and digital games, new opportunities for food and drinks companies to create extra touch points to reach parents, children, and teenagers have been created (Boelsen-Robinson, Backholer and Peeters, 2016). But there are no policies to control such new media food advertising. Therefore, it is a matter of urgency that polices are implemented to restrict unhealthy food advertising through TV and new media. These polices could conceivably lead to a reduction in the promotion of unhealthy food and in turn, consumers might decrease their consumption of unhealthy food. Limitations of my research are now considered.

6.3   Limitations of the Research

A number of important limitations of my research need to be considered. My research relies on fathers being forthcoming and truthful in their answers to the questions in the interview. However, the interviews might have inclined some fathers to provide what they deemed to be socially desirable responses, specifically when they were questioned about their family food consumption practices. Social desirability might have biased some fathers' responses to the interview questions as they may have sought to exhibit good fatherhood habits (Harman and Cappellini, 2015; Schiffrin *et al.*, 2014) with respect to food practices. Nevertheless, the interviews might have inclined some fathers to provide what they deemed to be socially desirable responses, specifically when they were asked about their family food consumption practices. According to Bergen and Labonté (2020), despite social desirability bias in qualitative research being possibly intractable, it can still be reduced. Accordingly, the three data collection tools used in my research (food choice diaries, in-depth interviews, and accompanied shopping trips) mitigate as much as possible such social desirability bias and capture as accurately as possible fathers' food socialisation behaviours, even if there are documented constraints with these data collection tools (Kharuhayothin and Kerrane, 2018).

Chenail (2011) argues that researcher bias is unavoidable in any interpretative research. Before getting into the data collection, I was confident of remaining impartial, especially during the interviews and on the accompanied shopping trips. However, my previous experience as an obese man to reaching what is generally considered the ideal weight, and one of the notions I developed myself was an in-depth understanding of (un)healthy food. Also, what I gained in my personal journey in writing the literature review for my study was to emphasise more the issues surrounding (un)healthy food consumption. Frequently, during the interviews and on the accompanied shopping trips,

my knowledge of (un)healthy food consumption led to a natural inclination to experience empathy and hence an awareness of being persuaded of the father's viewpoint.

Like my study's participants (fathers), I am a father. Some fathers emphasised their concern at being evaluated by a Saudi who was studying overseas if they did not make certain food choices for/with their children, possibly making them feel under some kind of pressure (Campbell, 2000). The only reason that the fathers considered me an exception to other fathers was that I was studying abroad and that I have more knowledge about this subject than they do. Therefore, they might have felt pressured by my presence. As noted in Section 3.3.1.3, building a relationship with the fathers before conducting the interviews might have eased any pressures that they subsequently felt under (Kvale, 2006). The next section addresses future research directions.

6.4   *Avenues for Further Research*

Despite my research generating interesting results in terms of children's food socialisation, additional research is needed to enhance our understanding of the role fathers play in food socialisation. First, as noted in Section 3.9, my research focuses on fathers, due to Saudi culture making conducting research with females nigh on impossible. However, to encompass a broader range of views about food consumption, a team of mixed gender researchers could be used. By doing so, this could inspire Saudi men to accept conducting such conversations face-to-face or via telephone with their wives. Future study is required to compare how fathers and mothers in Saudi Arabia socialise (un)healthy food practices when implementing each food practice. Indeed, further work is needed to fully understand the family's (un)healthy food socialisation in Saudi Arabia by recruiting multiple voices within the family unit, including fathers,

mothers, children, grandparents, and cousins as these family units play a major role in food socialisation (Moore, Wilkie and Desrochers, 2017).

Second, it would be worthwhile to extend the study to other areas such as urban areas, which might generate different data given that cultural norms in Saudi society vary greatly from region to region (and between rural and urban areas). Additionally, my study focused on the Eastern Province of Saudi Arabia, a population that comprises the bulk of the country's Shia population. Given that there may be differences between the Sunni and Shia populations in terms of food socialisation, it would be fruitful to broaden the study context into a cross-sect project by comparing similarities and differences with respect to food socialisation practices.

Third, as noted in Section 6.3, while using the three data collection tools (food choice diaries, in-depth interviews, and accompanied shopping trips), these data may not have captured the fathers' actual (un)healthy food socialisation/practice behaviours in their entirety (Kharuhayothin and Kerrane, 2018; Henwood, Shirani and Coltart, 2010). Hence, more research is required using different data collection tools, for example, ethnographic data collection tools, in order to capture a more complete picture of fathers' food socialisation practices. Moreover, future longitudinal research is needed to investigate whether fathers' (un)healthy food socialisation leads to childhood obesity in the longer term.

Finally, the accompanied shopping trips were done without the presence of the fathers' children. It would be beneficial to deepen understanding of how fathers interact and socialise about food in food stores in the presence of their sons. Also, further research should be undertaken to investigate whether the Coronavirus (COVID-19) pandemic has changed parents' food shopping behaviour and/or consumption and socialisation of (un)healthy food for their children (Philippe *et al.*, 2021; Eger *et al.*,

2021). The next section considers my reflections on my doctoral journey.

6.5   *Final Reflections Regarding the Doctoral Programme Experience*

The following reflections on the doctoral programme experience fall into five categories: choosing a topic, reading and evaluating a vast amount of literature, collecting and analysing the data, time-management, and personal reflections. At the beginning of my journey, I had an offer at Oxford Brookes University to study a PhD with a proposal submitted about 'product placement in digital games'. However, I decided to change the topic seven months after commencing that study and did so for two reasons. First, I do not like playing digital games myself. Second, I did not see this topic as related to my academic and intellectual interests. This led me into an intellectual cul-de-sac replete with worries. However, I was fortunate to have a supervisory team that was kind enough to ease the difficulties along the journey of changing the subject matter of the PhD (and beyond). I noticed that it is crucial to have supervisors who are ready to assist at all points along the journey. When my supervisory team asked what topic I preferred, I immediately responded with "something about 'childhood obesity'. Then, I and my supervisory team came up with this topic to focus on consumer socialisation agents and childhood obesity. As highlighted in Chapter 1, I was raised in a family where obesity was an issue, and, more generally, obesity is a major problem in Saudi society. This topic hence touched raw emotions for me and, moreover, is important for my country. As someone afflicted with obesity and able to witness how it has adversely affected members of my family, I was determined to see out the arduous journey that every PhD undoubtedly is. When I looked at the Saudi literature on obesity, most of it seemed to revolve around the relationship between obesity and diseases. I believe that before conducting this type of research, it is important to consider what causes obesity and how it occurs in order for it

to be treated. Therefore, I decided to explore one of the causes of obesity - food (Moore, Wilkie and Desrochers, 2017) from the perspective of the family. This aim was not easily attainable due to the difficulty of delving into the depths of what is occurring in the Saudi house in terms of how and why food is chosen by parents and consumed by children, and how food practices are socialised, specifically from the father's perspective. My goal was to understand this phenomenon more deeply. Conducting such research in Saudi society is fraught with difficulties. Every time I read my participants' (fathers) words, I had different feelings. Sometimes, I felt sad when I read fathers' words and the extent of the suffering of the house due to poor choices in terms of nutrition. Alternatively, I occasionally experienced a sense of joy when I read that the household consumed primarily healthy food. I felt it was my moral duty to show decision-makers in Saudi Arabia how if fathers could socialise children at such young and decisive ages into better eating habits would spare both parents and the government the multifarious consequences of obesity resulting from poor food selections.

As mentioned in Chapter one, the literature of my research topic cuts across a variety of disciplines such as nutrition, public health, and others. Because my research topic is part of a growing body of research on consumer behaviour, limited literature was found on this field. This means that much research remains to be done if we are to more deeply and comprehensively understand food consumer socialisation and childhood obesity (Moore, Wilkie and Desrochers, 2017). At this early stage of reading the literature, an excel sheet was created to document: (1) who wrote the paper; (2) the publication date; (3) where the research was conducted; (4) what methods the researchers used, and (5) the results of the research. This process helped me to organise and understand the literature on consumer socialisation and childhood obesity, as well as improving the secondary research skills I had already built up on my master's degree

in Australia. After immersion in the literature review, I needed to read the secondary sources in a more critical and analytical way. Trying to read more critically posed a challenge for me. Perhaps due to the education system I was raised in, I found myself agreeing with any academic viewpoint and was unable to mount a reasoned critique of it. A major learning experience on this doctoral research journey has been how to assess and evaluate existing research.

In terms of fieldwork, I anticipated challenges recruiting participants and also higher drop-out rates, and hence I was keen to use all the ideal methods of recruiting study participants. Thus, I applied three data collection tools, namely, food choice diaries, in-depth interviews, and accompanied shopping trips. I recruited 32 fathers who individually completed a food choice diary, an in-depth interview, and an accompanied shopping trip, respectively. This recruitment success was likely due to the number of channels I applied to recruit the fathers. I approached participants during entertainment events. In addition, I contacted a number of local food stores and asked the owners/managers of these stores to display a study recruitment advertisement. Furthermore, snowball sampling was deployed to ask the fathers who had agree to take part in the study to recommend other fathers from their social networks who they felt might fit the study's criteria and would be willing to participate. Recruiting participants was an enlightening experience through which I gained more skills I gained, for example negotiation process with managers/owners of food stores where I wished to display the study recruitment advertisement.

Analysing the qualitative data was another challenge. First, because I had three kind of data collection tools (food choice diaries, in-depth interviews, and accompanied shopping trips) and gathered an extreme amount of data, I spent too much time analysing the data. Second, how to organise the data in one data set was not

straightforward. Third, identifying a computer programme to help me organise such a large amount of data, all in Arabic Language. Indeed, I found myself learning a whole new programme - (MAXQDA). Taking courses on how to use it consumed rather a lot of time. Although I passed this stage smoothly, patience was a virtue here as I felt it was somehow taking me away from my research matter. Yet reflecting on this, despite these challenges, analysing my data contributed significantly to enhancing my research skills and capabilities and will doubtlessly assist in my future professional career.

Concern about time-management is another reflection. Initially, I had difficulty regarding this, and I procrastinated quite a lot at the beginning of my research journey. I did not realise how getting to grips with some studies would consume time, for example analysing qualitative data comprehensively. I learned that breaking any task into its constituent parts increases productivity. By doing so, I saw each task as a 'small job' instead of a massive and daunting undertaking, which led me to see incremental steps or progress. Hence, my research journey was incredibly helpful for sharpening my time management skills at the personal level and the professional level. I am now keen on time management in all aspects of my life.

Finally, the results of my study confirm that fathers play a major role in their children's food socialisation. Therefore, one of my concerns in the future, when I return home, is to focus on educating Saudi families (*all* the family members) to raise awareness of the importance of consuming healthy food and rejecting unhealthy food. There is an organisation in Saudi Arabia called the Food and Drug Authority. One of my agendas, interests, and plans is to contact this Authority and through them conduct research related to healthy food consumption of Saudi families. In addition, during this journey, I have applied what I have learned in the field of healthy food consumption with my young daughter. There are always discussions, especially during mealtime and

when she shops with me in food stores such as Tesco, Asda, and Lidl, when my daughter learns the main five groups of food, namely fruit and vegetables, starchy foods, dairy, and protein. She even enjoys reading the labels when she goes to the food store with me. One time, on one of the few occasions I bought juice, she brought the juice to the food table and read the ingredients. She told me that the juice had absolutely no fat in it. I replied that this was true and added that is contains a large amount of sugar, to which she responded, "Oh, Daddy, you are too healthy." With this example, I am confident that educating parents about healthy food will inevitably affect their children's subsequent food consumption in the future. This is what I learned through my studies and in conjunction with interaction with my young daughter.

References

Abosag, I. and Farah, M.F. (2014) The influence of religiously motivated consumer boycotts on brand image, loyalty and product judgment. *European Journal of Marketing*. 48 (11–12), pp. 2262–2283.

Abrams, K.M., Evans, C. and Duff, B.R.L. (2015) Ignorance is bliss. How parents of preschool children make sense of front-of-package visuals and claims on food. *Appetite*. 87 pp. 20–29.

Adamo, K.B. and Brett, K.E. (2014) Parental perceptions and childhood dietary quality. *Maternal and Child Health Journal*. 18 (4), pp. 978–995.

Agarwala, R., Mishra, P. and Singh, R. (2019) Religiosity and consumer behavior: A summarizing review. *Journal of Management, Spirituality and Religion*. 16 (1), pp. 32–54.

Ahmed, Z., Anang, R., Othman, N. and Sambasivan, M. (2013) To purchase or not to purchase US products: Role of religiosity, animosity, and ethno-centrism among Malaysian consumers. *Journal of Services Marketing*. 27 (7), pp. 551–563.

Akers, R. (2017) *Social Learning and Social Structure: A General Theory of Crime and Deviance*. 1st edition. New York: Routledge.

Al-Amer, R., Ramjan, L., Glew, P., Darwish, M. and Salamonson, Y. (2016) Language translation challenges with Arabic speakers participating in qualitative research studies. *International Journal of Nursing Studies*. 54 pp. 150–157.

Al-Dhaifallah, A., Mwanri, L. and Al-joudi, A. (2015) Childhood obesity in Saudi Arabia: Opportunities and challenges. *Saudi Journal of Obesity*. 3 (1), pp. 2–7.

Al-Hazzaa, H.M., Abahussain, N.A., Al-sobayel, H.I., Qahwaji, D.M. and Musaiger, A.O. (2012) Lifestyle factors associated with overweight and obesity among Saudi adolescents. *BMC public health*. 16 (12), pp. 1–11.

Al-Hyari, K., Alnsour, M., Al-Weshah, G. and Haffar, M. (2012) Religious beliefs and consumer behaviour: From loyalty to boycotts. *Journal of Islamic Marketing*. 3 (2), pp. 155–174.

Al-Jawaldeh, A., Hammerich, A., Doggui, R., Engesveen, K., Lang, K. and McColl, K. (2020) Implementation of who recommended policies and interventions on healthy diet in the countries of the eastern mediterranean region: From policy to action. *Nutrients*. 12 (12), pp. 1–19.

Al-Kibsi, G., Woetzel, J., Isherwood, T., Khan, J., Mischke, J. and Noura, H. (2015) Saudi Arabia beyond oil: The investment and productivity transformation *McKinsey Global Institute*.

Al-Kutbe, R., Payne, A., de Looy, A. and Rees, G.A. (2017) A comparison of nutritional intake and daily physical activity of girls aged 8-11 years old in Makkah, Saudi Arabia according to weight status. *BMC Public Health*. 17 (1), pp. 592.

Al-Mohaimeed, A.A. (2016) Parent's perception of children's obesity, in Al-Qassim, Saudi Arabia. *Journal of Family and Community Medicine*. 23 (3), pp. 179–183.

Al-Otaibi, N.M. and Yasmeen, K. (2014) Saudi consumer's shopping behaviour: Descriptive Analysis. *Journal of Sociological Research*. 5 (2), pp. 75–95.

Al-Raddadi, R., Bahijri, S.M., Jambi, H.A., Ferns, G. and Tuomilehto, J. (2019) The prevalence of obesity and overweight, associated demographic and lifestyle factors, and health status in the adult population of Jeddah, Saudi Arabia. *Therapeutic Advances in Chronic Disease*. 10 pp. 1–10.

Al-Rethaiaa, A.S., Fahmy, A.-E.A. and Al-Shwaiyat, N.M. (2010) Obesity and eating

habits among college students in Saudi Arabia: a cross sectional study. *Nutrition Journal*. 9 (1), pp. 39.

Al-Shawi, A. (1985) The dietary patterns and food habits of Kuwaiti housewives of 3 educational levels. *Education Journal of Kuwait University*. 2 (5), pp. 9–13.

Al-Shehri, J. (2014) Childhood obesity prevalence among primary schoolboys at Al-Iskan sector, Holy Makkah, Saudi Arabia. *International Journal of Medical Science and Public Health*. 3 (2), pp. 150–155.

Al-Zu'bi, A., Crowther, G. and Worsdale, G. (2008) Jordanian children's perception of fathers' communication structures and patterns: scales revision and validation. *Young Consumers*. 9 (4), pp. 265–281.

Al-Hussaini, A., Bashir, M.S., Khormi, M., AlTuraiki, M., Alkhamis, W., Alrajhi, M. and Halal, T. (2019) Overweight and obesity among Saudi children and adolescents: Where do we stand today? *The Saudi Journal of Gastroenterology*. 25 (4), pp. 229–235.

Alabdulkareem, R. (2019) *Qualitative Research in Education*. 2nd edition. Dammam: Al Rushd Bookstore.

Alaszewski, A. (2006) *Using Diaries for Social Research*. London: Sage.

AlFaris, N.A., Al-Tamimi, J.Z., Al-Jobair, M.O. and Al-Shwaiyat, N.M. (2015) Trends of fast food consumption among adolescent and young adult Saudi girls living in Riyadh. *Food and Nutrition Research*. 59 (1), pp. 1–10.

Al Alhareth, Y., Al Alhareth, Y. and Al Dighrir, I. (2015) Review of women and society in Saudi Arabia. *American Journal of Educational Research*. 3 (2), pp. 121–125.

Alharthi, B. (2017) *Informing Health-Related Behaviour Change in Saudi Arabia : A Social Marketing Approach*. (no place) Newcastle University.

Aljassim, H. and Jradi, H. (2021) Childhood overweight and obesity among the Saudi population: a case-control study among school children. *Journal of Health, Population and Nutrition*. 40 (1), pp. 1–9.

Allirot, X., Maiz, E. and Urdaneta, E. (2018) Shopping for food with children: A strategy for directing their choices toward novel foods containing vegetables. *Appetite*. 120 pp. 287–296.

Alm, S., Olsen, S.O. and Honkanen, P. (2015) The role of family communication and parents' feeding practices in children's food preferences. *Appetite*. 89 pp. 112–121.

Almuhanna, M.A., Alsaif, M., Alsaadi, M. and Almajwal, A. (2014) Fast food intake and prevalence of obesity in school children in Riyadh City. *Sudanese journal of paediatrics*. 14 (1), pp. 71–80.

Almutairi, K.M., Alonazi, W.B., Vinluan, J.M., Almigbal, T.H., Batais, M.A., Alodhayani, A.A., Alsadhan, N., Tumala, R.B., Moussa, M., Aboshaiqah, A.E. and Alhoqail, R.I. (2018) Health promoting lifestyle of university students in Saudi Arabia: A cross-sectional assessment. *BMC Public Health*. 18 (1), pp. 1–10.

Alqarni, S.S.M. (2016) A review of prevalence of obesity in Saudi Arabia. *Journal of Obesity & Eating Disorders*. 02 (02), pp. 1–6.

Alsukait, R., Bleich, S., Wilde, P., Singh, G. and Folta, S. (2020) Sugary drink excise tax policy process and implementation: Case study from Saudi Arabia. *Food Policy*. 90 pp. 101789.

Alsukait, R., Wilde, P., Bleich, S., Singh, G. and Folta, S. (2019) Impact of Saudi Arabia's Sugary drink tax on prices and purchases. *Current Developments in Nutrition*. 3 pp. 829.

Alturki, H.A., Brookes, D.S. and Davies, P.S. (2018a) Comparative evidence of the

consumption from fast-food restaurants between normal-weight and obese Saudi school children. *Mineralogical Magazine*. 21 (12), pp. 2280–2290.

Alturki, H.A., Brookes, D.S. and Davies, P.S. (2018b) Obesity prevention interventions in Saudi Arabian childrenbuilding the evidence base: An in-depth analysis of sociodemographic characteristics and dietary habits of obese and normal weight schoolchildren. *Global Epidemic Obesity*. 6 (1), pp. 1–11.

Aluvala, R. and Varkala, M. (2020) A study on impact of pester power on purchase behaviour of select FMCG products in Hyderabad. *International Journal of Management*. 11 (9), .

Annunziata, A., Vecchio, R. and Kraus, A. (2016) Factors affecting parents' choices of functional foods targeted for children. *International Journal of Consumer Studies*. 40 (5), pp. 527–535.

Arksey, H. and Knight, P.T. (1999a) *Interviewing for Social Scientists: An Introductory Resource with Examples*. London: Sage Publications.

Arksey, H. and Knight, P.T. (1999b) *Interviewing for Social Scientists*. London: Sage Publications.

Ashraf, M.A. (2019) Islamic marketing and consumer behavior toward halal food purchase in Bangladesh: An analysis using SEM. *Journal of Islamic Marketing*. 10 (3), pp. 893–910.

Askelson, N.M., Golembiewski, E.H., Meier, C.L., Smith, R., Montgomery, D., Lillehoj, C.J. and Wilson, S. (2019) Pester power: Understanding parent–child communication about fruits and vegetables in low-income families from the child's perspective. *Social Marketing Quarterly*. 25 (3), pp. 182–192.

Asnawi, N., Sukoco, B.M. and Fanani, M.A. (2018) Halal products consumption in international chain restaurants among global Moslem consumers. *International Journal of Emerging Markets*. 13 (5), pp. 1273–1290.

At-Twaijri, M.I. and Al-Muhaiza, I.A. (1996) Hofstede's cultural dimensions in the GCC countries: An empirical investigation. *International Journal of Value-Based Management*. 9 (2), pp. 121–131.

Atkin, C.K. (1978) Observation of parent-child interaction in supermarket decision-making. *The Journal of Marketing*. 42 (4), pp. 41–45.

Atkinson, L., Nelson, M.R. and Rademacher, M.A. (2015) A Humanistic approach to understanding child consumer socialization in US homes. *Journal of Children and Media*. 9 (1), pp. 95–112.

Auf, M.A.A., Salleh, S.B.M. and Yusoff, R.Z. (2016) The relationship between word of mouth and consumer buying behavior mediating by religious orientation in Riyadh, Saudi Arabia. *International Review of Management and Marketing*. 6 (4), pp. 1034–1038.

Ayadi, K. and Bree, J. (2010) An ethnography of the transfer of food learning within the family. *Young Consumers*. 11 (1), pp. 67–76.

Ayadi, K. and Muratore, I. (2020) Digimums' online grocery shopping: The end of children's influence? *International Journal of Retail and Distribution Management*. 48 (4), pp. 348–362.

Azzeh, F.S., Alshammari, E.M., Alazzeh, A.Y., Jazar, A.S., Dabbour, I.R., El-Taani, H.A., Obeidat, A.A., Kattan, F.A. and Tashtoush, S.H. (2017) Healthy dietary patterns decrease the risk of colorectal cancer in the Mecca Region, Saudi Arabia: a case-control study. *BMC Public Health*. 17 (1), pp. 607.

Backholer, K., Blake, M. and Vandevijvere, S. (2017) Sugar-sweetened beverage taxation: An update on the year that was 2017. *Public Health Nutrition*. 20 (18), pp. 3219–3224.

Baez, B. (2002) Confidentiality in qualitative research: Reflections on secrets, power and agency. *Qualitative Research*. 2 (1), pp. 35–58.

Bahaee, M. and Pisani, M.J. (2009) Iranian consumer animosity and U.S. products: A witch's brew or elixir? *International Business Review*. 18 (2), pp. 199–210.

Bakhotmah, B.A. (2012) Nutritional knowledge and desire to change of food preferences among Saudi women in Jeddah, Saudi Arabia. *Ecology of Food and Nutrition*. 51 (4), pp. 313–328.

Bakir, A., Rose, G.M. and Shoham, A. (2006) Family communication patterns: Mothers' and fathers' communication style and children's perceived influence in family decision making. *Journal of International Consumer Marketing*. 19 (2), pp. 75–95.

Baldassarre, F., Campo, R. and Falcone, A. (2016) Food for kids: How children influence their parents purchasing decisions. *Journal of Food Products Marketing*. 22 (5), pp. 596–609.

Bandura, A. (2004) Health promotion by social cognitive means. *Health Education and Behavior*. 31 (2), pp. 143–164.

Bandura, A. (1977a) Self-efficacy: Toward a unifying theory of behavioral change. *The self in social psychology*. 84 (2), pp. 191–215.

Bandura, A. (1986) *Social Foundations of thought and Action*. New Jersey: Prentice-Hall.

Bandura, A. (1977b) *Social Learning Theory*. New Jersey: Prentice Hall.

Bao, Y., Fern, E.F. and Sheng, S. (2007) Parental style and adolescent influence in family consumption decisions: An integrative approach. *Journal of Business Research*. 60 (7), pp. 672–680.

Barrouillet, P. (2015) Theories of cognitive development: From Piaget to today. *Developmental Review*. 38 pp. 1–12.

Bartlett, R. and Milligan, C. (2015) *What is Diary Method?* London: Bloomsbury Publishing.

Basch, C.H., Ethan, D. and Rajan, S. (2013) Price, promotion, and availability of nutrition Information: A descriptive study of a popular fast food chain in New York City. *Global Journal of Health Science*. 5 (6), pp. 73–80.

Bashir, K.M.I., Kim, J.S., Mohibbullah, M., Sohn, J.H. and Choi, J.S. (2019) Strategies for improving the competitiveness of Korean seafood companies in the overseas halal food market. *Journal of Islamic Marketing*. 10 (2), pp. 606–632.

Basu, R. and Sondhi, N. (2014) Child socialization practices: Implications for retailers in emerging markets. *Journal of Retailing and Consumer Services*. 21 (5), pp. 797–803.

Batsell Jr, W.R., Brown, A.S., Ansfield, M.E. and Paschall, G.Y. (2002) 'You will eat all of that!': A retrospective analysis of forced consumption episodes. *Appetite*. 38 (3), pp. 211–219.

Baumrind, D. (1980) New directions in socialization research. *American Psychologist*. 35 (7), pp. 639–652.

Baumrind, D. (1991) The influence of parenting style on adolescent competence and substance use. *The Journal of Early Adolescence*. 11 (1), pp. 56–95.

Bava, C.M., Jaeger, S.R. and Park, J. (2008) Constraints upon food provisioning practices in 'busy' women's lives: Trade-offs which demand convenience. *Appetite*. 50 (2–3), pp. 486–498.

Beck, A.L., Iturralde, E.M., Haya-Fisher, J., Kim, S., Keeton, V. and Fernandez, A. (2019) Barriers and facilitators to healthy eating among low-income Latino adolescents. *Appetite*. 138 pp. 215–222.

Beck, A.L., Takayama, J.I., Halpern-Felsher, B., Badiner, N. and Barker, J. (2014) Understanding how latino parents choose beverages to serve to infants and toddlers. *Maternal and Child Health Journal*. 18 (6), pp. 1308–1315.

Bel, S., De Ridder, K.A.A., Lebacq, T., Ost, C., Teppers, E., Cuypers, K. and Tafforeau, J. (2019) Habitual food consumption of the Belgian population in 2014-2015 and adherence to food-based dietary guidelines. *Archives of Public Health*. 77 (1), pp. 1–15.

Belch, G.E., Belch, M.A. and Ceresino, G. (1985) Parental and teenage child influences in family decision making. *Journal of Business Research*. 13 (2), pp. 163–176.

Belk, R., Fischer, E. and Kozinets, R. V (2013) *Qualitative Consumer and Marketing Research*. London: Sage Publications.

Belk, R., Mayer, R., Driscoll, A. and Driscoll, A.M.Y. (1984) Children's symbolism recognition of in consumption products children's. *Journal of Consumer Research*. 10 (4), pp. 386–397.

Bell, L.K., Perry, R.A. and Prichard, I. (2018) Exploring grandparents' roles in young children's lifestyle behaviors and the prevention of childhood obesity: An Australian perspective. *Journal of Nutrition Education and Behavior*. 50 (5), pp. 516–521.

Ben-Ari, A. and Enosh, G. (2013) Power relations and reciprocity: Dialectics of knowledge construction. *Qualitative Health Research*. 23 (3), pp. 422–429.

Bennett, R., Zorbas, C., Huse, O., Peeters, A., Cameron, A.J., Sacks, G. and Backholer, K. (2020) Prevalence of healthy and unhealthy food and beverage price promotions and their potential influence on shopper purchasing behaviour: A systematic review of the literature. *Obesity Reviews*. 21 (1), pp. 1–21.

El Benni, N., Stolz, H., Home, R., Kendall, H., Kuznesof, S., Clark, B., Dean, M., Brereton, P., Frewer, L.J., Chan, M.Y., Zhong, Q. and Stolze, M. (2019) Product attributes and consumer attitudes affecting the preferences for infant milk formula in China–A latent class approach. *Food Quality and Preference*. 71 pp. 25–33.

Benton, D. (2004) Role of parents in the determination of the food preferences of children and the development of obesity. *International Journal of Obesity*. 28 (7), pp. 858–869.

Bere, E. and Klepp, K. (2005) Changes in accessibility and preferences predict children's future fruit and vegetable intake. *International Journal of Behavioral Nutrition and Physical Activity*. 2 (1), pp. 1–8.

Bergen, N. and Labonté, R. (2020) "Everything is perfect, and we have no problems": Detecting and limiting social desirability bias in qualitative research. *Qualitative Health Research*. 30 (5), pp. 783–792.

Bettany, S.M. and Kerrane, B. (2018) Figuring the pecking order: Emerging child food preferences when species meet in the family environment. *European Journal of Marketing*. 52 (12), pp. 2334–2355.

Biedenbach, T. and Müller, R. (2011) Paradigms in project management research: Examples from 15 years of IRNOP conferences. *International Journal of Managing Projects in Business*. 4 (1), pp. 82–104.

Birch, L. and Fisher, J. (1998) Development of eating behaviors among children and adolescents. *Pediatrics*. 101 pp. 539–549.

Birch, L.L. (1998) Development of food acceptance patterns in the first years of life. *Proceedings of the Nutrition Society*. 57 (4), pp. 617–624.

Birch, L.L. and Doub, A.E. (2014) Learning to eat: Birth to age 2 y. *American Journal of Clinical Nutrition*. 99 (3), pp. 723–728.

Birch, L.L. and Fisher, J.A. (1995) Appetite and eating behavior in children. *Pediatric*

Clinics of North America. 42 (4), pp. 931–953.

Birch, L.L., Fisher, J.O., Grimm-Thomas, K., Markey, C.N., Sawyer, R. and Johnson, S.L. (2001) Confirmatory factor analysis of the Child Feeding Questionnaire: A measure of parental attitudes, beliefs and practices about child feeding and obesity proneness. *Appetite*. 36 (3), pp. 201–210.

Birch, L.L., McPhee, L.S., Bryant, J.L. and Johnson, S.L. (1993) Children's lunch intake: Effects of midmorning snacks varying in energy density and fat content. *Appetite*. 20 (2), pp. 83–94.

Bisogni, C.A., Falk, L.W., Madore, E., Blake, C.E., Jastran, M., Sobal, J. and Devine, C.M. (2007) Dimensions of everyday eating and drinking episodes. *Appetite*. 48 (2), pp. 218–231.

Bisogni, C.A., Jastran, M., Seligson, M. and Thompson, A. (2012) How People Interpret Healthy Eating: Contributions of Qualitative Research. *Journal of Nutrition Education and Behavior*. 44 (4), pp. 282–301.

Bisogni, C.A., Jastran, M., Shen, L. and Devine, C.M. (2005) A biographical study of food choice capacity: Standards, circumstances, and food management skills. *Journal of Nutrition Education and Behavior*. 37 (6), pp. 284–291.

Blaydes, L. and Linzer, D.A. (2012) Elite competition, religiosity, and anti-americanism in the Islamic world. *American Political Science Review*. 106 (2), pp. 225–243.

Blissett, J. (2011) Relationships between parenting style, feeding style and feeding practices and fruit and vegetable consumption in early childhood. *Appetite*. 57 (3), pp. 826–831.

Blissett, J., Bennett, C., Fogel, A., Harris, G. and Higgs, S. (2016) Parental modelling and prompting effects on acceptance of a novel fruit in 2-4-year-old children are dependent on children's food responsiveness. *British Journal of Nutrition*. 115 (3), pp. 554–564.

Blissett, J. and Haycraft, E. (2008) Are parenting style and controlling feeding practices related? *Appetite*. 50 (2–3), pp. 477–485.

Block, L.G., Grier, S.A., Childers, T.L., Davis, B., Ebert, J.E.., Kumanyika, S., Laczniak, R.N., Machin, J.E., Motley, C.M., Peracchio, L., Pettigrew, S., Scott, M. and Bieshaar, M.N.G. van G. (2011) From nutrients to nurturance: A conceptual introduction to food well-being. *Journal of Public Policy & Marketing*. 30 (1), pp. 5–13.

Boak, R., Virgo-Milton, M., Hoare, A., de Silva, A., Gibbs, L., Gold, L., Gussy, M., Calache, H., Smith, M. and Waters, E. (2016) Choosing foods for infants: A qualitative study of the factors that influence mothers. *Child: Care, Health and Development*. 42 (3), pp. 359–369.

Boddy, C.R. (2016) Sample size for qualitative research. *Qualitative Market Research: An International Journal*. 19 (4), pp. 426–432.

Boelsen-Robinson, T., Backholer, K. and Peeters, A. (2016) Digital marketing of unhealthy foods to Australian children and adolescents. *Health Promotion International*. 31 (3), pp. 523–533.

Boots, S.B., Tiggemann, M., Corsini, N. and Mattiske, J. (2015) Managing young children's snack food intake. The role of parenting style and feeding strategies. *Appetite*. 92 pp. 94–101.

Le Borgne, G., Sirieix, L. and Costa, S. (2018) Perceived probability of food waste: Influence on consumer attitudes towards and choice of sales promotions. *Journal of Retailing and Consumer Services*. 42 (March 2017), pp. 11–21.

Bouhlal, S., McBride, C.M., Ward, D.S. and Persky, S. (2015) Drivers of overweight

mothers' food choice behaviors depend on child gender. *Appetite*. 84 pp. 154–160.

Bowen, R.L. and Devine, C.M. (2011) ' Watching a person who knows how to cook, you'll learn a lot'. Linked lives, cultural transmission, and the food choices of Puerto Rican girls. *Appetite*. 56 (2), pp. 290–298.

Braun, V. and Clarke, V. (2013) *Successful Qualitative Research: A Practical Guide for Beginners.* London: Sage Publications.

Braun, V. and Clarke, V. (2006) Using thematic analysis in psychology. *Qualitative Research in Psychology*. 3 (2), pp. 77–101.

Brown, K.A., Ogden, J., Vögele, C. and Gibson, E.L. (2008) The role of parental control practices in explaining children's diet and BMI. *Appetite*. 50 (2–3), pp. 252–259.

Brown, R. and Ogden, J. (2004) Children's eating attitudes and behaviour: A study of the modelling and control theories of parental influence. *Health Education Research*. 19 (3), pp. 261–271.

Brusdal, R. (2007) If it is good for the child's development then I say yes almost every time: How parents relate to their children's consumption. *International Journal of Consumer Studies*. 31 (4), pp. 391–396.

Bryman, A. (2016) *Social Research Methods.* 5th edition. Oxford: Oxford University Press.

Buchele, N. (2010) *Saudi Arabia - Culture Smart!: The Essential Guide to Customs & Culture*. 2nd edition. London: Bravo Ltd.

Bucher, T., Müller, B. and Siegrist, M. (2015) What is healthy food? Objective nutrient profile scores and subjective lay evaluations in comparison. *Appetite*. 95 pp. 408–414.

Buijzen, M. (2009) The effectiveness of parental communication in modifying the relation between food advertising and children's consumption behaviour. *The British journal of developmental psychology*. 27 (Pt 1), pp. 105–121.

Buijzen, M. and Valkenburg, P.M. (2008) Observing purchase-related parent–child communication in retail environments: A developmental and socialization perspective. *Human Communication Research*. 34 (1), pp. 50–69.

Buijzen, M. and Valkenburg, P.M. (2005) Parental mediation of undesired advertising effects parental mediation of undesired advertising effects. *Journal of Broadcasting & Electronic Media*. 49 (2), pp. 153–165.

Bukhari, S.F.H., Woodside, F.M., Hassan, R., Ali, O.M.S.H., Hussain, S. and Waqas, R. (2020) Intrinsic and extrinsic attributes that drive Muslim consumer purchase behavior: A study in the context of Western imported food. *Journal of Islamic Marketing*. 12 (1), pp. 70–94.

Bungay, V., Oliffe, J. and Atchison, C. (2016) Addressing underrepresentation in sex work research: Reflections on designing a purposeful sampling strategy. *Qualitative Health Research*. 26 (7), pp. 966–978.

Burrell, G. and Morgan, G. (2016) *Sociological Paradigms and Organizational Analysis: Elements of the Sociology of Corporate Life*. 2nd edition. New York, USA: Taylor & Francis Group.

Butter, E.J., Popovich, P.M., Stackhouse, R.H. and Garner, R.K. (1981) Discrimination of television programs and commercials by preschool children. *Journal of Advertising Research*. 21 (2), pp. 53–56.

Buus, N. and Perron, A. (2020) The quality of quality criteria: Replicating the development of the Consolidated Criteria for Reporting Qualitative Research (COREQ). *International Journal of Nursing Studies*. 102 pp. 1–8.

Calder, B.J., Robertson, T.S. and Rossiter, J.R. (1975) Children's consumer information

processing. *Communication Research*. 2 (3), pp. 307–316.

Calderon, J., Ayala, G.X., Elder, J.P., Belch, G.E., Castro, I.A., Weibel, N. and Pickrel, J. (2017) What happens when parents and children go grocery shopping? An observational study of Latino dyads in Southern California, USA. *Health education & behavior*. 44 (1), pp. 5–12.

Callender, C., Velazquez, D., Adera, M., Dave, J.M., Olvera, N., Chen, T.A., Alford, S. and Thompson, D. (2020) How minority parents could help children develop healthy eating behaviors: Parent and child perspectives. *Nutrients*. 12 (12), pp. 1–12.

Calloway, E.E., Roberts-Gray, C., Ranjit, N., Sweitzer, S.J., McInnis, K.A., Romo-Palafox, M.J. and Briley, M.E. (2014) Method of assessing parent-child grocery store purchasing interactions using a micro-camcorder. *Appetite*. 83 pp. 1–9.

Campbell, A. (2000) Cultural identity as a social construct. *Intercultural Education*. 11 (1), pp. 31–39.

Campbell, K.J., Abbott, G., Spence, A.C., Crawford, D.A., McNaughton, S.A. and Ball, K. (2013) Home food availability mediates associations between mothers' nutrition knowledge and child diet. *Appetite*. 71 pp. 1–6.

Campbell, K.J., Crawford, D.A., Salmon, J., Carver, A., Garnett, S.P. and Baur, L.A. (2007) Associations between the home food environment and obesity-promoting eating behaviors in adolescence. *Obesity*. 15 (3), pp. 719–730.

Cao, X. and Henderson, E.F. (2020) The interweaving of diaries and lives: diary-keeping behaviour in a diary-interview study of international students' employability management. *Qualitative Research*. pp. 1–17.

Carlson, L., Grossbart, S. and Walsh, A. (1990) Mothers' communication orientation and consumer-socialization tendencies. *Journal of Advertising*. 19 (3), pp. 27–38.

Carlson, L., Laczniak, R. and Walsh, A. (2001) Socializing children about television: an intergenerational study. *Journal of the Academy of Marketing*. 29 (3), pp. 276–288.

Carlson, L., Laczniak, R.N. and Wertley, C. (2011) Parental style the implications of what we know and think we know. *Journal of Advertising Research*. 51 (2), pp. 427–436.

Carlson, L., Walsh, A., Laczniak, R.N. and Grossbart, S. (1994) Family communication patterns and marketplace motivations, attitudes, and behaviors of children and mothers. *Journal of Consumer Affairs*. 28 (1), pp. 25–53.

Carlson, L.E.S. and Grossbart, S. (1988) Parental style and consumer socialization of children. *Journal of Consumer Research*. 12 (1), pp. 77–94.

Carruth, B.R. and Skinner, J.D. (2001) Consumer goals/skills that mothers want their children to learn. *International Journal of Consumer Studies*. 25 (4), pp. 290–298.

Caruana, A. and Vassallo, R. (2003) Children's perception of their influence over purchases: The role of parental communication patterns. *Journal of Consumer Marketing*. 20 (1), pp. 55–66.

Casini, L., Contini, C., Romano, C. and Scozzafava, G. (2015) Trends in food consumptions: What is happening to generation x? *British Food Journal*. 117 (2), pp. 705–718.

Castro, I.A., Calderon, J. and Ayala, G.X. (2017) Who is influencing whom? Latino parent–child request interactions and product purchases in food retail environments. *Social Marketing Quarterly*. 23 (2), pp. 155–168.

Chan, K. and McNeal, J.U. (2003) Parent-child communications about consumption and advertising in China. *Journal of Consumer Marketing*. 20 (4), pp. 317–334.

Chan, K. and McNeal, J.U. (2006) Rural Chinese children as consumers: consumption

experience and information sourcing. *Journal of Consumer Behaviour*. 5 (3), pp. 182–192.

Chan, R., Yeung, S., Leung, C., Lo, S.K. and Tsang, S. (2018) Family factors and fruit and vegetable consumption in Chinese preschool children living in Hong Kong. *Journal of Children's Services*. 13 (3–4), pp. 122–133.

Chaplin, L.N. and John, D.R. (2007) Growing up in a material world: Age differences in materialism in children and adolescents. *Journal of Consumer Research*. 34 (4), pp. 480–493.

Charmaz, K. (2006) *Constructing Grounded Theory. A Practical Guide through Qualitative Analysis*. London: Sage Publications.

Charmaz, K. (2014) *Constructing Grounded Theory*. 2nd edition. London: Sage Publications.

Chaudhary, M. (2018) Pint-size powerhouses: a qualitative study of children's role in family decision-making. *Young Consumers*. 19 (4), pp. 345–357.

Chaudhary, M., Durrah, O. and Ghouse, S.M. (2018) Young consumer's influence: a study of Gulf region. *Journal of Islamic Marketing*. 10 (2), pp. 495–510.

Chaudhary, M., Ghouse, S.M. and Durrah, O. (2018) Young Arab consumers: an analysis of family buying process in Oman. *Young Consumers*. 19 (1), pp. 1–18.

Chehabi, H.E. (2007) How caviar turned out to be Halal. *Gastronomica*. 7 (2), pp. 17–23.

Chen, Y., Lehto, X., Behnke, C., Tang, C. and Chen, Y. (2016) Investigating children's role in family dining-out choices: evidence from a casual dining restaurant. *Journal of Hospitality Marketing & Management*. 25 (6), pp. 706–725.

Chenail, R.J. (2011) Interviewing the investigator: Strategies for addressing instrumentation and researcher bias concerns in qualitative research. *Qualitative Report*. 16 (1), pp. 255–262.

Chikweche, T., Stanton, J. and Fletcher, R. (2012) Family purchase decision making at the bottom of the pyramid. *Journal of Consumer Marketing*. 29 (3), pp. 202–213.

Chiozza, G. (2009) A crisis like no other? Anti-Americanism at the time of the Iraq war. *European Journal of International Relations*. 15 (2), pp. 257–289.

Chowbey, P. (2017) What is food without love? The micro-politics of food practices among South Asians in Britain, India, and Pakistan. *Sociological Research Online*. 22 (3), pp. 165–185.

Clark, L., Birkhead, A.S., Fernandez, C. and Egger, M.J. (2017) A transcription and translation protocol for sensitive Cross-cultural team research. *Qualitative Health Research*. 27 (12), pp. 1751–1764.

Clifford, J. (1990) Notes on (field) notes. In: *Fieldnotes: The Makings of Anthropology*. Ithaca, NY: Cornell University Press. pp. 47–70.

De Coen, V., Vansteelandt, S., Maes, L., Huybrechts, I., De Bourdeaudhuij, I. and Vereecken, C. (2012) Parental socioeconomic status and soft drink consumption of the child. The mediating proportion of parenting practices. *Appetite*. 59 (1), pp. 76–80.

Collis, J. and Hussey, R. (2014) *Business Research: A Practical Guide for Undergraduate and Postgraduate Students*. 4th edition. Basingstoke: Palgrave Macmillan.

Collison, K.S., Zaidi, M.Z., Subhani, S.N., Al-Rubeaan, K., Shoukri, M. and Al-Mohanna, F.A. (2010) Sugar-sweetened carbonated beverage consumption correlates with BMI, waist circumference, and poor dietary choices in school children. *BMC Public Health*. 10 (1), pp. 1–13.

Commuri, S. and Gentry, J.W. (2000) Opportunities for family research in marketing.

Academy of Marketing Science Review. 1 pp. 1–34.

Contento, I.R. (2008) Nutrition education: Linking research, theory, and practice. *Asia Pacific Journal of Clinical Nutrition*. 17 (1), pp. 176–179.

Cook, M. (1986) Early Islamic dietary law. *Jerusalem Studies in Arabic and Islam*. 7 pp. 218–277.

Corbetta, P. (2003) *Social Research: Theory, Methods and Techniques*. London: Sage Publications.

Corbin, J. and Strauss, A. (2015) *Basics of Qualitative Research Techniques and Procedures for Developing Grounded Theory*. 4th edition. London, UK: Sage Publications.

Cortés, D.E., Millán-Ferro, A., Schneider, K., Vega, R.R. and Caballero, A.E. (2013) Food purchasing selection among low-income, Spanish-speaking latinos. *American Journal of Preventive Medicine*. 44 (3), pp. S267–S273.

Corti, L. (1993) *Using diaries in social research.* Available from: http://sru.soc.surrey.ac.uk/SRU2.html [Accessed 29 August 2018].

Couch, S.C., Glanz, K., Zhou, C., Sallis, J.F. and Saelens, B.E. (2014) Home food environment in relation to children's dietquality and weight status. *Journal of the Academy of Nutrition and Dietetics*. 114 (10), pp. 1569–1579.

Cowell, P. (2001) Marketing to children: A guide for students and practitioners- part 1. *Marketing Review*. 1 (4), pp. 473–485.

Coyne, I.T. (1997) Sampling in qualitative research. Purposeful and theoretical sampling; merging or clear boundaries? *Journal of Advanced Nursing*. 26 (26), pp. 623–630.

Cravener, T.L., Schlechter, H., Loeb, K.L., Radnitz, C., Schwartz, M., Zucker, N., Finkelstein, S., Wang, Y.C., Rolls, B.J. and Keller, K.L. (2015) Feeding strategies derived from behavioral economics and psychology can increase vegetable intake in children as Part of a home-based intervention: Results of a pilot study. *Journal of the Academy of Nutrition and Dietetics*. 115 (11), pp. 1798–1807.

Creswell, J.W. (2009) Mapping the field of mixed methods research. *Journal of Mixed Methods Research*. 3 (2), pp. 95–108.

Creswell, J.W. and Clark, V.L.P. (2018) *Designing and Conducting Mixed Methods Research.* Thousand Oaks, CA: Sage Publications.

Creswell, J.W. and Creswell, J.D. (2017) *Research Design: Qualitative, Quantitative, and Mixed Methods Approaches*. 5th edition. California: Sage Publications.

Creswell, J.W. and Miller, D.L. (2000) Validity in qualitative inquiry. *Theory into Practice*. 39 (3), pp. 124–130.

Creswell, J.W. and Poth, C.N. (2018) *Qualitative Inquiry & Research Design Choosing among Five Approaches*. 4th edition. Thousand Oaks: Sage Publications.

Crosby, L.A. and Grossbart, S.L. (1984) Parental style segments and concern about children's food advertising. *Current Issues & Research in Advertising*. 7 pp. 43–63.

Cruwys, T., Bevelander, K.E. and Hermans, R.C.J. (2015) Social modeling of eating: A review of when and why social influence affects food intake and choice. *Appetite*. 86 pp. 3–18.

Cruwys, T., Haslam, S.A., Fox, N.E. and McMahon, H. (2015) 'That's not what we do': Evidence that normative change is a mechanism of action in group interventions. *Behaviour Research and Therapy*. 65 pp. 11–17.

Cyril, S., Halliday, J., Green, J. and Renzaho, A.M.N. (2016) Relationship between body mass index and family functioning, family communication, family type and parenting style among African migrant parents and children in Victoria, Australia:

A parent-child dyad study. *BMC Public Health*. 16 (1), pp. 1–10.

Czoli, C.D., Pauzé, E. and Potvin Kent, M. (2020) Exposure to food and beverage advertising on television among canadian adolescents, 2011 to 2016. *Nutrients*. 12 (2), pp. 1–13.

d'Astous, A. and Landreville, V. (2003) An experimental investigation of factors affecting consumers' perceptions of sales promotions. *European Journal of Marketing*. 37 (11/12), pp. 1746–1761.

Daffalla, A., Mostafa, O., Hassanein, M., Shatoor, A., Khan, M. and Mahfouz, A. (2011) Nutrition, physical activity, and gender risks for adolescent obesity in Southwestern Saudi Arabia. *Saudi Journal of Gastroenterology*. 17 (5), pp. 318–322.

Dallazen, C. and Fiates, G.M.R. (2014) Brazilian parents' perceptions of children's influence on family food purchases. *British Food Journal*. 116 (12), pp. 2016–2025.

Daly, K. (2007) *Qualitative Methods for Family Studies and Human Development*. London: Sage Publications.

Damen, F.W.M., Luning, P.A., Hofstede, G.J., Fogliano, V. and Steenbekkers, B.L.P.A. (2020a) Value conflicts in mothers' snack choice for their 2- to 7-year-old children. *Maternal and Child Nutrition*. 16 (1), pp. 1–11.

Damen, F.W.M., Luning, P.A., Pellegrini, N., Vitaglione, P., Hofstede, G.J., Fogliano, V. and Steenbekkers, B.L.P.A. (2020b) Mothers' considerations in snack choice for their children: Differences between the North and the South of Italy. *Food Quality and Preference*. 85 (103965), pp. 1–8.

Damen, F.W.M., Steenbekkers, B.L.P.A., Fogliano, V. and Luning, P.A. (2020c) Youngest versus oldest child: why does mothers' snack choice differ? *Appetite*. 144 pp. 104455.

Daniel, B.K. (2018) Empirical verification of the "TACT" framework for teaching rigour in qualitative research methodology. *Qualitative Research Journal*. 18 (3), pp. 262–275.

Daniel, C. (2016) Economic constraints on taste formation and the true cost of healthy eating. *Social Science and Medicine*. 148 pp. 34–41.

Daniel, C. (2020) Is healthy eating too expensive?: How low-income parents evaluate the cost of food. *Social Science and Medicine*. 248 pp. 1–8.

Darling, N. and Steinberg, L. (1993) Parenting style as context: An integrative model. *Psychological Bulletin*. 113 (3), pp. 487–496.

Darwish, M., Turki, Z., Sabra, A. and Sebiany, A. (2014) Obesity among females attending Al-Qatif health care centers, Eastern Saudi Arabia: Prevalence and associated factors. *International Journal of Medical Science and Public Health*. 3 (9), pp. 1144.

Davis, T., Hogg, M.K., Marshall, D., Petersen, A. and Schneider, T. (2018) Intersectional research stories of responsibilising the family for food, feeding and health in the twenty-first century. *European Journal of Marketing*. 52 (12), pp. 2273–2288.

Davison, K.K., Gicevic, S., Aftosmes-Tobio, A., Ganter, C., Simon, C.L., Newlan, S. and Manganello, J.A. (2016) Fathers' representation in bservational studies on parenting and childhood obesity: A systematic review and content analysis. *American Journal of Public Health*. 106 (11), pp. e14–e21.

DeCosta, P., Møller, P., Frøst, M.B. and Olsen, A. (2017) Changing children's eating behaviour - A review of experimental research. *Appetite*. 113 pp. 327–357.

DeJonckheere, M. and Vaughn, L.M. (2019) Semistructured interviewing in primary

care research: A balance of relationship and rigour. *Family Medicine and Community Health*. 7 (2), pp. 1–8.

Delaney, M. and McCarthy, M.B. (2014) Saints, sinners and non-believers: The moral space of food. A qualitative exploration of beliefs and perspectives on healthy eating of Irish adults aged 50-70. *Appetite*. 73 pp. 105–113.

DeNicola, E., Aburizaiza, O.S., Siddique, A., Khwaja, H. and Carpenter, D.O. (2015) Obesity and public health in the Kingdom of Saudi Arabia. *Reviews on Environmental Health*. 30 (3), pp. 191–205.

Dennison, B.A., Erb, T.A. and Jenkins, P.L. (2001) Predictors of dietary milk fat intake by preschool children. *Preventive Medicine*. 33 (6), pp. 536–542.

Denscombe, M. (2017) *The Good Research Guide for Small-Scale Social Research Projects.* 6th edition. London, UK: McGraw-Hill Education.

Denzin, N.K. and Lincoln, Y.S. (2017) *The Sage Handbook of Qualitative Research.* 5th edition. California: Sage Publications.

Devine, C.M., Connors, M.M., Sobal, J. and Bisogni, C.A. (2003) Sandwiching it in: Spillover of work onto food choices and family roles in low- and moderate-income urban households. *Social Science and Medicine*. 56 (3), pp. 617–630.

Dewan, M. (2017) Family status: A contributing factor towards childhood and adolescent obesity. *Bio Science Research Bulletin*. 33 (1), pp. 4–10.

Dickson-Swift, V., James, E.L., Kippen, S. and Liamputtong, P. (2006) Blurring boundaries in qualitative health research on sensitive topics. *Qualitative Health Research*. 16 (6), pp. 853–871.

Dolwick, A.P. and Persky, S. (2021) Parental reward-based eating drive predicts parents' feeding behaviors and Children's ultra-processed food intake. *Appetite*. 164 pp. 105241.

Domel, S.B., Thompson, W.O., Baranowski, H.C.D.T., Leonard, S.B. and Baranowski, J. (1996) Psychosocial predictors of fruit and vegetable consumption among elementary school children. *Health Education Research*. 11 (3), pp. 299–308.

Al Dossry, T.M. (2012) *Consumer culture in Saudi Arabia: A qualitative study among heads of household.* (no place) The University of Exeter.

Dotson, M.J. and Hyatt, E.M. (2005) Major influence factors in children's consumer socialization. *Journal of Consumer Marketing*. 22 (1), pp. 35–42.

Draxten, M., Fulkerson, J.A., Friend, S., Flattum, C.F. and Schow, R. (2015) Parental role modeling of fruits and vegetables at meals and snacks is associated with children's adequate consumption. *Appetite.* 78 pp. 1–7.

Drenten, J., Peters, C.O. and Thomas, J.B. (2008) An exploratory investigation of the dramatic play of preschool children within a grocery store shopping context. *International Journal of Retail & Distribution Management*. 36 (10), pp. 831–855.

Drewnowski, A. (2010) The Nutrient Rich Foods Index helps to identify healthy, affordable foods. *American Journal of Clinical Nutrition*. 91 (4), pp. 1095–1101.

Drewnowski, A. and Specter, S.E. (2004) Poverty and obesity : the role of energy density and energy costs. *American Journal of Clinical Nutrition*. 79 (1), pp. 6–16.

Dubowitz, T., Acevedo-Garcia, D., Salkeld, J., Lindsay, A.C., Subramanian, S. V. and Peterson, K.E. (2007) Lifecourse, immigrant status and acculturation in food purchasing and preparation among low-income mothers. *Public Health Nutrition*. 10 (4), pp. 396–404.

Dukes, S. (1984) Phenomenological in the human methodology sciences. *Journal of Religion and Health*. 23 (3), pp. 197–203.

Durão, C., Andreozzi, V., Oliveira, A., Moreira, P., Guerra, A., Barros, H. and Lopes, C. (2015) Maternal child-feeding practices and dietary inadequacy of 4-year-old children. *Appetite*. 92 pp. 15–23.

Dwairy, M. and Achoui, M. (2010) Parental control: A second cross-cultural research on parenting and psychological adjustment of children. *Journal of Child and Family Studies*. 19 (1), pp. 16–22.

Dwairy, M., Achoui, M., Abouserie, R., Farah, A., Sakhleh, A.A., Fayad, M. and Khan, H.K. (2006) Parenting styles in Arab societies: A first cross-regional research study. *Journal of Cross-Cultural Psychology*. 37 (3), pp. 230–247.

Dyen, M., Sirieix, L., Costa, S., Depezay, L. and Castagna, E. (2018) Exploring the dynamics of food routines: A practice-based study to understand households' daily life. *European Journal of Marketing*. 52 (12), pp. 2544–2556.

Easterby-Smith, M., Thorpe, R. and Jackson, P.R. (2012) *Management Research*. 4th edition. London: Sage Publications.

Easton, K.L., McComish, J.F. and Greenberg, R. (2000) Avoiding common pitfalls in qualitative data collection and transcription. *Qualitative Health Research*. 10 (5), pp. 703–707.

Ebster, C., Wagner, U. and Neumueller, D. (2009) Children's influences on in-store purchases. *Journal of Retailing and Consumer Services*. 16 (2), pp. 145–154.

Edelson, L.R., Mokdad, C. and Martin, N. (2016) Prompts to eat novel and familiar fruits and vegetables in families with 1-3 year-old children: Relationships with food acceptance and intake. *Appetite*. 99 pp. 138–148.

Eger, L., Komárková, L., Egerová, D. and Mičík, M. (2021) The effect of COVID-19 on consumer shopping behaviour: Generational cohort perspective. *Journal of Retailing and Consumer Services*. pp. 102542.

Al Eid, A.J., Alahmed, Z.A., Al-Omary, S.A. and Alharbi, S.M. (2017) RASHAKA Program : A collaborative initiative between Ministry of Health and Ministry of Education to control childhood obesity in Saudi Arabia. *Saudi Journal of Obesity*. 5 (1), pp. 22.

Ek, A., Nordin, K., Nyström, C.D., Sandvik, P., Eli, K. and Nowicka, P. (2020) Responding positively to "children who like to eat": Parents' experiences of skills-based treatment for childhood obesity. *Appetite*. 145 pp. 104488.

Ekström, K.M. (2006) Consumer socialization revisited. *Research in Consumer Behavior*. 10 pp. 71–98.

El-Hazmi, M.A.F. and Warsy, A.S. (2002) A comparative study of prevalence of overweight and obesity in children in different provinces of Saudi Arabia. *Journal of Tropical Pediatrics*. 48 (3), pp. 172–177.

Eli, K., Hörnell, A., Etminan Malek, M. and Nowicka, P. (2017) Water, juice, or soda? Mothers and grandmothers of preschoolers discuss the acceptability and accessibility of beverages. *Appetite*. 112 pp. 133–142.

Elliott, C. (2008) Marketing fun foods: A profile and analysis of supermarket food Messages targeted at children. *Canadian Public Policy*. 34 (2), pp. 259–273.

Ellis, D. and Maikoo, M. (2018) South African children's influence tactics: What works and when? *Young Consumers*. 19 (4), pp. 432–449.

Elms, J., de Kervenoael, R. and Hallsworth, A. (2016) Internet or store? An ethnographic study of consumers' internet and store-based grocery shopping practices. *Journal of Retailing and Consumer Services*. 32 pp. 234–243.

Elo, S., Kääriäinen, M., Kanste, O., Pölkki, T., Utriainen, K. and Kyngäs, H. (2014) Qualitative content analysis: A focus on trustworthiness. *SAGE Open*. 4 (1), pp. 1–10.

Emond, J.A., Madanat, H.N. and Ayala, G.X. (2012) Do Latino and non-Latino grocery stores differ in the availability and affordability of healthy food items in a low-income, metropolitan region? *Public health nutrition*. 15 (2), pp. 360–369.

Epp, A.M. and Price, L.L. (2018) Constraints and possibilities in the thrown togetherness of feeding the family. *European Journal of Marketing*. 52 (12), pp. 2499–2511.

Epp, A.M. and Price, L.L. (2008) Family identity: A framework of identity interplay in consumption practices. *Journal of Consumer Research*. 35 (1), pp. 50–70.

Epstein, L.H., Jankowiak, N., Nederkoorn, C., Raynor, H.A., French, S.A. and Finkelstein, E. (2012) Experimental research on the relation between food price changes and food-purchasing patterns: A targeted review. *American Journal of Clinical Nutrition*. 95 (4), pp. 789–809.

Erlingsson, C. and Brysiewicz, P. (2017) A hands-on guide to doing content analysis. *African Journal of Emergency Medicine*. 7 (3), pp. 93–99.

Evans, A., Chow, S., Jennings, R., Dave, J., Scoblick, K., Sterba, K.R. and Loyo, J. (2011) Traditional foods and practices of spanish-speaking latina mothers influence the home food environment: Implications for future interventions. *Journal of the American Dietetic Association*. 111 (7), pp. 1031–1038.

Fan, Y. and Li, Y. (2010) Children's buying behaviour in China: A study of their information sources. *Marketing Intelligence and Planning*. 28 (2), pp. 170–187.

Farah, M.F. (2020) Consumer perception of Halal products. An empirical assessment among Sunni versus Shiite Muslim consumers. *Journal of Islamic Marketing*.

Fielding-Singh, P. (2017) Dining with dad: Fathers' influences on family food practices. *Appetite*. 117 pp. 98–108.

Fisher, J.O., Mitchell, D.C., Smiciklas-Wright, H. and Birch, L.L. (2002) Parental influences on young girls' fruit and vegetable, micronutrient, and fat intakes. *Journal of the American Dietetic Association*. 102 (1), pp. 58–64.

Floren, J., Rasul, T. and Gani, A. (2019) Islamic marketing and consumer behaviour: a systematic literature review. *Journal of Islamic Marketing*. 11 (6), pp. 1557–1578.

Flurry, L.A. (2007) Children's influence in family decision-making: Examining the impact of the changing American family. *Journal of Business Research*. 60 (4), pp. 322–330.

Flurry, L.A. and Veeck, A. (2009) Children's relative influence in family decision making in urban China. *Journal of Macromarketing*. 29 (2), pp. 145–159.

Fox, J. (2008) *A World Survey of Religion and the State*. Cambridge: Cambridge University Press.

Foxall, G.R. (1995) Science and interpretation in consumer research: A radical behaviourist perspective. *European Journal of Marketing*. 29 (9), pp. 3–99.

Freidenreich, D.M. (2011) The implications of unbelief: Tracing the emergence of distinctively Shi'i notions regarding the food and impurity of non-Muslims. *Islamic Law and Society*. 18 (1), pp. 53–84.

Furst, T., Connors, M., Bisogni, C.A., Sobal, J. and Falk, L.W. (1996) Food choice: a conceptual model of the process. *Appetite*. 26 (3), pp. 247–265.

Fusch, P.I. and Ness, L.R. (2015) The qualitative report are we there yet? Data saturation in qualitative research. *The Qualitative Report*. 20 (9), pp. 1408–1416.

Fuster, M., Weindorf, S., Mateo, K.F., Barata-Cavalcanti, O. and Leung, M.M. (2019) "It's sort of, like, in my family's blood": Exploring latino pre-adolescent children and their parents' perceived cultural influences on food practices. *Ecology of Food and Nutrition*. 58 (6), pp. 620–636.

Galloway, A.T., Fiorito, L.M., Francis, L.A. and Birch, L.L. (2006) 'Finish your soup':

Counterproductive effects of pressuring children to eat on intake and affect. *Appetite*. 46 (3), pp. 318–323.

Gaumer, C.J. and Arnone, C. (2009) Grocery store observation: Parent-child interaction in family purchases. *Journal of Food Products Marketing*. 16 (1), pp. 1–18.

Gaumer, C.J., Arnone, C.S. and Ashley-Cotleur, C. (2013) Child influence: Depth interviews with pre-operational child consumers and their parents. *Journal of Food Products Marketing*. 19 (3), pp. 219–235.

Gentile, D.A., Nathanson, A.I., Rasmussen, E.E., Reimer, R.A. and Walsh, D.A. (2012) Do You See What I See? Parent and Child Reports of Parental Monitoring of Media. *Family Relations*. 61 (3), pp. 470–487.

Ghanem, S., Kalliny, M. and Elgoul, S. (2013) The impact of technology on the Arab communication style and culture: Implications for marketing. *Journal of Marketing Communications* 19 (5) p.pp. 324–340.

Ghouse, S.M., Chaudhary, M. and Durrah, O. (2019) Socialization and the buying behaviour of the Arab child consumers: insights from Oman. *Journal of Islamic Marketing*.

Gibson, B.E., Mistry, B., Smith, B., Yoshida, K.K., Abbott, D., Lindsay, S. and Hamdani, Y. (2013) The integrated use of audio diaries, photography, and interviews in research with disabled young men. *International Journal of Qualitative Methods*. 12 (1), pp. 382–402.

Gillison, S., Givan, A.M., Beatty, S.E., Kim, K., Reynolds, K. and Baker, J. (2015) Mother-adolescent daughter identity interplay processes. *Journal of Consumer Marketing*. 32 (4), pp. 234–244.

Giordano, J., O'Reilly, M., Taylor, H. and Dogra, N. (2007) Confidentiality and autonomy: The challenge(s) of offering research participants a choice of disclosing their identity. *Qualitative Health Research*. 17 (2), pp. 264–275.

Glaw, X., Inder, K., Kable, A. and Hazelton, M. (2017) Visual methodologies in qualitative research: autophotography and photo elicitation applied to mental health research. *International Journal of Qualitative Methods*. 16 (1), pp. 1–8.

Golfashani, N. (2003) Understanding reliability and validity in qualitative research. *The Qualitative Report*. 8 (4), pp. 597–607.

Gram, M. (2015) Buying food for the family: negotiations in parent/child supermarket shopping: An observational study from Denmark and the United States. *Journal of Contemporary Ethnography*. 44 (2), pp. 169–195.

Gram, M. (2010) Self-reporting vs. observation: Some cautionary examples from parent/child food shopping behaviour. *International Journal of Consumer Studies*. 34 (4), pp. 394–399.

Gram, M. and Grønhøj, A. (2016) Meet the good child. 'Childing' practices in family food co-shopping. *International Journal of Consumer Studies*. 40 (5), pp. 511–518.

Grant, A. (2018) *Doing Execellent Social Research with Documents: Practical Examples and Guidance for Qualitative Researchers*. Oxon: Routledge.

Gray, D.E. (2018) *Doing Research in the Real World*. 4th edition. London, UK: Sage Publications.

Greenstein, T.N. (2006) *Methods of Family Research*. 2nd edition. Thousand Oaks, CA: Sage Publications.

Gregory, J.E., Paxton, S.J. and Brozovic, A.M. (2011) Maternal feeding practices predict fruit and vegetable consumption in young children. Results of a 12-month longitudinal study. *Appetite*. 57 (1), pp. 167–172.

Grier, S.A., Mensinger, J., Huang, S.H., Kumanyika, S.K. and Stettler, N. (2007) Fast-

food marketing and children's fast-food consumption: Exploring parents' influences in an ethnically diverse sample. *Journal of Public Policy & Marketing*. 26 (2), pp. 221–235.

Grønhøj, A. and Gram, M. (2020a) Balancing health, harmony and hegemony: Parents' goals and strategies in children's food related consumer socialization. *International Journal of Consumer Studies*. 44 (1), pp. 77–88.

Grønhøj, A. and Gram, M. (2020b) Researching family food decision making processes: highlights, hits and pitfalls when including young children's perspectives. *Qualitative Market Research: An International Journal*. pp. 1352–2752.

Grønhøj, A. and Thøgersen, J. (2009) Like father, like son? Intergenerational transmission of values, attitudes, and behaviours in the environmental domain. *Journal of Environmental Psychology*. 29 (4), pp. 414–421.

Grossbart, S., Carlson, L. and Walsh, A. (1991) Consumer socialization and frequency of shopping with children. *Journal of the Academy of Marketing Science*. 19 (3), pp. 155–163.

Grusec, J.E. and Goodnow, J.J. (1994) Impact of parental discipline methods on the child's internalization of values: A reconceptualization of current points of view. *Developmental Psychology*. 30 (1), pp. 4–19.

Guba, E.C. (1990) *The Paradigm Dialog.* Newbury Park, CA: Sage Publications.

Guba, E.G. and Lincoln, Y.S. (1998) *The Landscape of Qualitative Research*. In: London: Sage Publications. pp. 195-220.

Guest, L. (1944) A study of brand loyalty. *Journal of Applied Psychology*. 28 (1), pp. 16–27.

Gunther, C., Reicks, M., Banna, J., Suzuki, A., Topham, G., Richards, R., Jones, B., Lora, K., Anderson, A.K., da Silva, V., Penicka, C., Hopkins, L.C., Cluskey, M., Hongu, N., et al. (2019) Food parenting practices that influence early adolescents' food choices during independent eating occasions. *Journal of Nutrition Education and Behavior*. 51 (8), pp. 993–1002.

Habbab, R.M. and Bhutta, Z.A. (2020) Prevalence and social determinants of overweight and obesity in adolescents in Saudi Arabia: A systematic review. *Clinical Obesity*. 10 (6), pp. 1–15.

Hackley, C. (2020) *Qualitative Research in Marketing and Management: Doing Interpretive Research Projects*. 2nd edition. Oxon: Taylor & Francis Group.

Hamdan, M.N., Post, M.J., Ramli, M.A. and Mustafa, A.R. (2018) Cultured meat in islamic perspective. *Journal of Religion and Health*. 57 (6), pp. 2193–2206.

Hammad, S.S. (2017) *A mixed methods study of childhood feeding and growth in Saudi Arabia*. (no place) The University of North Carolina at Chapel Hill.

Hammad, S.S. and Berry, D.C. (2016) The child obesity epidemic in Saudi Arabia: A review of the literature. *Journal of Transcultural Nursing*.

Hammersley, M. (1987) Some notes on the terms 'validity' and 'reliability'. *British Educational Research Journal*. 13 (1), pp. 73–81.

Hanafiah, M.H. and Hamdan, N.A.A. (2020) Determinants of Muslim travellers Halal food consumption attitude and behavioural intentions. *Journal of Islamic Marketing*.

Hannon, P.A., Bowen, D.J., Moinpour, C.M. and McLerran, D.F. (2003) Correlations in perceived food use between the family food preparer and their spouses and children. *Appetite*. 40 (1), pp. 77–83.

Hardcastle, S.J. and Blake, N. (2016) Influences underlying family food choices in mothers from an economically disadvantaged community. *Eating Behaviors*. 20

pp. 1–8.

Harman, V. and Cappellini, B. (2015) Mothers on display: Lunchboxes, social class and moral accountability. *Sociology*. 49 (4), pp. 764–781.

Harris, C., Jackson, L., Mayblin, L., Piekut, A. and Valentine, G. (2015) 'Big Brother welcomes you': Exploring innovative methods for research with children and young people outside of the home and school environments. *Qualitative Research*. 15 (5), pp. 583–599.

Harris, T.S. and Ramsey, M. (2015) Paternal modeling, household availability, and paternal intake as predictors of fruit, vegetable, and sweetened beverage consumption among African American children. *Appetite*. 85 pp. 171–177.

Harrison, R., Moisio, R., Gentry, J. and Commuri, S. (2021) Processes of consumer socialization: study of single-father households. *European Journal of Marketing*.

Haselhoff, V., Faupel, U. and Holzmuller, H.H. (2014) Strategies of children and parents during shopping for groceries. *Young Consumers*. 15 (1), pp. 17–36.

Hatab, Z. and Makki, A. (1978) *Al-solta el-abawia wal-shabab*. Beirut, Lebanon: Ma'had El-Inmaa' El-Arabi.

Haugtvedt, C.P., Herr, P.M. and Kardes, F.R. (2018) Stages of Consumer Socialization: The Development of Consumer Knowledge, Skills, and Values From Childhood to Adolescence: Deborah Roedder John. In: *In Handbook of Consumer Psychology*. New York, NY.: Routledge Taylor & Francis Group. pp. 231–256.

Hawkes, C., Jewell, J. and Allen, K. (2013) A food policy package for healthy diets and the prevention of obesity and diet-related non-communicable diseases: The NOURISHING framework. *Obesity Reviews*. 14 (S2), pp. 159–168.

Hayter, A.K.M., Draper, A.K., Ohly, H.R., Rees, G.A., Pettinger, C., McGlone, P. and Watt, R.G. (2015) A qualitative study exploring parental accounts of feeding pre-school children in two low-income populations in the UK. *Maternal and Child Nutrition*. 11 (3), pp. 371–384.

Healy, M. and Perry, C. (2000) Comprehensive criteria to judge validity and reliability of qualitative research within the realism paradigm. *Qualitative Market Research: An International Journal*. 3 (3), pp. 118–126.

Hebestreit, A., Intemann, T., Siani, A., Dehenauw, S., Eiben, G., Kourides, Y.A., Kovacs, E., Moreno, L.A., Veidebaum, T., Krogh, V., Pala, V., Bogl, L.H., Hunsberger, M., Börnhorst, C., et al. (2017) Dietary patterns of European children and their parents in association with family food environment: Results from the I.family study. *Nutrients*. 9 (2), pp. 1–17.

Heijden, A. van der, te Molder, H., de Graaf, C. and Jager, G. (2020) Healthy is (not) tasty? Implicit and explicit associations between food healthiness and tastiness in primary school-aged children and parents with a lower socioeconomic position. *Food Quality and Preference*. 84 (December 2019), pp. 103939.

Heim, A. and Pyhälä, A. (2020) Changing food preferences among a former hunter-gatherer group in Namibia. *Appetite*. 151 pp. 104709.

Heiman, A., Gordon, B. and Zilberman, D. (2019) Food beliefs and food supply chains: The impact of religion and religiosity in Israel. *Food Policy*. 83 pp. 363–369.

Heller, R.L., Chiero, J.D., Trout, N. and Mobley, A.R. (2021) A qualitative study of providers' perceptions of parental feeding practices of infants and toddlers to prevent childhood obesity. *BMC Public Health*. 21 (1), pp. 1–9.

Hennink, M. and Weber, M.B. (2013) Quality issues of court reporters and transcriptionists for qualitative research. *Qualitative health research*. 23 (5), pp. 700–710.

Henthorne, T.L., LaTour, M.S. and Hudson, T.W. (1997) Japanese couples' marital

roles in stages of product purchase decision making. *International Marketing Review*. 14 (1), pp. 39–58.

Henwood, K., Shirani, F. and Coltart, C. (2010) Fathers and financial risk-taking during the economic downturn: Insights from a qll study of men's identities-in-the-making. *Twenty-First Century Society*. 5 (2), pp. 137–147.

Herman, A.N., Malhotra, K., Wright, G., Fisher, J.O. and Whitaker, R.C. (2012) A qualitative study of the aspirations and challenges of low-income mothers in feeding their preschool-aged children. *International Journal of Behavioral Nutrition and Physical Activity*. 9 (132), pp. 1–13.

Hoerr, S.L., Hughes, S.O., Fisher, J.O., Nicklas, T.A., Liu, Y. and Shewchuk, R.M. (2009) Associations among parental feeding styles and children's food intake in families with limited incomes. *International Journal of Behavioral Nutrition and Physical Activity*. 6 pp. 55.

Hogreve, J., Matta, S., Hettich, A.S. and Reczek, R.W. (2020) How do social norms influence parents' food choices for their children? The role of social comparison and implicit self-theories. *Journal of Retailing*.

Holley, C.E., Haycraft, E. and Farrow, C. (2015) 'Why don't you try it again?' A comparison of parent led, home based interventions aimed at increasing children's consumption of a disliked vegetable. *Appetite*. 87 pp. 215–222.

Holsten, J.E., Deatrick, J.A., Kumanyika, S., Pinto-Martin, J. and Compher, C.W. (2012) Children's food choice process in the home environment. A qualitative descriptive study. *Appetite*. 58 (1), pp. 64–73.

Horaib, G. Bin, Al-Khashan, H.I., Mishriky, A.M., Selim, M.A., AlNowaiser, N., BinSaeed, A.A., Alawad, A.D., Al-Asmari, A.K. and AlQumaizi, K. (2013) Prevalence of obesity among military personnel in Saudi Arabia and associated risk factors. *Saudi Medical Journal*. 34 (4), pp. 401–407.

Horodynski, M.A. and Arndt, M.J. (2005) 'Eating-together' mealtimes with African-American fathers and their toddlers. *Applied Nursing Research*. 18 (2), pp. 106–109.

Horodynski, M.A., Brophy-Herb, H.E., Martoccio, T.L., Contreras, D., Peterson, K., Shattuck, M., Senehi, N., Favreau, Z., Miller, A.L., Sturza, J., Kaciroti, N. and Lumeng, J.C. (2018) Familial psychosocial risk classes and preschooler body mass index: The moderating effect of caregiver feeding style. *Appetite*. 123 pp. 216–224.

Hota, M. and Bartsch, F. (2019) Consumer socialization in childhood and adolescence: Impact of psychological development and family structure. *Journal of Business Research*. 105 pp. 11–20.

Hota, M. and McGuiggan, R. (2005) The relative influence of consumer socialization agents on children and adolescents: Examining the past and modeling the future. *ACR European Advances*. pp. 119–124.

Huang, C.Y., Reisch, L.A., Gwozdz, W., Molnár, D., Konstabel, K., Michels, N., Tornaritis, M., Eiben, G., Siani, A., Fernández-Alvira, J.M., Ahrens, W., Pigeot, I. and Lissner, L. (2016) Pester power and its consequences: Do European children's food purchasing requests relate to diet and weight outcomes? *Public Health Nutrition*. 19 (13), pp. 2393–2403.

Hughner, R.S. and Maher, J.K. (2006) Factors that influence parental food purchases for children: Implications for dietary health. *Journal of Marketing Management*. 22 (9–10), pp. 929–954.

Humble, Á.M. (2009) Technique triangulation for validation in directed content analysis. *International Journal of Qualitative Methods*. 8 (3), pp. 34–51.

Iranmanesh, M., Jayaraman, K.S., Zailani, S. and Ghadiri, S.M. (2017) The effects of consumer perception of volume discount benefits on intention to purchase grocery products: Deal proneness as a moderator. *Asia Pacific Journal of Marketing and Logistics*. 29 (5), pp. 1017–1035.

Isler, L., Popper, E.T. and Ward, S. (1987) Children's purchase requests and parental responses: Results from a diary study. *Journal of Advertising Research*. 27 pp. 28–39.

Jackendoff, R. (2009) Parallels and nonparallels between language and music. *Music Perception: An Interdisciplinary Journal*. 26 (3), pp. 195–204.

Jaeger, S.R., Bava, C.M., Worch, T., Dawson, J. and Marshall, D.W. (2011) The food choice kaleidoscope. A framework for structured description of product, place and person as sources of variation in food choices. *Appetite*. 56 (2), pp. 412–423.

Jalleh, S.G. and Donovan, R.J. (2001) Beware of Product Labels! *Journal of research for consumers*. 7 (2), pp. 1–13.

Jamal, A., Peattie, S. and Peattie, K. (2012) Ethnic minority consumers' responses to sales promotions in the packaged food market. *Journal of Retailing and Consumer Services*. 19 (1), pp. 98–108.

Janssen, M. (2018) Determinants of organic food purchases: Evidence from household panel data. *Food Quality and Preference*. 68 pp. 19–28.

Jennings, K.M., Loth, K.A., Tate, A.D., Miner, M.H. and Berge, J.M. (2019) Application of latent profile analysis to define subgroups of parenting styles and food parenting practices. *Appetite*. 139 pp. 8–18.

Jingxiong, J., Rosenqvist, U., Huishan, W., Greiner, T., Guangli, L. and Sarkadi, A. (2007) Influence of grandparents on eating behaviors of young children in Chinese three-generation families. *Appetite*. 48 (3), pp. 377–383.

Joffe, H. (2011) Thematic analysis. In: *Qualitative Research Methods in Mental Health and Psychotherapy: A Guide for Students and Practitioners*. New Jersey: John Wiley & Sons. pp. 209–258.

John, D.R. (1999) Consumer socialization of children: A retrospective look at twenty-five years of research. *Journal of Consumer Research*. 26 (3), pp. 183–213.

John, D.R. (2008) Stages of Consumer Socialization: The Development of Consumer Knowledge, Skills, and Values from Childhood to Adolescence. In: *Handbook of consumer psychology*. New York, NY.: Routledge Taylor & Francis Group. pp. 221–246.

Johnson, S.L. (2016) Developmental and environmental influences on young children's vegetable preferences. *Advances in Nutrition: An International Review Journal*. 7 (9), pp. 220S-231S.

Jongenelis, M.I., Morley, B., Pratt, I.S. and Talati, Z. (2020) Diet quality in children: A function of grandparents' feeding practices? *Food Quality and Preference*. 83 pp. 103899.

Judd, S.M., Newton, J.D., Newton, F.J. and Ewing, M.T. (2014) When nutritional guidelines and life collide: Family fruit and vegetable socialisation practices in low socioeconomic communities. *Journal of Marketing Management*. 30 (15–16), pp. 1625–1653.

Kalliny, M., Minton, E.A. and Benmamoun, M. (2018) Affect as a driver to religious-based consumer boycotts: Evidence from qualitative and quantitative research in the United States. *International Journal of Consumer Studies*. 42 (6), pp. 840–853.

Kalpokaite, N. and Radivojevic, I. (2020) '"I wish i knew what i know now"': Exploring psychology undergraduate students' experiences when learning about

qualitative research and CAQDAS. *The Qualitative Report*. 25 (7), pp. 1817–1840.

Karnieli-Miller, O., Strier, R. and Pessach, L. (2009) Power relations in qualitative research. *Qualitative Health Research*. 19 (2), pp. 279–289.

Kashif, M., Ayyaz, M. and Basharat, S. (2014) TV food advertising aimed at children: qualitative study of Pakistani fathers' views. *Asia Pacific Journal of Marketing and Logistics*. 26 (4), pp. 647–658.

Kaur, P. and Singh, R. (2006) Children in family purchase decision making in India and the West: A review. *Academy of Marketing Science Review*. 8 pp. 1–30.

Kearney, K.S. and Hyle, A.E. (2004) Drawing out emotions: The use of participant-produced drawings in qualitative inquiry. *Qualitative Research*. 4 (3), pp. 316–382.

Keller, M. and Ruus, R. (2014) Pre-schoolers, parents and supermarkets: Co-shopping as a social practice. *International Journal of Consumer Studies*. 38 (1), pp. 119–126.

Kellershohn, J., Walley, K. and Vriesekoop, F. (2017) Healthier food choices for children through menu pricing. *British Food Journal*. 119 (6), pp. 1324–1336.

Kerrane, B., Bettany, S.M. and Hogg, M.K. (2014) Revisiting contemporary issues in family consumption. *Journal of Marketing Management*. 30 (15–16), pp. 1527–1532.

Kerrane, B., Bettany, S.M. and Kerrane, K. (2015) Siblings as socialization agents exploring the role of 'sibship' in the consumer socialization of children. *European Journal of Marketing*. 49 (5/6), pp. 713–735.

Kerrane, B. and Hogg, M.K. (2013) Shared or non-shared? Children's different consumer socialisation experiences within the family environment. *European Journal of Marketing*. 47 (3/4), pp. 506–524.

Kerrane, B., Hogg, M.K. and Bettany, S.M. (2012) Children's influence strategies in practice: Exploring the co-constructed nature of the child influence process in family consumption. *Journal of Marketing Management*. 28 (7–8), pp. 809–835.

Khan, A., Mohammad, A.S. and Muhammad, S. (2020) An integrated model of brand experience and brand love for halal brands: survey of halal fast food consumers in Malaysia. *Journal of Islamic Marketing*.

Khandpur, N., Blaine, R.E., Fisher, J.O. and Davison, K.K. (2014) Fathers' child feeding practices: A review of the evidence. *Appetite*. 1 (78), pp. 110–121.

Kharuhayothin, T. and Kerrane, B. (2018) Learning from the past? An exploratory study of familial food socialization processes using the lens of emotional reflexivity. *European Journal of Marketing*. 52 (12), pp. 2312–2333.

Kharuhayothin, T. and Kerrane, B. (2017) Why don't parents walk their talk? Exploring parental deviant food Socialization behaviors within the family. *Advances in Consumer Research*. 45 pp. 433–437.

Kiefner-Burmeister, A.E., Hoffmann, D.A., Meers, M.R., Koball, A.M. and Musher-Eizenman, D.R. (2014) Food consumption by young children: A function of parental feeding goals and practices. *Appetite*. 74 pp. 6–11.

Kim, C., Lee, H. and Tomiuk, M.A. (2009) Adolescents' perceptions of family communication patterns and some aspects of their consumer socialization. *Psychology & Marketing*. 26 (10), pp. 888–907.

Kim, C., Yang, Z. and Lee, H. (2009) Cultural differences in consumer socialization: A comparison of Chinese-Canadian and Caucasian-Canadian children. *Journal of Business Research*. 62 (10), pp. 955–962.

Kim, M., Budd, N., Batorsky, B., Krubiner, C., Manchikanti, S., Waldrop, G., Trude, A.

and Gittelsohn, J. (2017) Barriers to and facilitators of stocking healthy food options: viewpoints of Baltimore city small storeowners. *Ecology of Food and Nutrition*. 56 (1), pp. 17–30.

Kim, Y. (2011) The pilot study in qualitative inquiry: Identifying issues and learning lessons for culturally competent research. *Qualitative Social Work*. 10 (2), pp. 190–206.

King, N. and Horrocks, C. (2010) *Interviews in Qualitative Research.* London: Sage Publications.

King, N., Horrocks, C. and Brooks, J. (2019) *Interviews in Qualitative Research*. 2nd edition. London: Sage Publications.

Knight, A., O'Connell, R. and Brannen, J. (2014) The temporality of food practices: Intergenerational relations, childhood memories and mothers' food practices in working families with young children. *Families, Relationships and Societies*. 3 (2), pp. 303–318.

Koo, J. and Suk, K. (2020) Is $0 better than free? Consumer response to "$0" versus "free" framing of a free promotion. *Journal of Retailing*. 96 (3), pp. 383–396.

Krcmar, M., Lapierre, M.A., Hoxie, A. and Colvett, J. (2017) Observing parent-child purchase related interactions in US-based retail environments: replication and extension. *Journal of Children and Media*. 11 (3), pp. 261–277.

Kvale, S. (2006) Dominance through interviews and dialogues. *Qualitative Inquiry*. 12 (3), pp. 480–500.

Lancaster, K. (2017) Confidentiality, anonymity and power relations in elite interviewing: conducting qualitative policy research in a politicised domain. *International Journal of Social Research Methodology*. 20 (1), pp. 93–103.

Larsen, J.K., Hermans, R.C.J., Sleddens, E.F.C., Engels, R.C.M.E., Fisher, J.O. and Kremers, S.S.P.J. (2015) How parental dietary behavior and food parenting practices affect children's dietary behavior. Interacting sources of influence? *Appetite*. 89 pp. 246–257.

Larson, N. and Story, M. (2009) A review of environmental influences on food choices. *Annals of Behavioral Medicine*. 1 (38), pp. 56–73.

Larson, N.I., Story, M., Eisenberg, M.E. and Neumark-Sztainer, D. (2006) Food preparation and purchasing roles among adolescents: Associations with sociodemographic characteristics and diet quality. *Journal of the American Dietetic Association*. 106 (2), pp. 211–218.

Lawlor, M.A. and Prothero, A. (2011) Pester power – A battle of wills between children and their parents. *Journal of Marketing Management*. 27 (5–6), pp. 561–581.

Lee, A.J., Kane, S., Ramsey, R., Good, E. and Dick, M. (2016) Testing the price and affordability of healthy and current (unhealthy) diets and the potential impacts of policy change in Australia. *BMC Public Health*. 16 (1), pp. 1–22.

Lefdahl-Davis, E.M. and Perrone-Mcgovern, K.M. (2015) The cultural adjustment of Saudi women international students: A qualitative examination. *Journal of Cross-Cultural Psychology*. 46 (3), pp. 406 –434.

Leong, S.M., Cote, J.A., Ang, S.H., Tan, S.J., Jung, K., Kau, A.K. and Pornpitakpan, C. (2008) Understanding consumer animosity in an international crisis: Nature, antecedents, and consequences. *Journal of International Business Studies*. 39 (6), pp. 996–1009.

Levy, S.J. (2005) The evolution of qualitative research in consumer behavior. *Journal of Business Research*. 31 (2), pp. 333–345.

Lilo, E.A., Muñoz, M. and Cruz, T.H. (2019) Perceptions of healthy eating among Hispanic parent–child dyads. *Health Promotion Practice*. 20 (2), pp. 231–238.

Lim, H., Lee, H.J., Choue, R. and Wang, Y. (2018) Trends in fast-food and sugar-sweetened beverage consumption and their association with social environmental status in South Korea. *Journal of the Academy of Nutrition and Dietetics*. 118 (7), pp. 1228–1236.

Lindsay, A.C., Vianna, G.V.D.B., Arruda, C.A.M., Alves, A.D.S.M., Hasselmann, M.H., Machado, M.M.T. and Greaney, M.L. (2020) Brazilian immigrant fathers' perspectives on child's eating and feeding practices: A qualitative study conducted in the United States. *Public Health Nutrition*. 23 (17), pp. 3211–3225.

Litchford, A., Roskos, M.R.S. and Wengreen, H. (2020) Influence of fathers on the feeding practices and behaviors of children: A systematic review. *Appetite*. 147 pp. 104558.

Liu, Y., Gittelsohn, J., Thorne-Lyman, A.L., Song, S., Orta-Aleman, D., Ma, Y. and Wen, D. (2020) Caregiver perceptions of the neighborhood food environment and their relationship with the home food environment and childhood obesity in Northeast China. *Appetite*. 144 (77), pp. 104447.

LoBiondo-Wood, G. and Haber, J. (2017) *Nursing Research-E-Book: Methods and Critical Appraisal for Evidence-Based Practice*. Oxford: Elsevier Health Sciences.

Lobstein, T. and Davies, S. (2009) Defining and labelling 'healthy' and 'unhealthy' food. *Public Health Nutrition*. 12 (3), pp. 331–340.

Long, D.E. (2003) *The Role of the Extended Family in Saudi Arabia*. Available from: http://susris.com/2003/03/10/the-role-of-the-extended-family-in-saudi-arabia/ [Accessed 5 February 2018].

Lora, K.R., Cheney, M. and Branscum, P. (2017) Hispanic mothers' views of the fathers' role in promoting healthy behaviors at home: Focus group findings. *Journal of the Academy of Nutrition and Dietetics*. 117 (6), pp. 914–922.

Lora, K.R., Hubbs-Tait, L., Ferris, A.M. and Wakefield, D. (2016) African-American and Hispanic children's beverage intake: Differences in associations with desire to drink, fathers' feeding practices, and weight concerns. *Appetite*. 107 pp. 558–567.

Loth, K.A., Maclehose, R.F., Fulkerson, J.A., Crow, S. and Neumark-Sztainer, D. (2014) Are food restriction and pressure-to-eat parenting practices associated with adolescent disordered eating behaviors? *International Journal of Eating Disorders*. 47 (3), pp. 310–314.

Loth, K.A., MacLehose, R.F., Larson, N., Berge, J.M. and Neumark-Sztainer, D. (2016) Food availability, modeling and restriction: How are these different aspects of the family eating environment related to adolescent dietary intake? *Appetite*. 96 pp. 80–86.

Lourenço, O.M. (2016) Developmental stages, Piagetian stages in particular: A critical review. *New Ideas in Psychology*. 40 pp. 123–137.

Lovelace, S. and Rabiee-Khan, F. (2015) Food choices made by low-income households when feeding their pre-school children: A qualitative study. *Maternal and Child Nutrition*. 11 (4), pp. 870–881.

Lowe, A., Norris, A.C., Farris, A.J. and Babbage, D.R. (2018) Quantifying thematic saturation in qualitative data analysis. *Field Methods*. 30 (3), pp. 191–207.

Lowrey, T.M., Otnes, C.C. and Mcgrath, M.A. (2005) Shopping with consumers: reflections and innovations. *Qualitative Market Research: An International Journal*. 8 (2), pp. 176–188.

Lucas-Thompson, R.G., Graham, D.J., Ullrich, E. and MacPhee, D. (2017) General and food-selection specific parenting style in relation to the healthfulness of parent-child choices while grocery shopping. *Appetite*. 108 pp. 353–360.

Lusk, J.L. (2019) Consumer beliefs about healthy foods and diets. *PLoS ONE*. 14 (10), pp. 1–15.

Lwin, M.O., Shin, W., Yee, A.Z.H. and Wardoyo, R.J. (2017) A parental health education model of children's food consumption: Influence on children's attitudes, intention, and consumption of healthy and unhealthy foods. *Journal of Health Communication*. 22 (5), pp. 403–412.

Lwin, M.O., Yee, A.Z.H., Lau, J., Ng, J.S., Lam, J.Y., Cayabyab, Y.M., Malik, S. and Vijaya, K. (2020) A macro-level assessment of introducing children food advertising restrictions on children's unhealthy food cognitions and behaviors. *International Journal of Advertising*. 39 (7), pp. 990–1011.

Maccoby, E.E. (2007) Historical overview of socialization research and theory. In: *Handbook of socialization: Theory and research*. New York: The Guilford Press. pp. 3–32.

Macklin, M.C. (1985) Do young children understand the selling intent of commercials? *Journal of Consumer Affairs*. 19 (2), pp. 293–304.

Maher, A.A. and Mady, S. (2010) Animosity, subjective norms, and anticipated emotions during an international crisis. *International Marketing Review*. 27 (6), pp. 630–651.

Mahmoud, A.B. and Grigoriou, N. (2019) Modelling parents' unhealthy food choices for their children: the moderating role of child food allergy and implications for health policy. *Journal of Family Studies*. pp. 1–19.

Mai, R. and Hoffmann, S. (2015) How to combat the unhealthy = tasty Intuition: The influencing role of health consciousness. *Journal of Public Policy & Marketing*. 34 (1), pp. 63–83.

Makhal, A., Robertson, K., Thyne, M. and Mirosa, M. (2020) Normalising the "ugly" to reduce food waste: Exploring the socialisations that form appearance preferences for fresh fruits and vegetables. *Journal of Consumer Behaviour*. (January), pp. 1–15.

Malik, G. and Shah, M. (2016) Impact of pester-power on parents purchasing pattern for child-centric products. *Prestige International Journal of Management & IT - Sanchayan*. 05 (02), pp. 31–42.

Mallan, K.M., Daniels, L.A., Nothard, M., Nicholson, J.M., Wilson, A., Cameron, C.M., Scuffham, P.A. and Thorpe, K. (2014a) Dads at the dinner table. A cross-sectional study of Australian fathers' child feeding perceptions and practices. *Appetite*. 73 pp. 40–44.

Mallan, K.M., Nothard, M., Thorpe, K., Nicholson, J.M., Wilson, A., Scuffham, P.A. and Daniels, L.A. (2014b) The role of fathers in child feeding: Perceived responsibility and predictors of participation. *Child: Care, Health and Development*. 40 (5), pp. 715–722.

Mandrik, C.A., Fern, E.F. and Bao, Y. (2005) Intergenerational influence: Roles of conformity to peers and communication effectiveness. *Psychology and Marketing*. 22 (10), pp. 813–832.

Marmaya, N.H., Zakaria, Z. and Mohd Desa, M.N. (2019) Gen Y consumers' intention to purchase halal food in Malaysia: a PLS-SEM approach. *Journal of Islamic Marketing*. 10 (3), pp. 1003–1014.

Marshal, R., Chuan, N. and Bong, N. (2002) Children's use of consumer heuristics. *Advances in Consumer Research*. 29 pp. 108–113.

Marshall, B., Cardon, P., Poddar, A. and Fontenot, R. (2013) Does sample size matter in qualitative research?: A review of qualitative interviews in is research. *Journal of Computer Information Systems*. 54 (1), pp. 11–22.

Marshall, C. and Rossman, G.B. (2011) *Designing Qualitative Research.* 5th edition. California: Sage Publications.

Marshall, D. (2014) Co-operation in the supermarket aisle: Young children's accounts of family food shopping. *International Journal of Retail & Distribution Management*. 42 (11/12), pp. 990–1003.

Marshall, D. (2016) Convenience stores and discretionary food consumption among young Tokyo consumers. *International Journal of Retail and Distribution Management*. 44 (10), pp. 1013–1029.

Marshall, D., O'Donohoe, S. and Kline, S. (2007) Families, food, and pester power: Beyond the blame game? *Journal of Consumer Behaviour*. 6 (4), pp. 164–181.

Marty, L., Nicklaus, S., Miguet, M., Chambaron, S. and Monnery-Patris, S. (2018) When do healthiness and liking drive children's food choices? The influence of social context and weight status. *Appetite*. 125 pp. 466–473.

Mâsse, L.C., Tu, A.W., Watts, A., Hughes, S.O. and O'Connor, T.M. (2020) What parenting practices do US and Canadian parents use to encourage or discourage healthy eating among their 5-12 year-old children? *Preventive Medicine Reports*. 20 pp. 101234.

Matheson, J.L. (2007) The voice transcription technique: Use of voice recognition software to transcribe digital interview data in qualitative. *The Qualitative Report*. 12 (4), pp. 547–560.

Mathison, S. (1988) Why Triangulate? *Educational Researcher*. 17 (2), pp. 13–17.

Maubach, N., Hoek, J. and McCreanor, T. (2009) An exploration of parents' food purchasing behaviours. *Appetite*. 53 (3), pp. 297–302.

Mayer, S. (1998) *What Money Can't Buy: Family Income and Children's Life Chances*. Cambridge: Cambridge University Press.

McDermott, L., O'Sullivan, T., Stead, M. and Hastings, G. (2006) International food advertising, pester power and its effects. *International Journal of Advertising*. 25 (4), pp. 513–540.

McDonald, A. and Milne, A. (2018) *Monitoring retail purchase and price promotions in Scotland (2010 - 2016).*

McDonnell, L., Scott, S. and Dawson, M. (2017) A multidimensional view? Evaluating the different and combined contributions of diaries and interviews in an exploration of asexual identities and intimacies. *Qualitative Research*. 17 (5), pp. 520–536.

Mcdowell, L. (2014) Gender , work , employment and society : feminist reflections on continuity and change. *Work, employment and society*. 28 (5), pp. 825–837.

McFarren, H., Vazquez, C., Jacobs, E.A., Dela Tejera, G. and Gray, M. (2020) Understanding feeding practices of Latinx mothers of infants and toddlers at risk for childhood obesity: A qualitative study. *Maternal and Child Nutrition*. 16 (3), pp. 1–9.

McHale, S.M., Updegraff, K.A. and Whiteman, S.D. (2012) Sibling relationships and influences in childhood and adolescence. *Journal of Marriage and Family*. 74 (5), pp. 913–930.

McLellan, E., MaCqueen, K.M. and Neidig, J.L. (2003) Beyond the Qualitative Interview: Data Preparation and Transcription. *Field Methods*. 15 (1), pp. 63–84.

Mehta, R. and Bharadwaj, A. (2021) Food advertising targeting children in India: Analysis and implications. *Journal of Retailing and Consumer Services*. 59 pp. 102428.

Menendez, D., Jiang, M.J., Edwards, K.M., Rosengren, K.S. and Alibali, M.W. (2020) Evaluating and communicating about the healthiness of foods: Predictors of

parents' judgments and parent-child conversations. *Cognitive Development*. 55 pp. 100913.

Merriam, S.B. and Tisdell, E.J. (2016) *Qualitative Research: A Guide to Design and Implementation*. 4th edition. San Francisco: John Wiley & Sons.

Meyer, K.A., Guilkey, D.K., Ng, S.W., Duffey, K.J., Popkin, B.M., Kiefe, C.I., Steffen, L.M., Shikany, J.M. and Gordon-Larsen, P. (2014) Sociodemographic differences in fast food price sensitivity. *JAMA Internal Medicine*. 174 (3), pp. 434–442.

Midhet, F.M., Al-Mohaimeed, A.A. and Sharaf, F.K. (2010) Lifestyle related risk factors of type 2 diabetes mellitus in Saudi Arabia. *Saudi Medical Journal*. 31 (7), pp. 768–774.

Mikeska, J., Harrison, R.L. and Carlson, L. (2017) A meta-analysis of parental style and consumer socialization of children. *Journal of Consumer Psychology*. 27 (2), pp. 245–256.

Mikeska, J., Harrison, R.L., Carlson, L. and Coryn, C.L.S. (2017) The influence of parental and communication style on consumer socialization: A meta-analysis informs marketing strategy considerations involving parent-child interventions. *Journal of Advertising Research*. 57 (3), pp. 319–334.

Milaat, W. (2014) Public health in the saudi health system: A search for new guardian. *Saudi Journal of Medicine and Medical Sciences*. 2 (2), pp. 77–80.

Miles, M.B. and Huberman, M.A. (1994) *An Expanded Sourcebook: Qualitative Data Analysis.* 2nd edition. California: Sage Publications.

Minahan, S. and Huddleston, P. (2010) Shopping with mum—Mother and daughter consumer socialization. *Young Consumers*. 11 (3), pp. 170–177.

Minahan, S. and Huddleston, P. (2013) Shopping with my mother: Reminiscences of adult daughters. *International Journal of Consumer Studies*. 37 (4), pp. 373–378.

Mohamed, R.N. and Daud, N.M. (2012) The impact of religious sensitivity on brand trust, equity and values of fast food industry in Malaysia. *Business Strategy Series*. 13 (1), pp. 21–30.

Monsivais, P., Mclain, J. and Drewnowski, A. (2010) The rising disparity in the price of healthful foods: 2004-2008. *Food Policy*. 35 (6), pp. 514–520.

Monti, P.M., Kadden, R.M., Rohsenow, D.J., Cooney, N.L. and Abrams, D.B. (2002) *Treating Alcohol Dependence: A Coping Skills Training Guide.* New York: Press, Guilford.

Moore, E.S. (2018) Intergenerational influences on children's food preferences, and eating styles: A review and call for research. *European Journal of Marketing*. 52 (12), pp. 2533–2544.

Moore, E.S. and Lutz, R.J. (1988) Intergenerational influences in the formation of consumer attitudes and beliefs about the marketplace: mothers and daughters. *Advances in Consumer Research*. 15 pp. 461–467.

Moore, E.S., Wilkie, W.L. and Desrochers, D.M. (2017) All in the family? Parental roles in the epidemic of childhood obesity. *Journal of Consumer Research*. 43 (5), pp. 824–859.

Moore, E.S., Wilkie, W.L. and Lutz, R.J. (2002) Passing the torch: Intergenerational influences as a source of brand equity. *Journal of Marketing*. 66 (2), pp. 17–37.

Moore, J.N., Raymond, M.A., Mittelstaedt, J.D. and Tanner Jr., J.F. (2002) Age and consumer socialization agent influences on adolescents' sexual knowledge, attitudes, and behavior: Implications for social marketing initiatives and public policy. *Journal of Public Policy & Marketing*. 21 (1), pp. 37–52.

Moore, R.L. and Moschis, G.P. (1978) Teenagers' reactions to advertising. *Journal of Advertising*. 7 (4), pp. 24–30.

Moreira, C.S.D.C., Casotti, L.M. and Campos, R.D. (2018) Consumer socialization in adulthood : challenges and directions for research. *Cadernos EBAPE. BR*. 16 (1), pp. 119–134.

Morgan, G. (1979) Response to mintzberg. *Administrative Science Quarterly*. 24 (1), pp. 137–139.

Morrison, M.A., Haley, E., Sheehan, K.B. and Taylor, R.E. (2012) *Using Qualitative Research in Advertising: Strategies, Techniques, and Applications*. 2nd edition. Thousand Oak, CA: Sage Publications.

Morse, J.M. (1999) Myth #93: Reliability and validity are not relevant to qualitative inquiry. *Qualitative Health Research*. 9 (6), pp. 717–718.

Morse, J.M., Barrett, M., Mayan, M., Olson, K. and Spiers, J. (2002) Verification strategies for establishing reliability and validity in qualitative research. *International Journal of Qualitative Methods*. 1 (2), pp. 13–22.

Moschis, G.P. (1985) The role of family communication in consumer socialization of children and adolescents. *Journal of Consumer Research*. 11 (4), pp. 898–913.

Moschis, G.P. and Churchill, G.A. (1978) Consumer socialization : A theoretical and empirical analysis. *Journal of Marketing Research*. pp. 599–609.

Moschis, G.P., Moore, R.L. and Smith, R.B. (1984) The impact of family communication on adolescent consumer socialization. *Advances in Consumer Research*. 11 (1), pp. 314–319.

Mosli, R.H., Bakhsh, J.A., Madani, N.A., Sindi, A.F., Barasheed, A.F., Kutbi, H.A. and Al-Wassia, H.K. (2019) Indulgence and stress around feeding: Initial evidence from a qualitative study of Saudi mothers. *Appetite*. 138 pp. 242–251.

El Mouzan, M., Al Herbish, A., Al Salloum, A., Al Omar, A. and Qurachi, M. (2012) Regional variation in prevalence of overweight and obesity in Saudi children and adolescents. *Saudi Journal of Gastroenterology*. 18 (2), pp. 129–132.

Muhamad, N., Khamarudin, M. and Fauzi, W.I.M. (2019) The role of religious motivation in an international consumer boycott. *British Food Journal*. 121 (1), pp. 199–217.

Munsell, C.R., Harris, J.L., Sarda, V. and Schwartz, M.B. (2016) Parents' beliefs about the healthfulness of sugary drink options: Opportunities to address misperceptions. *Public Health Nutrition*. 19 (1), pp. 46–54.

Murashima, M., Hoerr, S.L., Hughes, S.O. and Kaplowitz, S.A. (2012) Feeding behaviors of low-income mothers: Directive control relates to a lower BMI in children, and a nondirective control relates to a healthier diet in preschoolers. *American Journal of Clinical Nutrition*. 95 (5), pp. 1031–1037.

Murshid, E.Z. (2014) Diet, oral hygiene practices and dental health in autistic children in Riyadh, Saudi Arabia. *Oral health and dental management*. 13 pp. 91–96.

Musaiger, A.O. (1982) Factors influencing food consumption in Bahrain. *Ecology of Food and Nutrition*. 12 (1), pp. 39–48.

Musaiger, A.O. (1993) Socio-cultural and economic factors affecting food consumption patterns in the Arab countries. *The Journal of the Royal Society for the Promotion of Health*. 113 (2), pp. 68–74.

Musher-Eizenman, D.R., de Lauzon-Guillain, B., Holub, S.C., Leporc, E. and Charles, M.A. (2009) Child and parent characteristics related to parental feeding practices. A cross-cultural examination in the US and France. *Appetite*. 52 (1), pp. 89–95.

Mustafa, E. (2016) *Food acculturation of new international students in the UK*.

Mustafa, Y., Baker, D., Puligari, P., Melody, T., Yeung, J. and Gao-Smith, F. (2017) The role of imams and mosques in health promotion in Western societies-a systematic review protocol. *Systematic Reviews*. 6 (1), pp. 1–5.

Muswazi, M.T. and Nhamo, E. (2013) Note taking: A lesson for Novice qualitative researchers. *Journal of Research & Method in Education*. 2 (3), pp. 13–17.

Nadeau, J. and Bradley, M. (2012) Observing the influence of affective states on parent–child interactions and in-store purchase decisions. *Journal of Consumer Behaviour*. 11 (2), pp. 105–114.

Nasreddine, L., Ayoub, J.J. and Al Jawaldeh, A. (2018) Review of the nutrition situation in the eastern mediterranean region. *Eastern Mediterranean Health Journal*. 24 (1), pp. 77–91.

Nassif, A. and Gunter, B. (2008) Gender representation in television advertisements in Britain and Saudi Arabia. *Sex Roles* 58 (11–12) p.pp. 752–760.

Natow, R.S. (2020) The use of triangulation in qualitative studies employing elite interviews. *Qualitative Research*. 20 (2), pp. 160–173.

Nawab, S., Madan, J. and Moitra, P. (2019) Nutritional knowledge of the parents and home food environment of 10 to 12 year old children of Mumbai. *International Journal of Physiology, Nutrition and Physical Education*. 4 (2), pp. 114–119.

Neeley, S. (2005) Influences on consumer socialisation. *Young Consumers*. 6 (2), pp. 63–69.

Nepper, M.J. and Chai, W. (2016) Parents' barriers and strategies to promote healthy eating among school-age children. *Appetite*. 103 pp. 157–164.

Nes, F. van, Abma, T., Jonsson, H. and Deeg, D. (2010) Language differences in qualitative research: Is meaning lost in translation? *European Journal of Ageing*. 7 (4), pp. 313–316.

Neumark-sztainer, D., Story, M., Perry, C. and Casey, M.A. (1999) Factors influencing food choices of adolescents: findings from focus-group discussions with adolescents. *Journal of the American dietetic association*. 99 (8), pp. 929–937.

Neumark-Sztainer, D., Wall, M., Perry, C. and Story, M. (2003) Correlates of fruit and vegetable intake among adolescents: Findings from Project EAT. *Preventive Medicine*. 37 (3), pp. 198–208.

Ng, S.W., Zaghloul, S., Ali, H.I., Harrison, G. and Popkin, B.M. (2011) The prevalence and trends of overweight, obesity and nutrition-related non-communicable diseases in the Arabian Gulf States. *Obesity Reviews*. 12 (1), pp. 1–13.

Nicklas, T.A., Baranowski, T., Baranowski, J.C., Cullen, K., Rittenberry, L. and Olvera, N. (2009) Family and child-care provider influences on preschool children's fruit, juice, and vegetable consumption. *Nutrition Reviews*. 59 (7), pp. 224–235.

Nicoll, H. (2010) Diaries as a method of data collection in research. *Pediatric nursing*. 22 (7), pp. 16–20.

Nørgaard, M. and Brunsø, K. (2011) Family conflicts and conflict resolution regarding food choices. *Journal of Consumer Behaviour*. 10 (3), pp. 141–151.

Nørgaard, M.K., Bruns, K., Christensen, P.H. and Mikkelsen, M.R. (2007) Children's influence on and participation in the family decision process during food buying. *Young Consumers*. 8 (3), pp. 197–216.

Northstone, K. and Emmett, P. (2005) Multivariate analysis of diet in children at four and seven years of age and associations with socio-demographic characteristics. *European Journal of Clinical Nutrition*. 59 (6), pp. 751–760.

O'Connell, R. and Brannen, J. (2014) Children's food, power and control: Negotiations in families with younger children in England. *Childhood*. 21 (1), pp. 87–102.

O'Dea, J.A. (2003) Why do kids eat healthful food? Perceived benefits of and barriers to healthful eating and physical activity among children and adolescents. *Journal of the American Dietetic Association*. 103 (4), pp. 497–501.

O'Dougherty, M., Story, M. and Stang, J. (2006) Observations of parent-child co-shoppers in supermarkets: Children's involvement in food selections, parental yielding, and refusal strategies. *Journal of Nutrition Education and Behavior*. 38 (3), pp. 183–188.

O'Malley, L. and Prothero, A. (2006) Consuming families: Marketing, consumption and the role of families in the twenty-first century. *Journal of Marketing Management*. 22 (9–10), pp. 899–905.

Oellingrath, I.M., Hersleth, M. and Svendsen, M. V. (2013) Association between parental motives for food choice and eating patterns of 12-to 13-year-old Norwegian children. *Public Health Nutrition*. 16 (11), pp. 2023–2031.

Ogle, J.P., Hyllegard, K.H. and Yan, R.-N. (2014) An investigation of mothers' and tween daughters' clothing preferences and purchase intentions toward a prosocial clothing company. *Journal of Fashion Marketing and Management*. 18 (1), pp. 70–84.

Ohly, H., Pealing, J., Hayter, A.K.M., Pettinger, C., Pikhart, H., Watt, R.G. and Rees, G. (2013) Parental food involvement predicts parent and child intakes of fruits and vegetables. *Appetite*. 69 pp. 8–14.

Orrell-valente, J.K., Hill, L.G., Brechwald, W.A., Dodge, K.A., Pettit, G.S. and Bates, J.E. (2007) '"Just three more bites"': An observational analysis of parents 'socialization of children's eating at mealtime. *Appetite*. 48 pp. 37–45.

Otnes, C., McGrath, M.A. and Lowrey, T.M. (1995) Shopping with consumers usage as past, present and future research technique. *Journal of Retailing and Consumer Services*. 2 (2), pp. 97–110.

Owen, J., Metcalfe, A., Dryden, C. and Shipton, G. (2010) 'If they don't eat it, it's not a proper meal': Images of risk and choice in fathers' accounts of family food practices. *Health, Risk and Society*. 12 (4), pp. 395–406.

Paes, V.M., Ong, K.K. and Lakshman, R. (2015) Factors influencing obesogenic dietary intake in young children (0-6 years): Systematic review of qualitative evidence. *BMJ Open*. 5 (9), pp. 1–9.

Page, B., Sharp, A., Lockshin, L. and Sorensen, H. (2018) Parents and children in supermarkets: Incidence and influence. *Journal of Retailing and Consumer Services*. 40 pp. 31–39.

Page, B., Sharp, A., Lockshin, L. and Sorensen, H. (2019) Using the eyberg child behaviour inventory to investigate pester power. *Journal of Retailing and Consumer Services*. 47 pp. 265–271.

Palan, K.M. (2001) The influence of parental style on strategy usage of parents and children in family decision making. *Advances in Consumer Research*. 28 (1), pp. 16–19.

Palan, K.M. and Wilkes, R.E. (1997) Adolescent-parent interaction in family decision making. *Journal of Consumer Research*. 24 (2), pp. 159–169.

Palan, M.K. (1998) Relationships between family communication and consumer activities of adolescents: An exploratory study. *The Journal of Social Psychology*. 26 (4), pp. 339–349.

Palfreyman, Z., Haycraft, E. and Meyer, C. (2014) Development of the parental modelling of eating behaviours scale (PARM): Links with food intake among children and their mothers. *Maternal and Child Nutrition*. 10 (4), pp. 617–629.

Palojoki, P. and Tuomi-Gröhn, T. (2001) The complexity of food choices in an everyday context. *International Journal of Consumer Studies*. 25 (1), pp. 15–23.

Paquette, M.-C. (2005) Perceptions of Healthy Eating. *Canadian Journal of Public Health*. 96 pp. S15–S19.

Parada, H., Ayala, G.X., Horton, L.A., Ibarra, L. and Arredondo, E.M. (2016) Latino fathers' feeding-related parenting strategies on children's eating. *Ecology of Food and Nutrition*. 55 (3), pp. 292–307.

Park, S.H. and Cormier, E. (2018) Influence of siblings on child health behaviors and obesity: A systematic review. *Journal of Child and Family Studies*. 27 (7), pp. 2069–2081.

Paroche, M.M., Caton, S.J., Vereijken, C.M.J.L., Weenen, H. and Houston-Price, C. (2017) How infants and young children learn about food: A systematic review. *Frontiers in Physiology*. 8 pp. 1–33.

Patrick, H. and Nicklas, T.A. (2005) A review of family and social determinants of children's eating patterns and diet quality. *Journal of the American College of Nutrition*. 24 (2), pp. 83–92.

Patton, M.Q. (2014) *Qualitative Research & Evaluation Methods: Integrating Theory and Practice*. 4th edition. California: Sage Publications.

Paulus, T.M., Woodside, M. and Ziegler, M.F. (2010) 'I tell you, it's a journey, isn't it?' understanding collaborative meaning making in qualitative research. *Qualitative Inquiry*. 16 (10), pp. 852–862.

Pearson, N., Biddle, S.J.H. and Gorely, T. (2009) Family correlates of fruit and vegetable consumption in children and adolescents: A systematic review. *Public Health Nutrition*. 12 (2), pp. 267–283.

Pearson, N., Timperio, A., Salmon, J., Crawford, D. and Biddle, S.J.H. (2009) Family influences on children's physical activity and fruit and vegetable consumption. *International Journal of Behavioral Nutrition and Physical Activity*. 6 (1), pp. 1–7.

Pedersen, S., Grønhøj, A. and Bech-Larsen, T. (2012) Family members' roles in healthy-eating socialization based on a healthy-eating intervention. *Young Consumers*. 13 (3), pp. 208–223.

Persky, S., Goldring, M.R., Turner, S.A., Cohen, R.W. and Kistler, W.D. (2018) Validity of assessing child feeding with virtual reality. *Appetite*. 123 pp. 201-207.

Peters, J., Parletta, N., Lynch, J. and Campbell, K. (2014) A comparison of parental views of their pre-school children's 'healthy' versus 'unhealthy' diets. A qualitative study. *Appetite*. 76 pp. 129–136.

Pettersson, A., Olsson, U. and Fjellström, C. (2004) Family life in grocery stores–a study of interaction between adults and children. *International Journal of Consumer Studies*. 28 (4), pp. 317–328.

Pettigrew, S., Jongenelis, M., Chapman, K. and Miller, C. (2015a) Factors influencing the frequency of children's consumption of soft drinks. *Appetite*. 91 pp. 393–398.

Pettigrew, S., Jongenelis, M., Miller, C. and Chapman, K. (2017) A path analysis model of factors influencing children's requests for unhealthy foods. *Eating Behaviors*. 24 pp. 95–101.

Pettigrew, S., Jongenelis, M., Quester, P., Chapman, K. and Miller, C. (2015b) Dimensions of parents' attitudes to unhealthy foods and beverages. *Food Quality and Preference*. 44 pp. 179–182.

Pettigrew, S., Tarabashkina, L., Roberts, M., Quester, P., Chapman, K. and Miller, C. (2013) The effects of television and Internet food advertising on parents and children. *Public Health Nutrition*. 16 (12), pp. 2205–2212.

Philippe, K., Chabanet, C., Issanchou, S. and Monnery-Patris, S. (2021) Child eating behaviors, parental feeding practices and food shopping motivations during the COVID-19 lockdown in France: (How) did they change? *Appetite*. 161 pp. 105132.

Phillippi, J. and Lauderdale, J. (2018) A guide to field notes for qualitative research: Context and conversation. *Qualitative Health Research*. 28 (3), pp. 381–388.

Piaget, J. (1964) Cognitive development in children: Piaget: Development and learning. *Journal of research in science teaching*. 2 (3), pp. 176–186.

Pocock, M., Trivedi, D., Wills, W., Bunn, F. and Magnusson, J. (2010) Parental perceptions regarding healthy behaviours for preventing overweight and obesity in young children: a systematic review of qualitative studies. *Obesity Reviews*. 11 (5), pp. 338–353.

Poelman, A.A.M. and Delahunty, C.M. (2011) The effect of preparation method and typicality of colour on children's acceptance for vegetables. *Food Quality and Preference*. 22 (4), pp. 355–364.

Pollard, J., Kirk, S.F.L. and Cade, J.E. (2002) Factors affecting food choice in relation to fruit and vegetable intake: A review. *Nutrition Research Reviews*. 15 (02), pp. 373–388.

Power, Z., Campbell, M., Kilcoyne, P., Kitchener, H. and Waterman, H. (2010) The hyperemesis impact of symptoms questionnaire: Development and validation of a clinical tool. *International Journal of Nursing Studies*. 47 (1), pp. 67–77.

Pratt, T.C., Cullen, F.T., Sellers, C.S., Winfree, L.T., Madensen, T.D., Daigle, L.E., Fearn, N.E. and Gau, J.M. (2010) The empirical status of social learning theory: A meta-analysis. *Justice Quarterly*. 27 (6), pp. 765–802.

Pula, K., Parks, C.D. and Ross, C.F. (2014) Regulatory focus and food choice motives. Prevention orientation associated with mood, convenience, and familiarity. *Appetite*. 78 pp. 15–22.

Quintero-Angel, M., Mendoza, D.M. and Quintero-Angel, D. (2019) The cultural transmission of food habits, identity, and social cohesion: A case study in the rural zone of Cali-Colombia. *Appetite*. 139 pp. 75–83.

Quoquab, F., Mohamed Sadom, N.Z. and Mohammad, J. (2019) Driving customer loyalty in the Malaysian fast food industry: The role of halal logo, trust and perceived reputation. *Journal of Islamic Marketing*. 11 (6), pp. 1367–1387.

Rabionet, S.E. (2011) How I learned to design and conduct semi-structured interviews: An ongoing and continuous journey. *Qualitative Report*. 16 (2), pp. 563–566.

Rachmi, C.N., Hunter, C.L., Li, M. and Baur, L.A. (2018) Food choices made by primary carers (mothers/ grandmothers) in West Java, Indonesia. *Appetite*. 130 (38), pp. 84–92.

Ragelienė, T. and Grønhøj, A. (2020) The influence of peers′ and siblings′ on children's and adolescents′ healthy eating behavior. A systematic literature review. *Appetite*. 148 pp. 1–19.

Ragelienė, T. and Grønhøj, A. (2021) The role of peers, siblings and social media for children's healthy eating socialization: A mixed methods study. *Food Quality and Preference*. 93 pp. 104255.

Rahill, S., Kennedy, A. and Kearney, J. (2020) A review of the influence of fathers on children's eating behaviours and dietary intake. *Appetite*. 147 pp. 104540.

Ramzy, O., Ogden, D.T., Ogden, J.R. and Zakaria, M.Y. (2012) Perceptions of children's influence on purchase decisions smpirical investigation for the U.S. and Egyptian families. *World Journal of Management*. 4 (1), pp. 30–50.

Raskind, I.G., Woodruff, R.C., Ballard, D., Cherry, S.T., Daniel, S., Haardörfer, R. and Kegler, M.C. (2017) Decision-making processes shaping the home food environments of young adult women with and without children. *Appetite*. 113 pp. 124–133.

Rathi, N., Riddell, L. and Worsley, A. (2020) "Do you think adolescents' food intake is

satisfactory?" – Views of Indian parents and teachers. *Appetite*. 153 pp. 104740.

Rawlins, E., Baker, G., Maynard, M. and Harding, S. (2013) Perceptions of healthy eating and physical activity in an ethnically diverse sample of young children and their parents: The DEAL prevention of obesity study. *Journal of Human Nutrition and Dietetics*. 26 (2), pp. 132–144.

Reale, G. and Castilhos, R.B. (2015) Consumer socialization and intergenerational brand loyalty in the context of soccer. *Advances in Consumer Research*. 43 pp. 399–403.

Renzaho, A.M.N., Dau, A., Cyril, S. and Ayala, G.X. (2014) The influence of family functioning on the consumption of unhealthy foods and beverages among 1- to 12-y-old children in Victoria, Australia. *Nutrition*. 30 (9), pp. 1028–1033.

Resnicow, K., Davis-Hearn, M., Smith, M., Baranowski, T., Lin, L.S., Baranowski, J., Doyle, C. and Wang, D.T. (1997) Social-cognitive predictors of fruit and vegetable intake in children. *Health psychology : official journal of the Division of Health Psychology, American Psychological Association*. 16 (3), pp. 272–276.

Rhodes, K., Chan, F., Prichard, I., Coveney, J., Ward, P. and Wilson, C. (2016) Intergenerational transmission of dietary behaviours: A qualitative study of Anglo-Australian, Chinese-Australian and Italian-Australian three-generation families. *Appetite*. 103 pp. 309–317.

Rigal, N., Chabanet, C., Issanchou, S. and Monnery-Patris, S. (2012) Links between maternal feeding practices and children's eating difficulties. Validation of French tools. *Appetite*. 58 (2), pp. 629–637.

Roach, E., Viechnicki, G.B., Retzloff, L.B., Davis-Kean, P., Lumeng, J.C. and Miller, A.L. (2017) Family food talk, child eating behavior, and maternal feeding practices. *Appetite*. 117 pp. 40–50.

Roberts, E.M. (2006) Negotiating food choice: parents' Perception of children's eating behaviour. *Antropological notebooks*. 12 (1), pp. 63–77.

Roberts, L., Marx, J.M. and Musher-Eizenman, D.R. (2018) Using food as a reward: An examination of parental reward practices. *Appetite*. 120 pp. 318–326.

Rodenburg, G., Oenema, A., Kremers, S.P.J. and van de Mheen, D. (2012) Parental and child fruit consumption in the context of general parenting, parental education and ethnic background. *Appetite*. 58 (1), pp. 364–372.

Roedder, D.L., Didow, N.M. and Calder, B.J. (1978) A Review of Formal Theories of Consumer Socialization. *Advances in Consumer Research*. 5 (1), pp. 528–534.

Rogan, D., Piacentini, M. and Hopkinson, G. (2018) Intercultural household food tensions: a relational dialectics analysis. *European Journal of Marketing*. 52 (12), pp. 2289–2311.

Rogers, E., Bell, L. and Mehta, K. (2019) Exploring the role of grandparents in the feeding of grandchildren aged 1–5 years. *Journal of Nutrition Education and Behavior*. 51 (3), pp. 300–306.

Román, S. and Sánchez-Siles, L.M. (2018) Parents' choice criteria for infant food brands: A scale development and validation. *Food Quality and Preference*. 64 pp. 1–10.

Rose, G.M. (1999) Consumer socialization, parental style, and developmental timetables in the United States and Japan. *Journal of Marketing*. 63 pp. 105–119.

Rose, G.M., Bush, V.D. and Kahle, L. (1998) The Influence of Family Communication Patterns on Parental Reactions toward Advertising: A Cross- National Examination. *Journal of Advertising*. 27 (4), pp. 71–85.

Rose, H. (2020) Diaries and Journals: Collecting Insider Perspectives in Second Language Research. In: *Routledge Handbook of Research Methods in Applied*

Linguistics. Abingdon: Routledge Taylor & Francis Group. pp. 348–356.

Rosenthal, T.L., Bandura, A., Garfield, S.L. and Bergin, A.E. (1978) *Handbook of psychotherapy and behavior change*.

Roudsari, A., Vedadhir, A., Amiri, P., Kalantari, N., Omidvar, N., Eini-Zinab, H. and Sadati, S. (2017) Psycho-socio-cultural determinants of food choice: A qualitative study on adults in social and cultural context of Iran. *Iranian Journal of Psychiatry*. 12 (4), pp. 238–247.

Roudsari, A.H., Vedadhir, A., Rahmani, J. and Bonab, A.M. (2019) Explaining the barriers and facilitators of ethnic and traditional food choices from the viewpoints of women. *Journal of Ethnic Foods*. 6 (1), pp. 1–8.

Rowley, J. (2012) Conducting research interviews. *Management Research Review*. 35 (3–4), pp. 260–271.

Russell, C.G. and Worsley, A. (2007) Do children's food preferences align with dietary recommendations? *Public Health Nutrition*. 10 (11), pp. 1223–1233.

Russell, C.G., Worsley, A. and Campbell, K.J. (2015) Strategies used by parents to influence their children's food preferences. *Appetite*. 90 pp. 123–130.

Russell, C.G., Worsley, A. and Liem, D.G. (2013) A cross-sectional study of parents' food choice motives and children's food preferences. *Appetite*. 66 pp. 34–43.

Russell, C.G., Worsley, A. and Liem, D.G. (2015) Parents' food choice motives and their associations with children's food preferences. *Public Health Nutrition*. 18 (6), pp. 1018–1027.

Sadruddin, A.F.A., Ponguta, L.A., Zonderman, A.L., Wiley, K.S., Grimshaw, A. and Panter-Brick, C. (2019) How do grandparents influence child health and development? A systematic review. *Social Science and Medicine*. 239 pp. 112476.

Saldaña, J. (2016) *The Coding Manual for Qualitative Researchers*. 3rd edition. London: Sage Publications.

Saltzman, J.A., Musaad, S., Bost, K.K., McBride, B.A. and Fiese, B.H. (2019) Associations between father availability, mealtime distractions and routines, and maternal feeding responsiveness: An observational study. *Journal of Family Psychology*. 33 (4), pp. 465–475.

Sandelowski, M. (1995) Sample size in qualitative research. *Research in nursing & health*. 18 (2), pp. 197–183.

Sanders, M.R. and Woolley, M.L. (2005) The relationship between maternal self-efficacy and parenting practices: Implications for parent training. *Child: Care, Health and Development*. 31 (1), pp. 65–73.

Sano, Y., Routh, B. and Lanigan, J. (2019) Food parenting practices in rural poverty context. *Appetite*. 135 pp. 115–122.

Sari, D.K., Mizerski, D. and Liu, F. (2017) Boycotting foreign products: a study of Indonesian Muslim consumers. *Journal of Islamic Marketing*. 8 (1), pp. 16–34.

Saudi Vision 2030 (2016) *Vison 2030*.

Saunders, M.N.K., Lewis, P. and Thornhill, A. (2015) *Research Methods for Business Students*. 7th edition. London: Pearson Higher Ed.

Savage, J.S., Fisher, J.O. and Birch, L.L. (2007) Parental influence on eating behavior: Conception to adolescence. *The Journal of Law, Medicine & Ethics*. 35 (1), pp. 22–34.

Scaglioni, S., De Cosmi, V., Ciappolino, V., Parazzini, F., Brambilla, P. and Agostoni, C. (2018) Factors influencing children's eating behaviours. *Nutrients*. 10 (6), pp. 1–17.

Scaglioni, S., Salvioni, M. and Galimberti, C. (2008) Influence of parental attitudes in the development of children eating behaviour. *British Journal of Nutrition*. 29 (1),

pp. 22–25.

Schiffrin, H.H., Liss, M., Geary, K., Miles-McLean, H., Tashner, T., Hagerman, C. and Rizzo, K. (2014) Mother, father, or parent? college students' intensive parenting attitudes differ by referent. *Journal of Child and Family Studies*. 23 (6), pp. 1073–1080.

Schindler, R.M., Lala, V. and Corcoran, C. (2014) Intergenerational influence in consumer deal proneness. *Psychology and Marketing*. 31 (5), pp. 307–320.

Scott, M.L. and Vallen, B. (2019) Expanding the lens of food well-being: An examination of contemporary marketing, policy, and practice with an eye on the future. *Journal of Public Policy & Marketing*. 38 (2), pp. 127–135.

Seale, C. (2004) *Social Research Methods: A Reader*. London: Rutledge.

Secinaro, S. and Calandra, D. (2020) Halal food: structured literature review and research agenda. *British Food Journal*. 123 (1), pp. 225–243.

Seiders, K. and Petty, R.D. (2004) Obesity and the role of food marketing: A policy analysis of issues and remedies. *Journal of Public Policy & Marketing*. 23 (2), pp. 153–169.

Shah, R. and Mittal, B. (1997) Toward a theory of intergenerational influence in consumer behavior: An exploratory essay. *Advances in Consumer Research*. 24 (Ward 1974), pp. 55–60.

Al Shehri, A., Al Alwan, I. and Al Fattani, A. (2013) Obesity among Saudi children. *Saudi Journal of Obesity*. 1 (1), pp. 3–9.

Shenton, A.K. (2004) Strategies for ensuring trustworthiness in qualitative research projects. *Education for Information*. 22 (2), pp. 63–75.

Shtulman, A., Share, I., Silber-Marker, R. and Landrum, A.R. (2020) OMG GMO! Parent-child conversations about genetically modified foods. *Cognitive Development*. 55 pp. 100895.

Silverman, D. (2017) *Doing Qualitative Research.* 5th edition. London: SAGE Publications.

Sirasa, F., Mitchell, L., Silva, R. and Harris, N. (2020) Factors influencing the food choices of urban Sri Lankan preschool children: Focus groups with parents and caregivers. *Appetite*. 150 pp. 104649.

Smathers, C., Pirie, P., Leser, K. and Liu, S. (2014) Restrict the Pouch: Parental Rules Limiting Sugar-Sweetened Beverage Consumption Among Preschool Age Children. *Journal of Nutrition Education and Behavior*. 46 (4), pp. S168.

Soares, A.L.G., de França, G.V.A. and Gonçalves, H. (2014) Household food availability in Pelotas, Brazil: An approach to assess the obesogenic environment. *Revista de Nutricao*. 27 (2), pp. 193–203.

Sojka, J. and Spangenberg, E.R. (1994) Ethical concerns in marketing research. *Advances in Consumer Research*. 21 (1), pp. 392–996.

Sonntag, D., Schneider, S., Mdege, N., Ali, S. and Schmidt, B. (2015) Beyond food promotion: A systematic review on the influence of the food industry on obesity-related dietary behaviour among children. *Nutrients*. 7 (10), pp. 8565–8576.

Soon, J.M., Chandia, M. and Regenstein, J.M. (2017) Halal integrity in the food supply chain. *British Food Journal*. 119 (1), pp. 39–51.

Statista (2021) *Leading countries based on Snapchat audience size as of January 2021*. Available from: https://www.statista.com/statistics/315405/snapchat-user-region-distribution/.

Steenhuis, I.H.M., Waterlander, W.E. and De Mul, A. (2011) Consumer food choices: The role of price and pricing strategies. *Public Health Nutrition*. 14 (12), pp. 2220–2226.

Steptoe, A., Pollard, T.M. and Wardle, J. (1995a) Development of a measure of the motives underlying the selection of food: The food choice questionnaire. *Appetite*. 25 pp. 267–284.

Steptoe, A., Pollard, T.M. and Wardle, J. (1995b) The association for the study of food and society & the agriculture, food and human values society : Joint annual meeting 2002. *Appetite*. 25 (3), pp. 267–290.

Stewart, S.D. and Menning, C.L. (2009) Family structure, nonresident father involvement, and adolescent eating patterns. *Journal of Adolescent Health*. 45 (2), pp. 193–201.

Strauss, A.L. (1987) *Qualitative Analysis for Social Scientists*. Cambridge, UK: Cambridge university press.

Sutherland, L.A., Beavers, D.P., Kupper, L.L., Bernhardt, A.M., Heatherton, T. and Dalton, M.A. (2008) Like parent, like child. *Archives of Pediatrics & Adolescent Medicine*. 162 (11), pp. 1063–1096.

Sutton, J. and Austin, Z. (2015) Qualitative reserch: data collection,analysis,and managment. *The Canadian Journal of Hospital Pharmacy*. 68 (3), pp. 226–231.

Swindle, T., McBride, N.M., Staley, A., Phillips, C.A., Rutledge, J.M., Martin, J.R. and Whiteside-Mansell, L. (2020) Pester power: Examining children's influence as an active intervention ingredient. *Journal of Nutrition Education and Behavior*. 52 (8), pp. 801–807.

Szmigin, I. and Foxall, G. (2000) Interpretive consumer research: How far have we come? *Qualitative Market Research: An International Journal*. 3 (4), pp. 187–197.

Taghavi, M.S. and Seyedsalehi, A. (2015) The effect of packaging and brand on children's and parents' purchasing decisions and the moderating role of pester power. *British Food Journal*. 117 (8), pp. 2017–2038.

Taillie, L.S., Ng, S.W., Xue, Y. and Harding, M. (2017) Deal or no deal? The prevalence and nutritional quality of price promotions among U.S. food and beverage purchases. *Appetite*. 117 pp. 365–372.

Talukdar, D. and Lindsey, C. (2013) To buy or not to buy: Consumers' demand response patterns for healthy versus unhealthy food. *Journal of Marketing*. 77 (2), pp. 124–138.

Tarabashkina, L., Quester, P. and Crouch, R. (2016) Exploring the moderating effect of children's nutritional knowledge on the relationship between product evaluations and food choice. *Social Science and Medicine*. 149 (1), pp. 145–152.

Tarabashkina, L., Quester, P.G. and Crouch, R. (2017) Children and energy-dense foods – parents, peers, acceptability or advertising? *European Journal of Marketing*. 51 (9/10), pp. 1669–1694.

Thomas, A. and Garland, R. (1993) Supermarket shopping lists: Their effect on consumer expenditure. *International Journal of Retail & Distribution Management*. 21 (2), pp. 8–14.

Thomas, S.L., Olds, T., Pettigrew, S., Randle, M. and Lewis, S. (2014) 'Don't eat that, you'll get fat!' exploring how parents and children conceptualise and frame messages about the causes and consequences of obesity. *Social Science and Medicine*. 119 pp. 114–122.

Touyz, L.M., Wakefield, C.E., Grech, A.M., Quinn, V.F., Costa, D.S.J., Zhang, F.F., Cohn, R.J., Sajeev, M. and Cohen, J. (2018) Parent-targeted home-based interventions for increasing fruit and vegetable intake in children: A systematic review and meta-analysis. *Nutrition Reviews*. 76 (3), pp. 154–173.

Tracy, S.J. (2010) Qualitative quality: Eight a"big-tent" criteria for excellent qualitative

research. *Qualitative Inquiry*. 16 (10), pp. 837–851.

Tronvoll, B., Brown, S.W., Gremler, D.D. and Edvardsson, B. (2011) Paradigms in service research. *Journal of Service Management*. 22 (5), pp. 560–585.

Tschann, J.M., Gregorich, S.E., Penilla, C., Pasch, L.A., de Groat, C.L., Flores, E., Deardorff, J., Greenspan, L.C. and Butte, N.F. (2013) Parental feeding practices in Mexican American families: Initial test of an expanded measure. *International Journal of Behavioral Nutrition and Physical Activity*. 10 (6), pp. 1–11.

Tschann, J.M., Martinez, S.M., Penilla, C., Gregorich, S.E., Pasch, L.A., de Groat, C.L., Flores, E., Deardorff, J., Greenspan, L.C. and Butte, N.F. (2015) Parental feeding practices and child weight status in Mexican American families: A longitudinal analysis. *International Journal of Behavioral Nutrition and Physical Activity*. 12 (1), pp. 1–10.

Tu, C.H. (2000) On-line learning migration: From social learning theory to social presence theory in a CMC environment. *Journal of Network and Computer Applications*. 23 (1), pp. 27–37.

Tuncalp, S. and Yavas, U. (1990) Food shopping behavior in the Arabian Gulf region: A comparative study. *The International Review of Retail, Distribution and Consumer Research*. 1 (1), pp. 55–70.

Turner, J.J., Kelly, J. and McKenna, K. (2006) Food for thought: Parents' perspectives of child influence. *British Food Journal*. 108 (3), pp. 181–191.

Turrell, G., Hewitt, B., Patterson, C., Oldenburg, B. and Gould, T. (2002) Socioeconomic differences in food purchasing behaviour and suggested implications for diet-related health promotion. *Journal of Human Nutrition and Dietetics*. 15 (5), pp. 355–364.

Turrell, G. and Kavanagh, A.M. (2006) Socio-economic pathways to diet: modelling the association between socio-economic position and food purchasing behaviour. *Public health nutrition*. 9 (3), pp. 375–383.

Unusan, N. (2006) University students' food preference and practice now and during childhood. *Food Quality and Preference*. 17 (5), pp. 362–368.

Vartanian, L.R. (2015) Impression management and food intake. Current directions in research. *Appetite*. 86 pp. 74–80.

Vasileiou, K., Barnett, J., Thorpe, S. and Young, T. (2018) Characterising and justifying sample size sufficiency in interview-based studies: Systematic analysis of qualitative health research over a 15-year period. *BMC Medical Research Methodology*. 18 (1), pp. 1–18.

Vaughn, A.E., Martin, C.L. and Ward, D.S. (2018) What matters most - what parents model or what parents eat? *Appetite*. 126 pp. 1–13.

Vaughn, A.E., Ward, D.S., Fisher, J.O., Faith, M.S., Hughes, S.O., Kremers, S.P.J., Musher-Eizenman, D.R., O'Connor, T.M., Patrick, H. and Power, T.G. (2016) Fundamental constructs in food parenting practices: A content map to guide future research. *Nutrition Reviews*. 74 (2), pp. 98–117.

Vel, P., Mathew, P. and Shirkhodaee, E. (2016) Social marketing, pester power and reverse socialisation. *The Marketing Review*. 16 (4), pp. 433–449.

Verzeletti, C., Maes, L., Santinello, M., Baldassari, D. and Vereecken, C.A. (2010) Food-related family lifestyle associated with fruit and vegetable consumption among young adolescents in Belgium Flanders and the Veneto Region of Italy. *Appetite*. 54 (2), pp. 394–397.

Vilaro, M.J., Barnett, T.E., Mathews, A., Pomeranz, J. and Curbow, B. (2016) Income differences in social control of eating behaviors and food choice priorities among southern rural women in the US: A qualitative study. *Appetite*. 107 pp. 604–612.

Vilela, S., Oliveira, A., Pinto, E., Moreira, P., Barros, H. and Lopes, C. (2015) The influence of socioeconomic factors and family context on energy-dense food consumption among 2-year-old children. *European Journal of Clinical Nutrition*. 69 (1), pp. 47–54.

Vohra, J. and Soni, P. (2015) Logit modelling of food shopping behaviour of children in retail stores. *Management Research Review*. 38 (8), pp. 840–854.

Vollmer, R.L. (2019) Parental feeding style changes the relationships between children's food preferences and food parenting practices: The case for comprehensive food parenting interventions by pediatric healthcare professionals. *Journal for Specialists in Pediatric Nursing*. 24 (1–9), .

Vollmer, R.L. (2021) The relationship between parental food parenting practices & child eating behavior : A comparison of mothers and fathers. *Appetite*. 162 pp. 1–6.

Vollmer, R.L. and Baietto, J. (2017) Practices and preferences: Exploring the relationships between food-related parenting practices and child food preferences for high fat and/or sugar foods, fruits, and vegetables. *Appetite*. 113 pp. 134–140.

Wahyuni, D. (2012) The research design maze: understanding paradigms, cases, methods and methodologies. *Journal of Applied Management Accounting Research*. 10 (1), pp. 69–80.

Walsh, A., Meagher-Stewart, D. and Macdonald, M. (2015) Persistent optimizing: How mothers make food choices for their preschool children. *Qualitative Health Research*. 25 (4), pp. 527–539.

Walsh, A.D., Hesketh, K.D., Van Der Pligt, P., Cameron, A.J., Crawford, D. and Campbell, K.J. (2017) Fathers' perspectives on the diets and physical activity behaviours of their young children. *PLoS ONE*. 12 (6), pp. 1–19.

Walsh, A.D., Laczniak, R.N. and Carlson, L. (1998) Mothers' preferences for regulating children's television. *Journal of Advertising*. 27 (3), pp. 23–36.

Wang, D., van der Horst, K., Jacquier, E. and Eldridge, A.L. (2016) Snacking among US children: Patterns differ by time of day. *Journal of Nutrition Education and Behavior*. 48 (6), pp. 369–375.

Wang, L.C., Chen, K.R. and Yang, F. Lo (2020) Intergenerational comparison of food parenting of home eating behaviors of schoolchildren. *Journal of Nutrition Education and Behavior*. pp. 1–12.

Wang, N., Roaché, D.J. and Pusateri, K.B. (2018) Associations Between Parents' and Young Adults' Face-to-Face and Technologically Mediated Communication Competence: The Role of Family Communication Patterns. *Communication Research*. pp. 1–26.

Ward, S. (1974) Consumer socialization. *Journal of Consumer Research*. 1 (2), pp. 1–14.

Ward, S., Klees, D.M. and Robertson, T.S. (1987) Consumer socialization in different settings: An international perspective. *Advances in Consumer Research*. 14 pp. 468–472.

Ward, S. and Wackman, D. (1974) Consumer socialization: Initial study results *Advances in Consumer Research* 1 (1) p.pp. 120–125.

Ward, S., Wackman, D. and Wartella, E. (1977) The development of consumer information-processing skills: integrating cognitive development and family interaction theories. *Advances in Consumer*. 4 pp. 166–171.

Ward, S. and Wackman, D.B. (1972) Children's purchase influence attempts and parental yielding. *Journal of Marketing Research*. 9 (3), pp. 316–319.

Wardle, J. (1995) Parental influences on children's diets. *Proceedings of the Nutrition*

Society. 54 (3), pp. 747–758.

Watterworth, J.C., Hutchinson, J.M., Buchholz, A.C., Darlington, G., Simpson, J.A.R., Ma, D.W.L. and Haines, J. (2017) Food parenting practices and their association with child nutrition risk status: Comparing mothers and fathers. *Applied Physiology, Nutrition and Metabolism*. 42 (6), pp. 667–671.

Werle, C.O.C., Trendel, O. and Ardito, G. (2013) Unhealthy food is not tastier for everybody: The ' healthy = tasty' French intuition. *Food Quality and Preference*. 28 (1), pp. 116–121.

WHO (2019) Healthy Diet *World Health Organisationation*.

WHO (2018) *Noncommunicable diseases country profiles 2018*. Available from: https://www.who.int/nmh/publications/ncd-profiles-2018/en/.

WHO (2020) *Obesity and overweight*. Available from: https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight.

Wiggins, S. (2014) Adult and child use of love, like, don't like and hate during family mealtimes. Subjective category assessments as food preference talk. *Appetite*. 80 pp. 7–15.

Wiles, R., Crow, G., Heath, S. and Charles, V. (2008) The management of confidentiality and anonymity in social research. *International Journal of Social Research Methodology*. 11 (5), pp. 417–428.

Williams, J., Ashill, N. and Thirkell, P. (2016) How is value perceived by children? *Journal of Business Research*. 69 (12), pp. 5875–5885.

Williams, J., Gazley, A. and Ashill, N. (2020) Children's perceived value: Conceptualization, scale development, and validation. *Journal of Retailing*. pp. 1–15.

Williams, R. (2008) The epistemology of knowledge and the knowledge process cycle: Beyond the 'objectivist' vs 'interpretivist'. *Journal of Knowledge Management*. 12 (4), pp. 72–85.

Wilson, G. and Wood, K. (2004) The influence of children on parental purchases during supermarket shopping. *International Journal of Consumer Studies*. 28 (4), pp. 329–336.

Wilson, J.A.J. and Liu, J. (2010) Shaping the Halal into a brand? *Journal of Islamic Marketing*. 1 (2), pp. 107–123.

Wilson, J.A.J. and Liu, J. (2011) The challenges of Islamic branding: Navigating emotions and halal. *Journal of Islamic Marketing*. 2 (1), pp. 28–42.

Wingert, K., Zachary, D.A., Fox, M., Gittelsohn, J. and Surkan, P.J. (2014) Child as change agent. The potential of children to increase healthy food purchasing. *Appetite*. 81 pp. 330–336.

Woodruffe-Burton, H. and Wakenshaw, S. (2011) Revisiting experiential values of shopping: Consumers' self and identity. *Marketing Intelligence and Planning*. 29 (1), pp. 69–85.

Xin, J., Zhao, L., Wu, T., Zhang, L., Li, Y., Xue, H., Xiao, Q., Wang, R., Xu, P., Visscher, T., Ma, X. and Jia, P. (2019) Association between access to convenience stores and childhood obesity: A systematic review. *Obesity Reviews*. (May), pp. 1–25.

Yang, Z., Kim, C., Laroche, M. and Lee, H. (2014) Parental style and consumer socialization among adolescents: A cross-cultural investigation. *Journal of Business Research*. 67 (3), pp. 228–236.

Yavas, U., Babakus, E. and Delener, N. (1994) Family purchasing roles in Saudi Arabia: Perspectives from Saudi wives. *Journal of Business Research*. 31 (1), pp. 75–86.

Yee, A.Z.H., Lwin, M.O. and Ho, S.S. (2017) The influence of parental practices on child promotive and preventive food consumption behaviors: A systematic review and meta-analysis. *International Journal of Behavioral Nutrition and Physical Activity*. 14 (1), pp. 1–14.

Yin, R.K. (2018) *Case Study Research and Applications: Design and Methods.* 6th edition. Los Angeles: Sage Publications.

Young, K.G., Duncanson, K. and Burrows, T. (2018) Influence of grandparents on the dietary intake of their 2–12-year-old grandchildren: A systematic review. *Nutrition and Dietetics*. 75 (3), pp. 291–306.

Yu, J.H. (2012) Mothers' perceptions of the negative impact on TV food ads on children's food choices. *Appetite*. 59 (2), pp. 372–376.

Zahid, A., Davey, C. and Reicks, M. (2017) Beverage intake among children: Associations with parent and home-related factors. *International Journal of Environmental Research and Public Health*. 14 (8), pp. 1–11.

Zarnowiecki, D., Sinn, N., Petkov, J. and Dollman, J. (2012) Parental nutrition knowledge and attitudes as predictors of 5-6-year-old children's healthy food knowledge. *Public Health Nutrition*. 15 (7), pp. 1284–1290.

Zeinstra, G.G., Koelen, M.A., Kok, F.J., Van Der Laan, N. and De Graaf, C. (2010) Parental child-feeding strategies in relation to Dutch children's fruit and vegetable intake. *Public Health Nutrition*. 13 (6), pp. 787–796.

Zhang, N., Bécares, L., Chandola, T. and Callery, P. (2015) Intergenerational differences in beliefs about healthy eating among carers of left-behind children in rural China: A qualitative study. *Appetite*. 95 pp. 484–491.

Zukin, S. (2018) *Point of Purchase: How Shopping Changed American Culture*. 3rd edition. New York: Routledge Taylor & Francis Group.

Appendices

Appendix A: Food Choice Diary Booklet

Name: _____

Please complete this FOOD CHOICE DIARY on the following days:

Day 1	
Day 2	
Day 3	
Day 4	

Please:

- Keep this booklet with you to record everything you purchase regarding food and drinks

- Write as much information as you can

If you have any queries about filling in the food choice diary or any other part of the study, please contact me on:

Tel: 554338489

Email: 16031404@brookes.ac.uk

Thank you very much,

Ammar Alawadh

<u>Instructions for filling in the food choice diary</u>

Please read the following guidelines and try to follow them as carefully as possible. To help fill out the diary, I have included an example of a completed day (on the following page).

1. Write down everything that you buy, no matter how small the amount, in two days.

2. Use a new line for each new food item.

3. Give as much information as possible about the food and drink you have purchased, encompassing:

    a. Brand name and flavour.

    b. The amount of the item purchased.

    c. Where you bought the food items (shop, restaurant, etc.).

    d. Estimate the size of the portion you have.

    e. How much you spent on the food.

    f. How you travelled to get the food (car, bus, train, walk, etc.).

    g. With whom the food item was purchased.

    h. How did you buy the product?

    i. Why did you buy this product?

    j. Who is influencing you to buy the product?

4. Please start each new day on a new page.

5. Please collect any till receipts for food you buy and put these into the envelope provided at the back of this food choice diary.

Note:

Eat and drink as you would usually in a normal day, not in a party or celebration. All the information collected about what you purchase is private and there are no right or wrong answers.

I will contact you

On _____

At _____

to collect and discuss your completed food choice diary (the interview)

Example of food choice diary

Day, date, and time:		Monday 21-1-2019, at 4:00pm							
Food and beverage items	**Brand name**	**Amount**	**Type of store***	**With whom you purchased**	**Transportation**	**How did you buy it?****	**Why did you buy it?**	**Influencer(s)***	**Cost**
Cereal	Kellogg's Frosties	1 box	Grocery store	Myself	Car	- My wife asked me to buy the Kellogg's Frosties cereal. - My child helped me to find information about the cereal. - Kellogg's Frosties are the best regarding the price and nutrition from the others. - I was the decision maker for buying Kellogg's Frosties cereal. - I will buy it again because it is healthy for my child.	My child likes it.	My child	2.50
Skimmed milk	Asda semi-skimmed milk	1.5 litre	Regional supermarket	Daughter	Bus	- I buy milk for every morning consuming. - I usually buy skimmed milk after evaluating the date among the others. - I decided to purchase the product because it tastes good. - I will buy it again because it tastes nice.	Taste is nice.	Preference	1.80
Roast chicken	KFC	1 whole chicken	Fast food restaurant	Daughter and wife	Train	- My wife asked me to buy the chicken for dinner. - My wife helped me to find information. - Whole chicken for three of us was enough with the reasonable price. - I might buy it again if I do not have enough time to shop for healthy food.	Time limist.	Price	5.00
Apples	British apple	5 pieces	Regional supermarket	Daughter and wife	Walk	- I decided to buy apples today. - British apples are the best because they are usually fresh. - I was the decision maker for the product. - I will buy British apples because they are fresh.	It is fresh.	My belief	2.80

6 pack ice cream cones	Cornetto classic	6 pieces	grocery store	Daughter	Walk	- My child asked me to buy them. - My daughter's friend suggested to her to buy them as they are cheap and tasty. - I read the ingredients for different brands. - I was the decision maker for the product. - I will not buy this amount again. I might only buy 1 or 2.	It is cheap.	Marketing offers. (buy 1 get 1 free)	5.00
									Total= 17.01

* Type of stores: local/regional supermarket, grocery store, national discount retailer, other.

** How did you buy the product? You should answer these questions: (Who came up with the idea of buying the product? How did you search for information about the food? How did you evaluate the food with other products? Who was the decision maker for the product? Are you going to buy this food/drink again?)

*** Influencers, for example (food preferences, taste, cost, income, parents' nutrition knowledge, parents' beliefs and attitudes towards food, family, time limit, cultural and religion, convenience store, marketing, etc.).

Food choice diary day 1

Day, date, and time:

Food and beverage items	Brand name	Amount	Type of store*	With whom you purchased	Transportation	How did you buy it?**	Why did you buy it?	Influencers***	Cost

* Type of stores: local/regional supermarket, grocery store, national discount retailer, other.

** How did you buy the product? You should answer these questions: (Who came up with the idea of buying the product? How did you search for information about the food? How did you evaluate the food with other products? Who was the decision maker for the product? Are you going to buy this food/drink again?)

*** Influencers, for example (food preferences, taste, cost, income, parents' nutrition knowledge, parents' beliefs and attitudes towards food, family, time limit, cultural and religion, convenience store, marketing, etc.).

Food choice diary day 2

Day, date, and time:									
Food and beverage items	**Brand name**	**Amount**	**Type of store***	**With whom you purchased**	**Transportation**	**How did you buy it?***	**Why did you buy it?**	**Influencers***	**Cost**

* Type of stores: local/regional supermarket, grocery store, national discount retailer, other.

** How did you buy the product? You should answer these questions: (Who came up with the idea of buying the product? How did you search for information about the food? How did you evaluate the food with other products? Who was the decision maker for the product? Are you going to buy this food/drink again?)

*** Influencers, for example (food preferences, taste, cost, income, parents' nutrition knowledge, parents' beliefs and attitudes towards food, family, time limit, cultural and religion, convenience store, marketing, etc.).

Food choice diary day 3

Day, date, and time:									
Food and beverage items	**Brand name**	**Amount**	**Type of store***	**With whom you purchased**	**Transportation**	**How did you buy it?***	**Why did you buy it?**	**Influencers***	**Cost**

* Type of stores: local/regional supermarket, grocery store, national discount retailer, other.

** How did you buy the product? You should answer these questions: (Who came up with the idea of buying the product? How did you search for information about the food? How did you evaluate the food with other products? Who was the decision maker for the product? Are you going to buy this food/drink again?)

*** Influencers, for example (food preferences, taste, cost, income, parents' nutrition knowledge, parents' beliefs and attitudes towards food, family, time limit, cultural and religion, convenience store, marketing, etc.).

<u>Food choice diary day 4</u>

Day, date, and time:									
Food and beverage items	**Brand name**	**Amount**	**Type of store***	**With whom you purchased**	**Transportation**	**How did you buy it?***	**Why did you buy it?**	**Influencers***	**Cost**

* Type of stores: local/regional supermarket, grocery store, national discount retailer, other.

** How did you buy the product? You should answer these questions: (Who came up with the idea of buying the product? How did you search for information about the food? How did you evaluate the food with other products? Who was the decision maker for the product? Are you going to buy this food/drink again?)

*** Influencers, for example (food preferences, taste, cost, income, parents' nutrition knowledge, parents' beliefs and attitudes towards food, family, time limit, cultural and religion, convenience store, marketing, etc.).

Appendix B: Recruitment Advertisement Left in Food Shopping Stores

WANTED!
ARE YOU a father?
WE NEED YOU!

My name is Ammar Abdullah Alawadh and I am studying for a PhD at Oxford Brookes University in the UK. My thesis is entitled "Saudi Arabian fathers as key socialisation agents and emerging implications for healthy food marketing policy development". This study is funded by Al Baha University. The aim of the research is to increase understanding of how fathers influence the variety of food consumption of their children in the Saudi Arabian cultural context.

In order to participate to this study, you should answer the following questions:

Are you Saudi?	✓
Is your age 18 or above?	✓
Do you live in Eastern Province of Saudi Arabia?	✓
Do you live with your family for at least 5 days/week?	✓
Do you have at least one child between 1 and 15 years old?	✓

- If the answer to each of these questions is yes and you are interested in taking part in this doctoral research, your participation will entail the following two steps:
- You will have a food choice diary to complete for two days in which you record the food you have bought for your children, this should take no more than five minutes daily.
- Based on the food choice diary, you will have an interview lasting approximately 1-2 hours, during which you will be asked about what type of food you purchase for your children. With permission your interview will be recorded.

The pilot study will be conducted on 1st March 2019 - 30th April 2019.

If would like more information, please contact:
Ammar Alawadh,
Mobile and WhatsApp: 055 433 8489
Email: 16031404@brookes.ac.uk

Thank you so much

Contact Ammar: 0554338489 16031404@brookes.ac.uk
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Appendix C: Consent Form for Participants

Full title of Project:
Saudi Arabian fathers as key socialisation agents and emerging implications for healthy food marketing policy development.

Name, position and contact address of Researcher
Ammar Abdullah Alawadh
Oxford School of Marketing, Oxford Brookes Business school, Oxford brooks University, Gipsy Lane, OX3 0BP
Tel: + 44 7460111735
Email: 16031404@brookes.ac.uk

Please initial box

1. I confirm that I have read and understood the information sheet for the above study and have had the opportunity to ask questions.   ☐

2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving a reason.   ☐

3. I agree to take part in the above study.   ☐

4. I agree with keeping a food choice diary, and to be interviewed, follow-up interviews on accompanied shopping trips (observational interviews), and for that data to be used in the research.   ☐

Please initial box

	Yes	No
5. I agree to the interview being audio recorded.	☐	☐
6. I agree to follow-up interviews on accompanied shopping trips (observational interviews) the observation being written field notes recorded.	☐	☐
7. I agree to the use of anonymised quotes in publications.	☐	☐

_____   _____   _____

Name of Participant   Date   Signature

_____   _____   _____

Name of Researcher   Date
Signature

Appendix D: Interview Guide

Pre-interview

I would like to thank you for completing the food choice diary and agreeing to take part in this interview. As you know, in this study we are interested in looking at understanding how fathers influence the variety of food consumption of their children in the Saudi Arabian cultural context. This in-depth interview is designed to find out in more detail about the food you choose for your children. The interview will take one to two hours, but the exact length will depend on how much you have to say. Please bear in mind that there are no right or wrong answers in this interview.

Everything you tell me in this interview is confidential; I will not tell anyone what you have stated except my PhD supervisors, Professor Janine Dermody and Dr Sarah Quinton. When I have listened to the recording, I will give you an alias so that no one else will know your real name. I will also change the names and details of anyone else you talk about in the interview, so they too cannot be recognised. I would like to record this interview, do you agree? The interview will be transcribed but anything recognising you in the interview will be changed to maintain confidentiality. At any time you want me to stop the recording or you feel uncomfortable talking about something, only say 'I want to stop now' and the interview will be terminated immediately.

Ready to start recording?

Interview schedule:

Subject area	Questions	Follow-ups
General	1. How many children do you have?	- Are they boys or girls? - How old are they?
	2. How many people do they live with you in your house?	- Grandparents - Other relatives
	3. Can you tell me about what you know about obesity?	Why do we have such a problem?
	4. Can you tell me what you know about healthy and unhealthy food?	- How? - Why? - Can you give an example?
Food decision-making process	5. I see from your food choice diary that you purchased ___ food/drink on	- Who came up with the idea of buying the

	_(day)____. How did you choose it?	product? - How did you search for information about the food? - How did you evaluate the food with other products? - Who was the decision maker for the product? - Are you going to buy this product again?
Factors influencing fathers on food choice	6. I see from your food choice diary that you purchased ___ (brand). Tell me about the sort of things that might influence you to purchase this brand for your children.	-Why did you decide to purchase (XX brand) instead of others? How? and Why? What else might influence you? How? Why? - Child's food preference - Availability - Cost/income - Family - Parents' beliefs and attitudes - Fathers' job - Cultural and religion - Retail food stores - Marketing factors
	7. To what extent do grandparents influence fathers to choose (un)healthy food for their children?	How/ can you give me an example.
	8. To what extent do relatives influence fathers to choose (un)healthy food for their children?	How/ can you give me an example).
	9. To what extent do marketing techniques such as advertising/advergames/ influence father and/or their children to choose (un)healthy food?	Why/why not/how/ can you give me an example.
	10. To what extent do schools influence fathers to choose (un)healthy food for their children?	How/ can you give me an example.
Fathers' perceive their roles and	11. Could you tell me if there are any tensions/ conflict with your child(ren) about the food you choose?	Why? - Can you give me an example?

responsibilities for the food they choose for their children	12. Could you explain to me how you negotiate with your child when you choose food for them?	Why? - Can you give me an example?
	13. Could you tell me how you teach/discuss your child about the food you choose?	Where? Why? - Can you give me an example?
	14. Do you act as a role model when you choose food for your children?	How? Why? Can you give me an example?
	15. To what extent do you control the availability of food at home?	Why?
	16. Do you choose food as a reward for your children?	How Why? Why not? Can you give me an example?
	17. Do you act as a permissive or authoritarian father related to food?	How? Why? Why not? Can you give me an example?
Food policy	18. What do you know about government regulations that control the different types of food marketing in Saudi society, including children?	-Would you like to share them? - What do you think about government regulations? - If you could have some input into any new regulations, what would you like to see happen regarding food marketing to Saudi society, including to children?
Others	19. Thank you for taking part. Do you have any questions you would like to ask me?	

Appendix E: Accompanied Shopping Trip Observation Item Checklist

Before accompanied shopping trip

I would like to thank you for completing the first step of the project, which was a food choice diary. Thank you for accepting to take part in the prior interview, which was the second step of the study. Now, I would like to thank you for allowing me to shop with you in order to observe you, which is the third stage of the study. As you already know, in this project we are interested in looking at understanding how fathers influence the variety of food consumption of their children in the Saudi Arabian cultural context. This accompanied shopping trip is aimed at finding out in more detail about the food you actually choose for your children. This accompanied shopping trip will take one to three hours, but it depends on how much you have to spend and how long it takes to you to choose products. Remember, you can shop as naturally as possible.

Before we start shopping and interviewing, permission to do the research in this store will be issued. Everything I observe is confidential; I will not tell anyone what you I have observed. At any time, if you want me to stop doing the observational written field notes or you feel uncomfortable about something, only say 'could you stop?' and the interview will be immediately terminated.

?Ready to shop

Researcher: _____ Participant: _____ date: ____

Supermarket name: _____

Subject	Notes for the Participant
Time spent for shopping	
- shopping list	
- Reading labels a. Checking for ingredients b. best before date d. Health claims e. Diabetic, etc.	
Comparing between food product, brand, price, preference	
In-store marketing	

activities such as: coupons, sweepstakes, contests, product samples, discount, tie-ins, trade shows, advertising, packaging, and others	
Grab and go (familiar item)	
Purchasing based on recommendation by family/ friends	
Browsing around shop to get familiar with the food item sold	
Food /drinks in checkout counter	
Food and fruit aisle	

Appendix F: Example of Field Nots (Father 22's Interview)

Day: Saturday   **Time: 7.30 pm**

Interview with (×××)

- He suffers from his wife always prefers unhealthy food.
- She does not like cooking, he cooks better than her, he says.
- His wife likes to drink a lot of soft drinks.
- He was always talking about his wife's problems and how he was upset that his wife was giving his kids unhealthy food for school.
- He says his wife gives his children foods like chips + juices = all toxins.
- He cannot control his children's eating because next to his house is a grocery + takeaway restaurant.
- He understands the most important problems of the society including unhealthy foods. He always linked my questions to his job = anti-smoking among patients.
- He was always groaning of his children = constantly advising them = they do not listen to him.
- His face had clear signs of heartbreak regarding his lack of control over his children's eating.
- He is considered easy + flexible = when his children go shopping with him, he allows them to buy sweets and chocolates.
- Contradictory in some of his views once he says he does not buy unhealthy foods for his children and once he says buy.
- Psychological discomfort with his wife, I expect, is the reason for the contradiction in his views = his wife eats unhealthy foods greedily.