

THE MAIN FACTORS THAT INFLUENCE CONSUMER INTENTION TOWARD
TO HEALTHY FOOD CONSUMPTION IN THAILAND



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TOWARD TO HEALTHY FOOD CONSUMPTION IN THAILAND

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ABSTRACT

The study aimed to explore the factors of perceived price, reference group, nutrition efficacy, and healthy consciousness influencing consumer's intention of healthy food in Bangkok. The questionnaire was used to collect data with the 250 consumers who used to consume healthy food in Bangkok and the content validity was testing by the experts. The statistic method were descriptive statistics method by using the percentage, mean, standard deviation, single and multiple linear regression analysis by using the SPSS program. The research study results that the majority of respondents were single female who aged 18 – 34 years old. They were employee. The analysis results found that factors of nutrition self-efficacy and health consciousness which is attitude toward behavior factor influence their intention toward to healthy food consumption in Thailand at the significance level of 0.05.

Keywords: Influence Factors, Perceived Price, Reference Group, Nutrition Efficacy, Health Consciousness, Intention Behavior, Healthy Food

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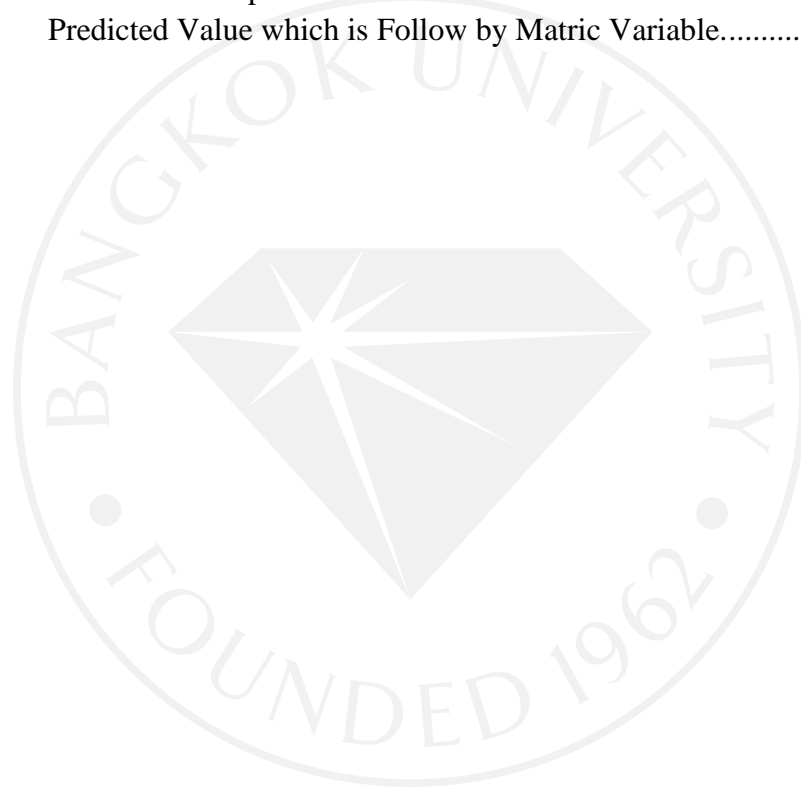
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CHAPTER 1

INTRODUCTION

The purpose of undertaking research is to study the main factors that influence consumer intention to healthy food consumption. Purpose of research is to find out what is the factor that could be able to influence consumer intention to consume healthy food.

1.1 Background

Healthy food is foods that consist of starchy food such as potatoes, bread, rice, pasta, fruits and vegetables. Healthy food also consists of protein-rich foods such as fish, milk and dairy foods and not includes fat, salt and sugar (2014). Healthy food helps to balanced people health in the way to consume the right amount of food to balanced body weight. Healthy food is an important to group of people who want to maintain their health and make them feel better. The key of healthy food is to eat in right amount of calories to balance energy which is amount of people consume have to equal energy use in a day. Food that people consume is affect directly to individual weight. It generally men should have not over 2,500 calories and women should have not over 2,000 calories in one day to avoid over gain from consumption behavior. Healthy food can be another choice of food that could help people to avoid over calories consumption in a day. Healthy food also helps to ensure that consumers would be get a balanced via they receive all the nutrients needed in a meal. Healthy food can improve people physical fitness, allow people to feel better about themselves, and good for their health. People need to make a balance to their body from food which consists of all necessary nutrients. Healthy food can be another

choice of food which is limit fattening foods. In 2015, the number of vegetarian, vegans, high – protein and gluten-free consumers are increasing rapidly (2014).

The trends of healthy food is rapidly expanding in larger base consumers who seeking more healthy, and cleaner foods. In 2015, the number of vegetarian, vegans, high – protein and gluten-free consumers are increasing rapidly. Real information about ingredients and correct label were needed and low fat sugar is becoming popular in the ingredients market. And many consumers, they are becoming the chef because of popular in social media where people can show creativity in their culinary skill to cooking up a masterpiece of food (Crawford, 2015).

From the past research, the theory of planned behavior that originated by Icek Ajzen has been used to study the factors that influence consumer behavior in healthy food consumption. Many researchers also applied the theory of planned behavior with a wide variety of consumer behavior study such as Halal food purchasing (Sayuti, 2011), dry fish consumption (Siddique, 2012), predict healthy eating behaviors (Brouwer & Mosack, 2015), and organic food consumption (Abdullah, Sheikh Mohammed et al., 2014) . Many researchers are interested and studied about healthy food consumption behavior such as study of attitude toward organic food among Taiwanese (Chen, 2009) that research result is Taiwanese increase to take a good care for their health because they are more concern about environmental, Taiwanese though that organic food is safe and have more advantageous more than another kind of food. In Greece, also have research study about purchasing motivation and profile in the Greek organic consumer (Krystallis, 2002) which is research to study about consumer behavior and use research result to change consumer behavior to purchase

more organic food. In England, (Makatouni, 2002) studied about consumer perception of organic food production and farm animal welfare. And (Anssi Tarkiainen & Sundqvist, 2005) also study in buying organic food in term of subjective norms, attitudes and intentions in Finnish consumers. In Thailand have a few research study about healthy food consumption. Therefore, this research is study about consumer intention towards to healthy food consumption in Thailand to advantageous for business to develop marketing strategy to satisfy consumer need and to be efficient and suitable for healthy food consumers in the future.

1.2 Objectives of Research

The objectives of research study examine the factors that influence the healthy food's consumer consumption behavior in Bangkok. The researcher can classified research objective into 5 main objectives:

1. To extend limited research on healthy food consumption in Thailand
2. To examine the effect of perceived price on consumer intention to healthy food consumption
3. To examine the effect of reference group on consumer intention to healthy food consumption
4. To examine the effect of nutrition self-efficacy on consumer intention to healthy food consumption
5. To examine the effect of health consciousness on consumer intention to healthy food consumption

1.3 Scope of Research

1.3.1 Population scope

In this research study, scope of population is the people who are consuming healthy food on their actual behavior more than 5 days a week.

1.3.2 Variable scope

For research study, variable scope is divided into independent variable and dependent variable

Independent variable of this research is:

- Perceived price
- Reference group
- Nutrition self-efficacy
- Health consciousness

And dependent variable is Consumer intention

1.3.3 Research period scope

Data was collected from 20th November 2015 to 4th January 2016; it is almost two months use for gather questionnaires. A total of 574 questionnaires collected, including 250 valid questionnaires, 324 as invalid questionnaires by using an online questionnaire.

1.4 Benefit of Research

1.4.1 Academic benefit

- To understand consumer behavior such as theory of actual behavior and theory of planned behavior.
- To understand the key factors influence consumer intention which is perceived price, reference group, nutrition self-efficacy and health consciousness.

1.4.2 Managerial implications

- To understanding consumer intention behavior to healthy food consumption.
- The main benefit receiver of a research study are food business by understanding what is influencing factors toward to consumer's intention in healthy food consumption and to understand their actual behavior.
- Food retailer business may be able to more appreciate and more efficiently in new product development in the business opportunity.
- Any individual who are planning to operate food data in this research business in the future.

1.5 Definition of terms

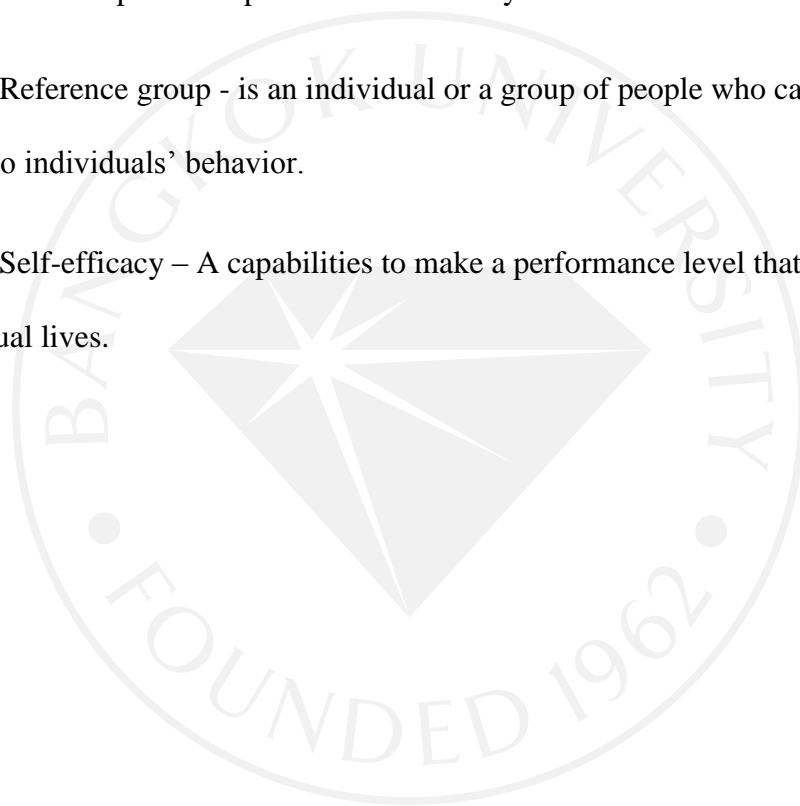
Behavioral intention - A person's perceived likelihood engage with a behavior.

Health-consciousness - A widely construct to consideration an individual readiness to perform some activities that effect to their health.

Perceive price – A price that encoded by the consumer.

Reference group - is an individual or a group of people who can be influential model to individuals' behavior.

Self-efficacy – A capabilities to make a performance level that affect people individual lives.



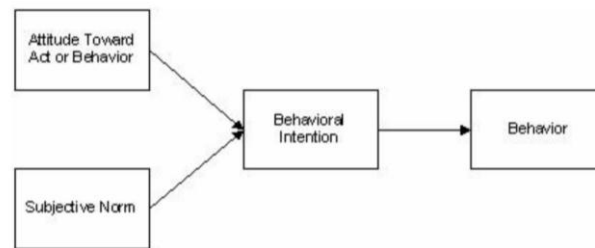
CHAPTER 2

LITERATURE REVIEW

2.1 Theory of Planned Behavior

The Theory of Planned Behavior (TPB) originated by Icek Ajzen in year 1988. Planned Behavior theory is a developed concept of theory from the Reasoned Action theory (TRA), which created by Ajzen and Fishbein in 1975. But the Reasoned Action theory has some limitation to dealing with individual behavior that has incomplete in volitional control. And in the intention factor that pretended to seize the motivational factors that influence an individual behavior in the way of how people willing to try in order to complete their own intention behavior. In generally, the stronger intention behavior is the more likely to effect the individual performance. However intention behavior can define the expression in behavior only in case of individual behavior is under volitional control that means theory of reasoned action is the model that suitable to create strategies to changing consumers' behavior and assumed consumers' intention in their actual behavior which is occurring to achieve a specific individual outcome. An intention behavior based on two types of conceptually model which is behavioral and normative (Madden, Scholder, Ellen et al., 1992). But Planned Behavior theory was developed to be more efficiency in behavior prediction by Ajzen; He added the concept of perceived behavioral control element to be the third elements from the original reasoned action theory. The Planned Behavior theory use to forecast individual behavior that define a three purposes of behavior which states as an attitude toward individual behavior,

subjective norms that covered consumer behavior and the perceived behavior control in individual which is effect to their actual behavior and structure an individual's intention model (Ajzen, 1991).



Source: Fishbein, M., & Ajzen, I. (1975).

Figure 1: Theory of Reasoned Action

Theory of Planned Behavior is a model that developed from the concept of major cognitive processes in evaluates behavioral intentions process in individually. Model used to explain about the relationship between behavioral intention and three variable factors. The three variable factors that are shown in the theory are the major factors that base on the personal belief and effected directly to personal though in the behavioral intention process. The theory of planned behavior model consists of four variable factors which are influence both internally and externally behavioral intention process. The three independent variables factors consist of attitude toward behavior, subjective norms, perceived behavioral control and dependent variable is Intention(Schielke, 2012).

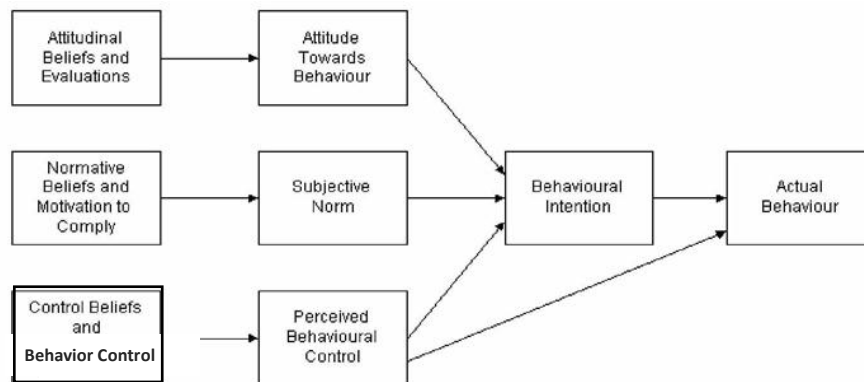


Figure 2: The Theory of Planned Behaviour (TPB) (Source: Ajzen (1991)).

Figure 2: Theory of Planned Behavior

2.1.1 *Attitude toward the behavior* is a directly factor that motivate personal intention to perform the behavior. The more appropriate the behavior attitude, the stronger intention. Anyway all independent variables are connected with appropriate attitude only and not to predict actual behavior. According to Ajzen's forecast that is the largely consequences are desirable from appropriate or favorable behaviors and in contrast un-appropriate attitude in behavior can make an undesirable consequence. Attitudes compose with two components; Behavioral belief and Attitude toward behavior.

- Behavioral belief can be described as the belief in individual which is belief in particular behavior outcome.
- Attitude toward the behavior can be described as the individual's corresponding that can be either positive or negative way of feeling about their behavior performance. Attitude toward behavior can determined from other people's beliefs in behavior consequences and desirable evaluate from the behavior consequence (Ajzen, 1991).

2.1.2 *Subjective Norm* is an individual perception occur from arousal in society which suggest the most important people who are effective for their thought that is whom they should or should not do or act like a certain behavior. Subjective norm influence consists of two main factors which is normative belief and subjective norm:

- Normative belief is an individual's perception of normative pressure in social or other's belief that individual decides to that they should or should not perform.
- Subjective norm is an individual's perception of how other people influence individuals' though that the behavior should or should not be performed. Subjective norms refer to an individual evaluate social pressure to perform behavior that they aim to act (Ajzen, 1991).

2.1.3 *Perceived Behavioral Control* describes the way to perform a specific behavior in either simple or difficult ways. Availability, price, location or time might be an influence factors that effect through perceived behavioral control concept. Perceived behavior control is directly factor that connected to intention behavior but on the other hand, attitude and subjective norms are connected to intention behavior only. Perceived control can be consider as an actual control that direct influence on individual behavior. Perceived behavioral control come up with two main influence factors which is perceived behavioral control and control beliefs:

- Perceived behavior control influence personal's intention. It can be described as individual's perceptions in their ability to perform.
- Control belief is a factors influence individual's belief in their behavior performance (Ajzen, 1991).

Individual have a choice to express or cannot express their intention into their performance even individual behavior are consist of the factors in their action but some behavior intention, motivation also existing such as opportunity and necessary resources (time, financial, or teamwork). Each resource can be the factors that control over individual behavior. If an individual have an opportunity and resources to perform their intention behavior, he or she can perform their intention behavior perfectly.

Planned Behavior Theory has been applied to a wide variety of consumer behavior study such as internet purchasing (George, 2004), internet banking in Taiwan (Ya-Yueh & Kwoting, 2004) , tourism shopping behavior(Fang & Yingjiao, 2012), Halal food purchasing(Sayuti, 2011), online video and television service towards to consumer acceptance (Truong, 2009), dry fish consumption (Siddique, 2012), predict healthy eating behaviors (Brouwer & Mosack, 2015), consumers' intention to attend soccer events (Eddosary & Yong Jae Ko, 2015) and organic food consumption (Abdullah & Sheikh Mohammed et al., 2014).

2.2 Factors influencing Consumer Buying Behavior of Healthy food

2.2.1 Perceived Price

Price is the amount of money considered to exchange in the ownership right, in the way of right to use goods or services. Price also related to anything not only amount of money but use in a term of perceived value (Charles & Joseph ,et al., 2006). Price is the one tool that consumer uses to determine the product especially in case of consumers do not have information of product. Information of product includes product performance, product features, reliability of product, and durable t which can be used price to determine as a measure indicator (Lin, 2013).

From (Zeithaml, 1988), Price can be characterized to two types which is objective price and perceived price:

- Objective price is the actual price of products or services that consumer can recall whereas they can remember price as an expensive or inexpensive that encode in the way of how it meaningful for them.
- Perceived price was described as the price that encoded by the consumer because consumers do not often know and remember the actual price of product or services, consumer also encodes prices in the way that has a meaningful to them. On the other hand, perceived price can be determined as a consumers' perception in the level of price (Lin, 2013).

Perception can be understood as the process of categorization. Basically, Perception is the process that people used to choose, manage, and translate information to make sense of them (Assael, 2004).

Price perception is the process of how individual encode price of goods or services information in their minds. Price perception concerns how individual decides a product price and how individual accept and understands about price information and how the product price make significant to them. Information processing is using to understand price perception (Peter & Olson, 2005). From (Munnukka, 2008) research, they suggest that price perception in individual is related on quality, value, and other beliefs perception.

According from (Assael, 2004), Price is one of the most significant in consumer perception. Price perception affects directly to brand quality perceptions and frequency in consumer purchasing behavior. Consumer price perceptions have three components which are;

- *Price expectations* also known as reference price or standard price. Price expectation is the price consumer willing to pay for products or services. Reference price use as a standard price or reference frame of price that consumers use to compare in product alternatives (Assael, 2004).
- *Actual versus Reference prices* is an important consideration which is relationship that encounter in the marketplace. Actual and reference price are actually have the same concept of price. The difference

between reference price and actual price can be affected to the result of consumer will move their reference price to closer with actual price as long as accepted in the actual price (Assael, 2004).

- *Price-Quality Relationship* is the important factor that can be find consumer perception in a price and quality association for marketers. In addition, when consumers do not have enough information about quality of product, they use the price as an indicator to make the purchasing decision. In contrast, consumers who have sufficient information about products or services characteristics are less likely to make the price-quality implication but they are more likely to be concerned with category of products. Price is likely to be quality perception if consumer trusts in the source of price information. (Assael, 2004).

Many researcher choose perceived price as an another factor that essential to influence consumer's intention to purchase goods or services such as study in consumer intention to purchases good or services (Grewal & Marmorstein, 1994; Chiang¹ & Jang², 2006; Hoffmann & Schlicht, 2013,; Lim, Yong et al., 2014; Nazari & Arab, 2014; Moslehpour, Aulia et al., 2015)

2.2.2 Reference Group

Reference group is a group involves two or more people who are socialize with each other to join and have the same setting goals (Peter & Olson, 2005). A reference group is an individual or a group of people who can be influential model to

individuals' behavior. Reference group have ability to influence on the activities.

Many people prefer themselves are accepted as a group member with group of friends, co-workers, formal social group, neighbors and people who they are will go along with (Blythe, 1997). Reference group play a major role of motivation pressure to individual purchasing behavior. However the types of influence depend on the product type, whether how product consumed and the personal characteristics such as gender, beliefs and whom they like to associated with. In generally, people determine and applied with a reference group for the three main reasons which are to gain knowledge, to achieve goal and avoid risk, and to identify their own self-concept. Those three main reasons also influence by three types of reference group influence which is informational, utilitarian and value expressive (Escalas & Bettman, 2003).

- *Informational reference group influence*, communicate knowledgeable information to consumer about themselves and product information. Information can be send directly through verbal or nonverbal. Example, one man who wants to purchase soccer shoes might find out some advice from his friends who have knowledgeable for soccer shoes. From the example, he tends to be more influenced by reference group that have relevant and reliable information to his problems High reliable of reference group that have informational can be more influential to consumers.
- *Utilitarian reference group influence* also known as normative influence can occur when consumers want to achieve goal and avoid facing up with risk and punishment. Consumers will conform to the reference group that

they desire if reference group can control goal and risk, reference group that have visible or well-known and reference group that are motivate them to achieve goal or avoid risk.

- *Value-expressive reference group* also known as identification influence, influence can effect directly through individuals' self-concepts. This influence concept occur when individual have group's values and norms and individual have their own perception to accept group's values and norms. And surely that their values are similar with the reference group's values.

According to (Blythe, 1997),the reference groups can categorized into seven types which is consist of:

- *Primary groups* are including friends, family, colleagues which are the people that have often seen. A primary group is a small reference group that allows to face-to-face interaction and participate mutual activities which can be result in the same belief and behavior because most of people willing to make a friends who have the similar way of thought or same interests-
- *Secondary groups* are people who can meet in occasion or the people who shared some interest with each other such as sport club would found a secondary group. These reference group are resemble with a few significant in develop attitudes and operate behavior but can build up the attraction of individuals' behavior within the same interest subject. In sometimes, secondary reference group also formed and related to primary reference group

because secondary reference group often shape by a special friends who shared the same interests.

- *Aspiration groups* are the group of people that many individual want to join and belonging to. Aspiration group be the most powerful reference group in motivate individual behavior because individual will often use to pursue their behavior to be accepted as a member of group.
- *Dissociative groups* are the group of people that individual does not want to join and belonging to. Dissociative reference group can effect through individual in negative outcome.
- *Formal groups* might be an association or a club. Formal reference group is well structure reference groups which have a clear statement of rules, regulations to easy understand among the group members (Mellott, & Douglas, 1934).
- *Informal groups* are the reference group based on friendship. Informal reference group is a group that has a tiny structure which consist of a bit rules and regulations which is based on perception of group member and have no written (Mellott & Douglas, 1934).
- *Automatic groups* also known as category groups. This reference group is the group that group members are similar level of age, gender, education or culture. For this reference group, it seems like group pressure influence individual to perform the activities.

Reference group can shape by many kind of group characteristics and each individual can be a part of a variety reference group (Blackwell, Miniard et al., 2001). Individual can be a member more than one in the reference group at a period of time and may choose totally one group to making a guidelines and decision to purchase product. Reference group can be influential tool in consumer behavior in the way of how they select, purchase, and use of product. Reference group also provide a consumer motivation, perception, learning, attitude, and purchasing making decision model (Wells & Prensky, 1996).

From (Escalas & Bettman, 2003) study, they claim about reference group as an reference group is the people that important to the consumer because most of consumers are define themselves to associate with brand that arise from reference group and reference group also important when consumer appropriate with the brand image to meet their own self related needs.

In consumer behavior study, Reference group can be used to explain why consumers purchase the products because a wide variety of products are available in the market, the ability to purchase a product by making individual decision was a primary activities will be occur in individually anytime. Mostly purchase decision is depending on the individual preference that came from the reference group. However, consumer decision making processes become more complicated when choice, perceptions and recognition was taken into the individual purchasing decision process. On the other hand, reference group concept defines customer purchasing behavior by compares themselves with another people in reference group and with

another people in different reference group whom are purchase the same or different products (Peter & Olson, 2005).

Many research study selected reference group as an another factors that influence consumers' intention to develop in their actual behavior such as affected from reference group toward consumer behavior (Bearden & Etzel, 1982; Grofman & Norrandar, 1990; Escalas & Bettman, 2003; Yang1, & He2 et al., 2007; Pechmann & Wang, 2010; Schulz, 2015), reference group toward brand extension (Liu & Hu, 2012), reference group in perceived risk (Mehta, Lalwani et al. 2001; Knudsen, 2008)

2.2.3 Nutrition Self-Efficacy

According to (Mai & Hoffman, 2012),described nutrition efficacy as a personal belief in their capability to deserve outcome from their healthy food eating behavior. Nutrition self-efficacy can be used to focus on the consumer's intention to consume healthy food and to determine the way consumer decides to healthy food consumption.

Self-efficacy can be the factor that uses to make decision making process in food consumption, the individual belief in nutrition self-efficacy can use to focus on the consumer's intention that able to consume healthy food. Self-efficacy in nutrition can define the way consumers make a decision about food products.

Theory of self-efficacy was developed from the social cognitive theory concept(Bandura, 1997). According to him, self-efficacy can be understood as a self-expectation of individual base on personal believes toward individual capability to generate level of their performance in activities that effect through their daily life.

Self-efficacy can be defined how people sense, expect, and perform in individually. Self-efficacy is not determination about skill concept but rather than self-efficacy focus on determination of what can be perform with the skills.

Bandura (1994) suggests that self-efficacy concept in individual can be occurred from four major influencing factors. The most powerful way to establishing an influential concept of self-efficacy is developed from the behavior experience. If experience easy to success that means failure also easy to discourage too. Human behavior pursues some setback and difficulties to serve advantageous objectives that require successful.

Establishing self-efficacy through social model experience is the second way, by seeing group of people who are succeed in their own capabilities. The role of self-efficacy structure is a powerful control as well as the models. In case of people understand the models is different from their self-confident, their perceived in self-efficacy belief is not much to influence their intention behavior. Influence by using behavior model is more than a social standard which is using to make a judgment of consumer performance capabilities. Many people seek to the proficient models which possesses the capability which aspires themselves.

The third way to establishing self-efficacy is social persuasion by build a strong individual beliefs. People who are influence their own capabilities to be a master, they also given to an activities that are likely to gather the greater exertion and maintain perceived self-efficacy and make a control to people try hard for achieve their goal; they promote improvement in skill and a personal efficacy sense. But

people who lack in their own capabilities belief, they tend to avoid challenge activities and give up to face with difficulties. The self-efficacy person is the people who are successful in self-efficacy built and join in more activities than convey positive estimate by improve individual beliefs to their own self-capabilities.

Reduce individual reactions in stress and worrying is another way to establishing self-efficacy. Emotional intensity and physical response are not considerable than how people know and understand the concept. A high-efficacy people, they use their affective arousal as a facilitator to perform the best performance and to achieve their goal. A low-efficacy people are who are self-doubts and they regard their own arousal as a weakness.

An influential of self-efficacy improve human achievement and well-being in many ways. A high self-confidence people are more approach to challenge tasks to be profession. They point themselves to achieve the challenge goals and maintain their engagement in their tasks. They approach the situations that they can control over them. Self-efficacy people are more specific and situational judgments of their capabilities. In contrast, lack of confidence people who are not confident about their own capabilities escape from challenge tasks which they view as their un-secure. When they faced with challenge, they reduce their effort and give up for the trouble. They are denied to redeem the mistake or failure(Bandura, 1994).

In order to reach a desirable result and influence to achieve goal, a series of three step of assessment will be occur in individually: Task Identification in order to define what is the task need to be achieved the goal, Take evaluation by evaluate is

the task is easy or difficult, and Do I have the ability to achieve those goals in self-efficacy appraisal process. When assess the task, individual have to attend to task or situation characteristics and decide the knowledge or skill level that is required. Self-efficacy appraisal plays an important role in performance which is effect to outcome(Francine & Robyn, 2002) .

Previous research has shown the interplay between health consciousness and nutrition self-efficacy to study the decision making in food consumption.

2.2.4 Health Consciousness

Health consciousness are significant relevant to the individual readiness degree which engage to health behavior in individually. Health consciousness is a widely construct to consideration an individual readiness to perform some activities that effect to their health. A health consciousness consumer, they sensible and concern more about healthy wellness and influence themselves to preserve healthy and quality of their life by connecting healthy behavior with their self-consciousness (Chen, 2011).

Health consciousness can be described as the motivational component that encourages individual interaction with their health. Consumer who is health-conscious people, they are encouraged about their health by attempt to heighten or maintain well-being by take a part in healthy behavior in the way of consuming healthy food (Mai & Hoffman, 2012).

According from (Schiffman & Bednall, 2001), Motivation can be described as the individual driving forces that drive individual behavior action. Individual driving

force is generating from a state of tension which occur from the unfulfilled need.

Individual attempt consciously and subconsciously, in the way of decrease these two tensions straight through behavior that they predict to execute individual needs and prevent the stress feeling.

Motivation is an important factor that comes up with consumer behavior and also plays a major role in organic consumption pattern (Kriwy & Mecking, 2011).

Consumers who are healthy concern also motivated by a better quality of life and take a part in healthy behavior to avoid illness. In addition, health can be accepted as a strongest factor that uses to predict consumer attitude or consumer intention to purchase and consume a healthy product (Cabuk, Tanrikulu et al., 2014).

Furthermore, Health-conscious consumers may change their consumption behavior because they have an opinion that their behavior is directly affected to their health being (Kim & Seock, 2009).

From (Irianto, 2015) study, he mentioned that health consciousness has the most advantageous effect on personal attitudes towards purchasing intention in organic food. The powerful association between health consciousness and intention to consume organic food in individual attitude occur when they have an optimistic attitude on organic food such as they would be perceived healthier, safer and environmental-friendly. And according to the study of (Chen, 2009), showed that individual lifestyle is stronger influence to in individual health consciousness attitude that toward organic food consumption.

Health-consciousness is another important factor that many researcher use to study in consumer behavior such as to understand attitude and behavior of consumers (Rojas-Méndez, Le Nestour et al., 2015), purchase organic product (Kim1 & Seock, 2009; Naylor, Droms et al., 2009; Kriwy & Mecking, 2012; Mai & Hoffman, 2012), consumer use functional foods and products towards to their health worries and their willingness (Kim1 & Chung1, 2001; Chen, 2013)

2.3 Research Assumptions

H1: Perceived-price significantly influences consumer intention to healthy food consumption

H2: Reference group significantly influences consumer intention to healthy food consumption

H3: Nutrition Self-efficacy significantly influences consumer intention to healthy food consumption

H4: Health consciousness significantly influences consumer intention to healthy food consumption

2.4 Conceptual Model

Model that show the relationship of behavior intention toward to healthy food consumption

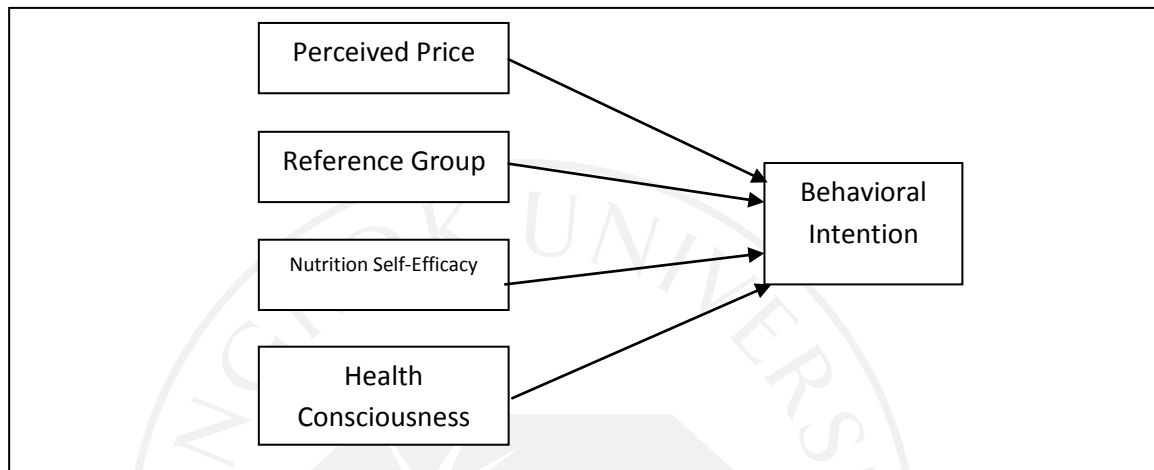


Figure 3 Conceptual Model

CHAPTER 3

METHODOLOGY

Methodology in research mention to gather data in a systematic way from a given population as an understanding a phenomenon and to generalize data which obtained from a population. Methodology helps the researcher to comprehend the process of research (Cohen, 2011). The purpose of this chapter is to consider the type of research, description of population and sample, operational definitions of research study, the instruments used, the measurement of validity and reliably, the data collection procedures, and the statistical tools used in analyzing data.

3.1 Type of Research

This research study is a quantitative research to examine the factors influence consumer intention towards to healthy food consumption in Thailand. Research study was based on empirical research to gather data with survey method by used online questionnaire as a research instrument. According to (Rowley, 2014), Questionnaires are widely used to conduct quantitative research study where the researcher wants to gather information in term of numbers or the frequency of respondents attitudes, opinions, behaviors, or predictions.

3.2 Population and Sample

Population for this research study is a people who are consume healthy food more than 5 days a week in Thailand. The research uses a non-random sampling technique with convenience sampling for selecting a sample.

Regarding to (Hair & Black et al., 2010), the sample size would not less than 50 observations and in preference the sample size should be more than 100 observations. As a general rule, the minimum of sample size should have at least five times of the variable numbers used to analyze the observations and the most agreeable of sample size should have 10:1 ratio of variables and observations.

3.3 Operational Definitions

In the research study, operational definitions used to ensure that reader understand the meant by the terms and concepts that research used. Operational definitions should be defined terms and concepts of research clearly (Coughlan & Cronin et al, 2007).

3.3.1 Reference group means an individual or groups of people who can be influential model to individual's behavior (Blythe, 1997) example individual who want to join and belonging with the group of people and reference group motivate individual behavior to be accepted as an member group. Reference group part of questionnaire adopted from (Escalas & Bettman, 2003) which has 3 questions as the follow:

3.3.1.1 I would like to be a part of healthy food group

3.3.1.2 I look up to this type of person

3.3.1.3 I wish I had more friends in this group

3.3.2 Intention to purchase healthy food part in questionnaire applied from (Ihsan Effendi, 2015) which has 3 questions as the follow:

3.3.2.1 I've been a regular consumer of healthy foods

3.3.2.2 I always purchase healthy food for future needs

3.3.2.3 I always purchase healthy food, although hard to come by market

3.3.3 Perceived Price mean price that encoded by the consumer and used to determine a consumer perception in the level of price. Perceived price part in questionnaire applied from (Voss, 1998) which has 3 questions as the follow:

3.3.4.1 Any payment for healthy food in a meal was a very reasonable price

3.3.4.2 I was satisfies in payment for healthy food in every meal

3.3.4.3 I think my payment in healthy food in a meal was a rip-off

3.3.4 Nutrition Self-efficacy means an individual's belief in ability to defeat with healthful eating behavior. Nutrition self-efficacy part of questionnaire used from (Mai & Hoffman, 2012) which has 5 sentences under the question statement as "I can manage to stick to healthy food consumption, even if....." as the follow:

3.3.5.1 Even if I have to learn much about nutrition

3.3.5.2 Even if I have to watch out in many situations

3.3.5.3 Even if I have to try several times until it works

3.3.5.4 Even if I have to rethink my entire way of nutrition

3.3.5.5 Even if I initially do not receive much support

3.3.5 Health Consciousness means a motivational component that encourages individual interaction with their health. Example of health consciousness people is people who are encourages about their health by attempt to heighten or maintain well-being by take a part in consumption healthy food behavior. Health consciousness part of questionnaire applied from (Mai & Hoffman, 2012) which has 4 questions as the follow:

3.3.6.1 I'm reflect about my health a lot

3.3.6.2 I'm very self-conscious about my health

3.3.6.3 I'm generally attentive to my inner feelings about my health

3.3.6.4 I'm constantly examining my healthy

3.4 Research instruments

In this research study uses questionnaire as a survey instrument to gather the data. A online questionnaire which is consisting of two parts was used in the research study. In part one, respondents were asked to provide basic personal information. In part two which is consist of 5 factors that respondents were asked to give their opinions on a set of statements that measure about the factors that effecting to their intention toward to healthy food consumption.

3.4.1 Personal data

In personal data question which is closed – end format question that consist of gender, age, marital status, occupation and consumption frequency. This part provide multiple choice questions and respondents are restricted to choose only one choice among any of given multiple choice answers.

For the consumption frequency classify by using the values of mean and standard deviation as the following:

1. Group of low consumption frequency – healthy food consumption less than 5 days in a week
2. Group of high consumption frequency – healthy food consumption more than 5 days in a week

3.4.2 Questionnaire on reference group factor

Question of reference group factor consists of two type of question which is multiple choice and rating scale questions. For the reference group question classify by using multiple choice question that respondents can be choose to answer only type of reference group that are effective to their healthy food consumption

1. Social network (Facebook, Twitter or Instagram)
2. Friends or Family
3. Celebrity
4. Others

And other questions in this part consists of 3 questions in rating scale by Likert format of strongly disagree, somewhat disagree, not sure, somewhat agree, and strongly agree which is related to reference group factor that effected to healthy food consumption behavior. Scoring of this part as following:

1 = strongly disagree with reference groups factors is the most influence to their healthy food consumption behavior

2 = somewhat disagree with reference groups factors is the most influence to their healthy food consumption behavior

3 = not sure with reference groups factors is the most influence to their healthy food consumption behavior

4 = somewhat agree with reference groups factors is the most influence to their healthy food consumption behavior

5 = strongly agree with reference groups factors is the most influence to their healthy food consumption behavior

3.4.3 Questionnaire on consumer intention factor

Question of intention to buy healthy food which consists of 4 questions in rating scale by Likert format of strongly disagree, somewhat disagree, not sure, somewhat agree, and strongly agree which is related to individual intention to buy healthy food behavior. Scoring of this part as following:

1 = strongly disagree with their intention to buy healthy food

2 = somewhat disagree with their intention to buy healthy food

3 = not sure with their intention to buy healthy food

4 = somewhat agree with their intention to buy healthy food

5 = strongly agree with their intention to buy healthy food

3.4.4 Questionnaire on perceived price factor

Question of perceived price factor consists of two type of question which is multiple choice and rating scale questions. For the healthy food's price perception question classify by using multiple choice question that respondents can be choose to answer only price that they are spend on a healthy food in a meal

1. Less than 50 ₱
2. 50₱ - 100₱
3. 101₱ - 150₱
4. Over 150₱

And other questions in this part consists of 2 questions in rating scale by Likert format of strongly disagree, somewhat disagree, not sure, somewhat agree, and strongly agree which is related to perceived price factor that effected to healthy food consumption behavior. Scoring of this part as following:

1 = strongly disagree with perceived price are the main factor to influence to healthy food consumption

2 = somewhat disagree with perceived price are the main factor to influence to healthy food consumption

3 = not sure with perceived price are the main factor to influence to healthy food consumption

4 = somewhat agree with perceived price are the main factor to influence to healthy food consumption

5 = strongly agree with perceived price are the main factor to influence to healthy food consumption

3.4.5 Questionnaire on nutrition self-efficacy factor

Question of nutrition self-efficacy factor toward to healthy food consumption which consists of 3 questions in rating scale by Likert format of strongly disagree, somewhat disagree, not sure, somewhat agree, and strongly agree by scoring of this part as following:

1 = strongly disagree with their self – efficacy factor are the main factor to influence to healthy food consumption

2 = somewhat disagree with their self – efficacy factor are the main factor to influence to healthy food consumption

3 = not sure with their self – efficacy factor are the main factor to influence to healthy food consumption

4 = somewhat agree with their self – efficacy factor are the main factor to influence to healthy food consumption

5 = strongly agree with their self – efficacy factor are the main factor to influence to healthy food consumption

3.4.6 Question of health consciousness factor toward to healthy food consumption which consists of 4 questions in rating scale by Likert format of strongly disagree, somewhat disagree, not sure, somewhat agree, and strongly agree by scoring of this part as following:

1 = strongly disagree with health consciousness are the main factor to influence their healthy food consumption

2 = somewhat disagree with health consciousness are the main factor to influence their healthy food consumption

3 = not sure with health consciousness are the main factor to influence their healthy food consumption

4 = somewhat agree with health consciousness are the main factor to influence their healthy food consumption

5 = strongly agree with health consciousness are the main factor to influence their healthy food consumption

3.5 Pilot test

Pilot test are used to testing a draft questionnaire which take with five respondents to test and comment on various dimensions of the questionnaire. Their comments will focus on test instruction problems in case of items are not clarify, and error of formatting or typographical issues (Schade, 2015). A pilot test was conducted by questionnaire to test with five people who are similar as possible to the healthy food consumer which is target group of research study. From the pilot study, some complicated questions were adjusted to greater clarify and restructured the question to avoid confuse and bias from respondents.

3.6 Data collection procedure

Data collection is a way of gather information systematically which is significant to purpose of research (Burns & Grove, 2011).

Data was collected from 20th November 2015 to 4th January 2016; it is almost two months use for gather questionnaires. A total of 574 questionnaires collected, including 250 valid questionnaires, 324 as invalid questionnaires by using an online questionnaire to create an online questionnaire and then publish to collect in Social Media (Facebook, Twitter and Instagram).

For this research study, research consists of four steps to collected data from respondents.

Step 1: Designed survey instrument to gather information from target population

Step 2: After approved from researcher's advisor, implemented data collection and distributed a questionnaires to target population

Step 3: Collected 250 questionnaires which are valid data to perform data analysis

3.7 Statistical Procedures

Data process and analysis using SPSS program for processing and statistical analysis. Data from SPSS program presented on table format with explanation. The statistical were used to analyze the data in this study are following:

1. Descriptive statistics use frequency and percentage to present the results of general demographic data such as sex, age, status and occupation.
2. Simple linear regression analysis classify question statements into each factors which related towards to behavior intention
3. Multiple linear regression analysis to test hypothesis of variable groups

CHAPTER 4

FINDINGS

This chapter, researcher will discuss about the methodology to analyze and present the research outcomes from analysis process. In this research, data will be analyzed in form of descriptive statistics and multivariate statistics to present the data.

The research outcomes will be described into 5 parts:

Part 1: The analysis of respondent profile information by using frequency and percentage such as sex, age, status, and occupation.

Part 2: Development of composite scores

Part 3: The analysis of linear regression which is descriptive statistics consist of linearity, normality and homoscedasticity analysis

Part 4: The analysis of multiple linear regressions which is descriptive statistics, model assumptions including normality, homoscedasticity, and multicollinearity

Part 5: Regression Analysis

Part 6: Hypothesis testing

4.1 The analysis of general demographic of respondents

There are 250 gathered questionnaires ($n = 250$), analyzed and presented from the people who are healthy food consumer which consume more than 5 days in a week in Thailand.

Table 4.1: Sex

	Frequency	Percent
Valid Male	28	11.2
Female	222	88.8
Total	250	100.0

The respondents are in female which is 222 out of 250 which equivalent to (88.8%), whereas the rest 28 (11.2%) of respondents are male.

Table 4.2: Age

	Frequency	Percent
Valid 18 - 24 years old	105	42.0
25 - 34 years old	102	40.8
35 - 44 years old	28	11.2
Over 45 years old	15	6.0
Total	250	100.0

The most of respondents are in 18 – 24 years old range with 105 (42.0%), followed by 25 – 34 years old 102 (40.8%), 35 – 44 years old 28 (11.2%), and over 45 years old 15 (6.0%) respectively average of respondents age are between 18 – 34 years old.

Table 4.3: Status

	Frequency	Percent
Valid Single	216	86.4
Valid Married	34	100.0
Total	250	

They are mainly single which is 216 respondents which is equivalent to (86.4%) of respondents and 34 respondents or (13.6%) of respondents are married.

Table 4.4: Occupation

	Frequency	Percent
Valid Employee	110	44.0
Valid Housewives	7	2.8
Valid Student	80	32.0
Valid Entrepreneur	49	19.6
Valid Other	4	1.6
Total	250	100.0

Employee group dominates the sample group which is 110 of respondents which is (44.0%), while student group is the second group with 80 people or (32.0%) of respondents, followed by entrepreneur group which is 49 (19.6%) of respondents and housewives 7 people which is equivalent to (2.8%) of respondents. The group of employee in this research consists of employee in government and private company.

4.2 The analysis of measurement reliability

4.2.1 Measurement reliability analysis

Cronbach's Alpha is use as a statistic instrument to measure internal consistency or reliability of a set of variables (Streiner D.L. and G.R. 1989).

Internal consistency represent the extent to all items in a test are the same concepts and connected to the other items within test. If the items are related, it will be correlated to each other and the alpha of value is increase.(Mohsan Tavakol and Dennick 2011).

Table 4.5: The measure reliability analysis show level of Cronbach's Alpha on reference group factor that influence consumer intention towards to healthy food consumption.

Reliability Statistics				
	Cronbach's Alpha	N of Items		
	.887	3		

Item-Total Statistics				
	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
R1	6.91	5.069	.791	.830
R2	6.91	5.141	.807	.818
R3	7.33	4.655	.750	.872

Reliability test of 250 respondents from questionnaire survey to check reliability of reference group factor by used SPSS program to test the reliability of Cronbach's Alpha to analysis of the value must greater than 0.7, which reference group factor is equivalent to 0.887 of reliability test. From the analyze result all variables in reference group items are correlated to each other.

Table 4.1: The measure reliability analysis show level of Cronbach's Alpha on perceived price factor with three variable items that influence consumer intention towards to healthy food consumption.

Reliability Statistics				
	Cronbach's Alpha		N of Items	
	.485		3	

Item-Total Statistics				
	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
P1	6.82	2.215	.514	.019
P2	6.89	2.277	.493	.062
P3	6.94	3.218	.022	.867

At the above data, the reliability test in Cronbach's alpha of 3 variables item in perceived price factor is 0.485 that is less than 0.5 mean some problems are occurred with the relationship between the variables which the variables in factors are not interrelated with each other. While problem happened, the researcher used the Pearson's correlation analysis to investigate the variables relationship and re-check about strength of the association between each variable items of perceived price factor.

After the researcher test the Pearson's correlation analysis of perceived price, the result of analysis shown variable P3 item in perceived price factor have a value of $r=0.032$ with the P1 item and $r=0.010$ with the P2 item. According from (Cohen 1988), in Strength of the relationship determining by using Pearson's correlation result analysis specify that $r = 0.10$ to 0.29 is extremely low correlation, $r = 0.30$ to

0.49 is average correlation and $r = 0.50$ to 1.0 is a perfect positive correlation in strength between a linear relation between variable. From the Pearson's correlation analysis result P3 item is very perfect negative correlation with P1 and P2 variable items.

Table 4.2: Pearson's correlation analysis on each of three variable items in perceived price factor

		P1	P2	P3
P1	Pearson Correlation	1	.765**	.032
P2	Pearson Correlation	.765**	1	.010
P3	Pearson Correlation	.032	.010	1

** . Correlation is significant at the 0.01 level (2-tailed).

According from the problem in P3 variable items in perceived price factor, researcher decide to deleted P3 to make more reliable to variable items toward to perceived price factor and Table 4.8 shown the reliability of P1 and P2 variable items of perceived price factor which are increase in the value of Cronbach' alpha reliability statistics value.

Table 4.3: The measure reliability analysis show level of Cronbach's Alpha on perceived price factor with two variable items that influence consumer intention towards to healthy food consumption.

Cronbach's Alpha	N of Items
.867	2

Item-Total Statistics

	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
P1	3.44	.906	.765	.
P2	3.51	.918	.765	.

While deleted the P3 variable item, the reliability test of 250 respondents from questionnaire survey to check reliability of perceived price factor and used SPSS program to test the reliability of Cronbach's Alpha to analysis of the value must greater than 0.7, which perceived price is equivalent to 0.867 in reliability test that mean all items in perceived price are correlated.

Table 4.4: The measure reliability analysis show level of Cronbach's Alpha on nutrition self-efficacy factor that influence consumer intention towards to healthy food consumption.

Reliability Statistics

Cronbach's Alpha	N of Items
.864	5

Item-Total Statistics

	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
N1	14.65	12.052	.696	.835
N2	14.86	11.567	.730	.825
N3	14.87	11.502	.713	.829
N4	14.98	10.626	.798	.805
N5	15.12	11.169	.543	.882

Reliability test of 250 respondents from questionnaire survey to check reliability of nutrition self-efficacy factor and used SPSS program to test the reliability of Cronbach's Alpha to analysis of the value must greater than 0.7, which

reference group is equivalent to 0.864. From the analysis results, all nutrition self-efficacy items correlated to each other.

Table 4.5: The measure reliability analysis show level of Cronbach's Alpha on health consciousness factor that influence consumer intention towards to healthy food consumption.

Reliability Statistics				
	Cronbach's Alpha		N of Items	
	.819		4	

Item-Total Statistics				
	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
H1	11.97	4.834	.762	.724
H2	11.99	4.711	.762	.720
H3	11.89	4.927	.761	.727
H4	12.61	4.809	.411	.918

Reliability test of 250 respondents from questionnaire survey to check reliability of health consciousness factor and used SPSS program to test the reliability of Cronbach's Alpha to analysis of the value must greater than 0.7, which health consciousness is equivalent to 0.819 which mean all health consciousness variable items are correlated.

Table 4.6: The measure reliability analysis show level of Cronbach's Alpha on consumer intention factor that influence consumer intention towards to healthy food consumption.

Reliability Statistics	
Cronbach's Alpha	N of Items
.732	3

Item-Total Statistics

	Scale Mean if Item Deleted	Scale Variance if Item Deleted	Corrected Item-Total Correlation	Cronbach's Alpha if Item Deleted
11	8.08	2.186	.663	.540
12	8.07	2.340	.602	.612
13	8.61	1.830	.467	.816

Reliability test of 250 respondents from questionnaire survey to check reliability of consumer intention factor and used SPSS program to test the reliability of Cronbach's Alpha to analysis of the value must greater than 0.7. From analysis in reference group variable item which is equivalent to 0.732 of reliability, it means all items in consumer intention variables are correlated to each other.

4.2.2 Creating composite scores

According from (Hair & Black et al., 2010), in multivariate measurement in addition to simplify error in measurement to enhance each variables, the researcher developed summated scales which all variables in research are combine in a composite measure to represent the research concept. A summated scale is a composite value of a values set calculated by simple procedures as taking the average of the variables in each scale.

From the result of reliability analysis, all of the variable items have no any conflict except perceived price factor. As the conflict problem, researcher deleted some variables item in perceived price factor to create more efficiency of the result of the research study.

4.3 Descriptive statistics

Pearson's correlation is the relationship between set of data which use to measure of how well of variables are related (Price and Chamberlayne).

The descriptive statistics for this research study, display in table 4.12 which is provide the mean, and standard deviations for each of four independent variables and one dependent variable used in study. The correlation statistic was shown in table 4.14 represent the correlation and significance level and correlation for each independent variable and one dependent variable.

Based on the descriptive data in table 4.12 below, the most important criteria of independent variable in influence consumer intention toward to healthy food consumption is health consciousness factor which mean value is equal to 4.04 and the standard deviation equal 0.7. In contrast, perceived price factor have a least of mean and standard deviation which is mean value equal 3.19 and standard deviation value equal to 0.70. And for the dependent variable of the research study which is consumer intention factor are highly with mean and standard deviation value. For the mean value of consumer intention similar to 4.13 and the standard deviation value is similar to 0.68 in dependent variable as consumer intention factor.

Table 4.7: Descriptive statistics for each factor

Descriptive Statistics					
	N	Minimum	Maximum	Mean	Std. Deviation
Inten	250	2.00	5.00	4.13	0.68
Refer	250	1.00	5.00	3.53	1.08
Perc	250	1.00	5.00	3.19	0.70
Nutri	250	1.20	5.00	3.72	.083
Health	250	1.75	5.00	4.04	0.71
Valid N (listwise)	250				

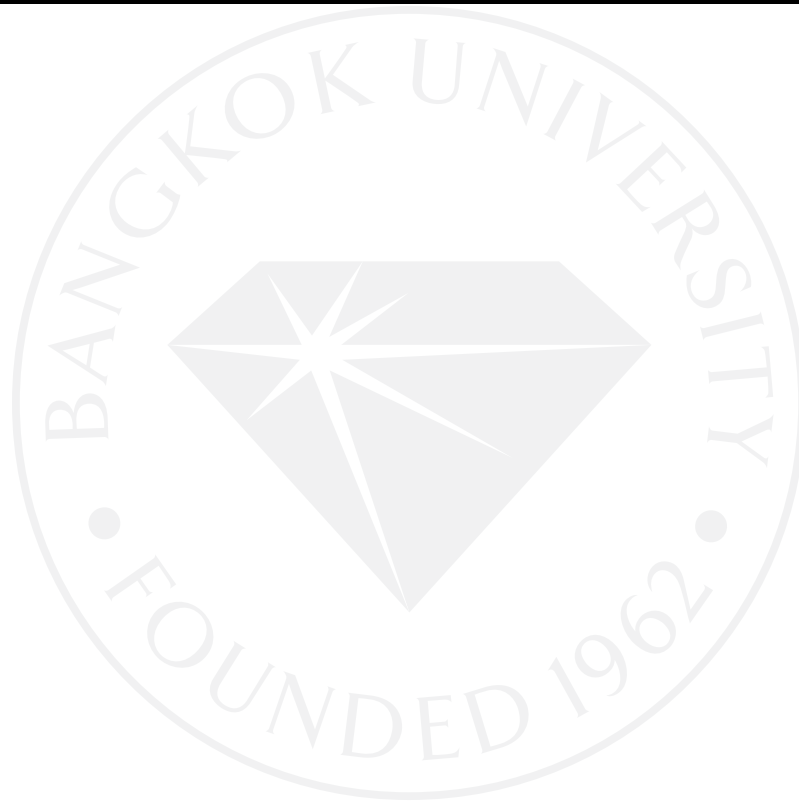


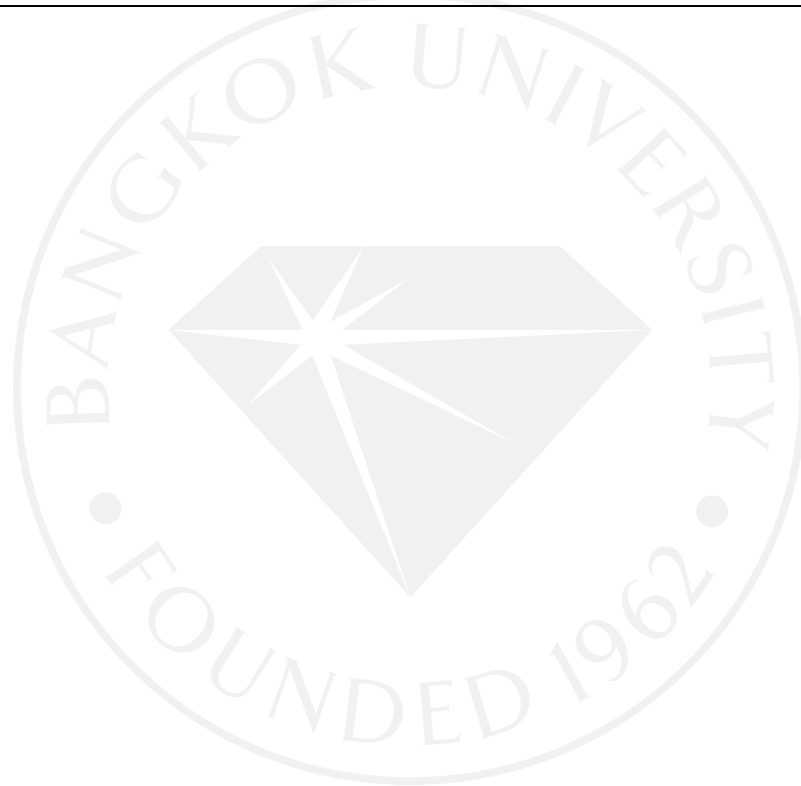
Table 4.8: Descriptive statistics for each variable item

Descriptive Statistics					
	N	Minimum	Maximum	Mean	Std. Deviation
R1	250	1	5	3.66	1.161
R2	250	1	5	3.66	1.130
R3	250	1	5	3.25	1.300
I1	250	2	5	4.30	.746
I2	250	2	5	4.31	.726
I3	250	1	5	3.77	1.034
P1	250	1	5	3.51	.958
P2R	250	1	5	3.44	.952
N1	250	1	5	3.97	.898
N2	250	1	5	3.76	.952
N3	250	1	5	3.75	.980
N4	250	1	5	3.64	1.052
N5	250	1	5	3.50	1.239
H1	250	1	5	4.18	.785
H2	250	1	5	4.16	.817
H3	250	1	5	4.26	.762
H4	250	1	5	3.54	1.120
Inten	250	2.00	5.00	4.1267	.68349
Refer	250	1.00	5.00	3.5253	1.08271
Perc	250	2.00	10.00	6.9440	1.79380
Nutri	250	1.20	5.00	3.7240	.82947
Health	250	1.75	5.00	4.0380	.71069
Valid N (listwise)	250				

**R is reverse coding

Table 4.9: Descriptive statistics, Correlation matrix, and Squared correlations

Construct	Scale Mean	Std. Dev.	Correlation Coefficient (R) Matrix				
			1	2	3	4	5
Intention Behavior	4.12	0.68	1.00	.000	0.042	0.167	0.25
Reference group	3.52	1.08	.000	1.00	0.002	0.007	0.000
Perceived price	3.18	0.70	.206**	0.050	1.00	0.149	0.117
Self-efficacy	3.72	0.82	.409**	0.084	0.386	1.00	0.285
Health consciousness	4.03	0.71	.500**	0.018	0.342	0.534	1.00



4.3.1 Tests of individual assumptions of multiple regression

Linearity analysis

Linearity analysis is analyze data and represent in form of graph which represent the relationship between all the variables in research study with the degree to change in both dependent and independent values. Linearity will be estimate through a scatter plot (Hair & Black et al., 2010).

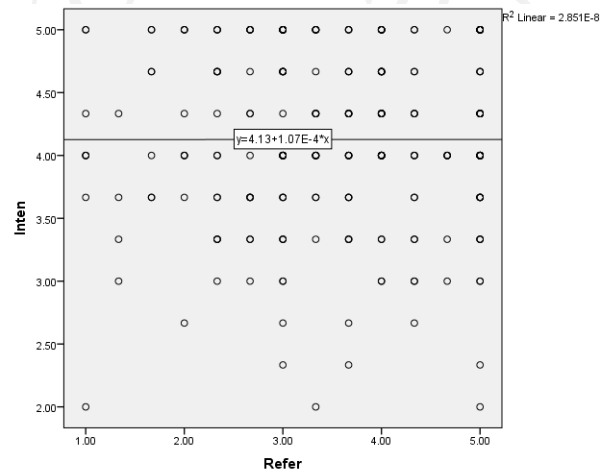


Figure 4: The linearity analysis of consumer intention with reference group variable

From the linearity analysis with a graph of scatter dot in reference group items, the graph showed no correlation with nonlinear pattern of graph.

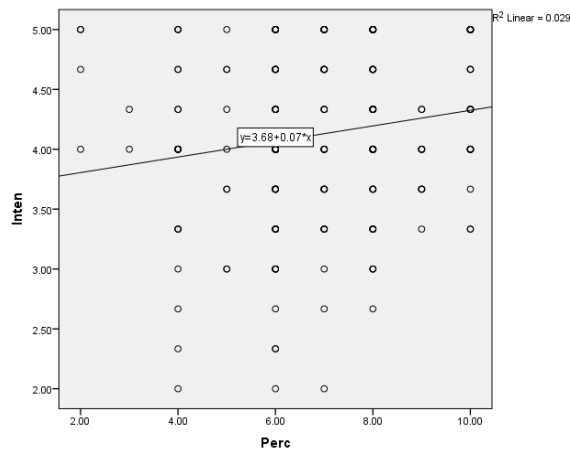


Figure 5: The linearity analysis of consumer intention with perceived price variable

From the linearity analysis with a graph of scatter dot in perceived price items, the graph showed less well defined with slope and scatter of the graph point.

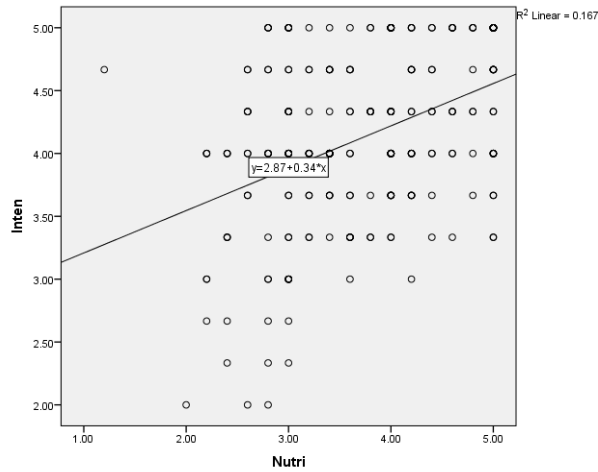


Figure 6: The linearity analysis of consumer intention with nutrition self-efficacy variable

In linear analysis of nutrition self-efficacy variables, the result shown in scatter dot graph is well defined which mean both dependent and independent variable of these two factors are related and strong significant with each other.

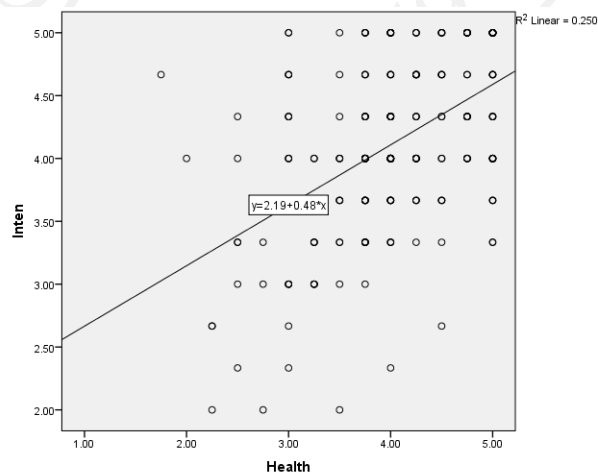


Figure 7: The linearity analysis of consumer intention with health consciousness variable items.

The result of nutrition self-efficacy variables linearity analysis, the result shown in scatter dot graph is well defined which both dependent and independent variable of nutrition self-efficacy and consumer intention factor are related and strong significant with each other.

In linearity analysis in this study research, the data shown in form of scatter dot graph to represent the relationship between standardized residual and independent variable to examine the normality analysis. The relationship for nutrition self-efficacy (nutria) and health consciousness (health) are reasonably well defined which mean these two independent variables strong and significant effects in the regression equation. And another independent variable which is perceived price (perc) is less well defined with slope and scatter of the points mean less effect in the equation. In linearity analysis, Reference group variable (refer) is no correlation because nonlinear pattern.

Normality analysis

Normality is the most basic assumption in multivariate analysis related to shape of data distribution for an individual metric variable and correspondence to normal distribution. In case of the variation from the normal distribution is large, all resulting statistical tests are invalid. In multivariate, normality analysis means that the independent variables are normal (Hair & Black et al., 2010).

According from normality analysis of research study, all of independent variables have a strongly linear pattern and appear with a good model. A graphical instrument for normality testing is the normal probability plot, QQ plot or a quantile-quantile plot of the standard data in form of standard normal distribution to explain

the correlation between the sample data and normality which measure the goodness of fit. For normality data, graph plotted in the QQ plot fall approximately with a straight line indicate with high positive correlation.

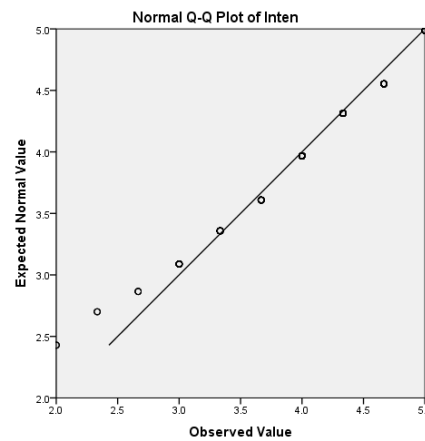


Figure 8: The statistical distribution of dependent variable as consumer intention (Inten)

In normality analysis of consumer intention factor is shown in the Q-Q plot of graph is standard normal distribution but is not well structures as well but result are representing as normal probability plot which mean for consumer intention factor, it has some problem but the result are acceptable.

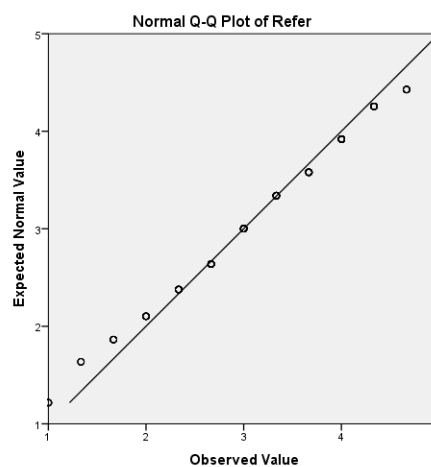


Figure 9: The statistical distribution of independent variable as reference group factor (Refer)

In normality analysis of reference group factor is shown in the Q-Q plot of graph is standard normal distribution but is not well structures as well but result are representing as normal probability plot.

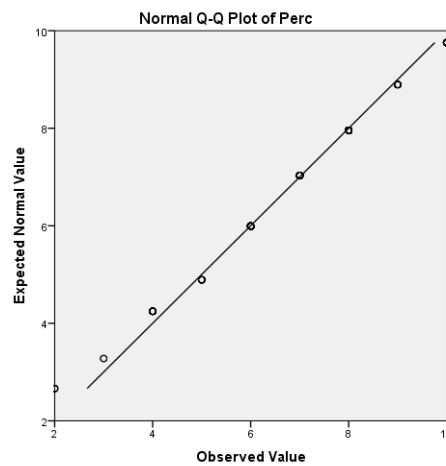


Figure 10: The statistical distribution of independent variable as perceived price factor (Perc)

In normality analysis of perceived price factor is shown in the Q-Q plot of graph is standard normal distribution but is not well structures as well but result are representing as normal probability plot.

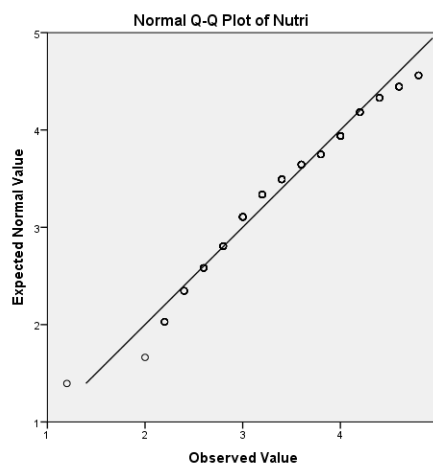


Figure 11: The statistical distribution of independent variable as nutrition self-efficacy factor (Nutri)

In normality analysis of nutrition self-efficacy factor is shown in the Q-Q plot of graph is standard normal distribution but is not well structures as well but result are representing as normal probability plot.

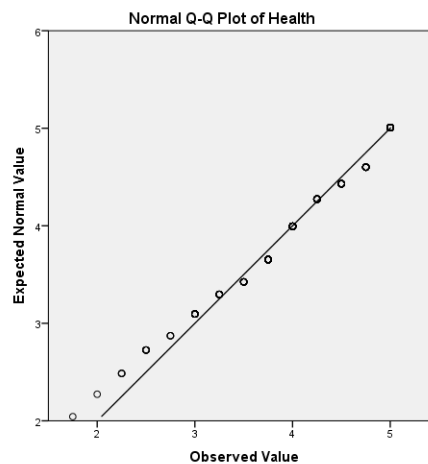


Figure 12: The statistical distribution of independent variable as health consciousness factor (Health)

In normality analysis of health consciousness factor is shown in the Q-Q plot of graph is standard normal distribution but is not well structures as well but result are representing as normal probability plot.

From analysis of normality of all variable items, analysis results shown that almost all variables in this research study except consumer intention factor are normal in a sense and all of combinations are normal probability plot without any univariate distribution of the result graph. In consumer intention factor, item has a not well defined in QQ plot but it is acceptable for the educational research.

Homoscedasticity analysis

Homoscedasticity is another test method which is dealing with the constancy of the residuals across of independent variables value. Homoscedasticity was analysis through the residuals examination which represents no patterns of increase or

decrease in residuals. The result of homoscedasticity analysis is realize to make a prediction to be better in the level of independent variable (Joseph F. Hair, Black et al. 2010).

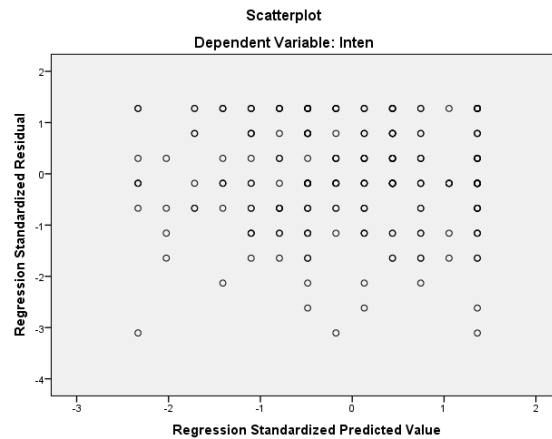


Figure 13: The relationship between standardized residual and standardized predicted value which is follow by reference group as an independent variable

The homoscedasticity analysis of consumer intention with reference group show by scatter plot graph which is unbiased and homoscedastic.

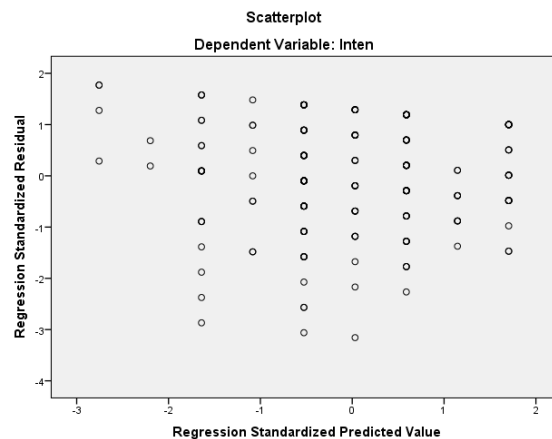


Figure 14: The relationship between standardized residual and standardized predicted value which is follow by perceived price as an independent variable

The homoscedasticity analysis of consumer intention with perceived price show by scatter plot graph which is unbiased and homoscedastic.

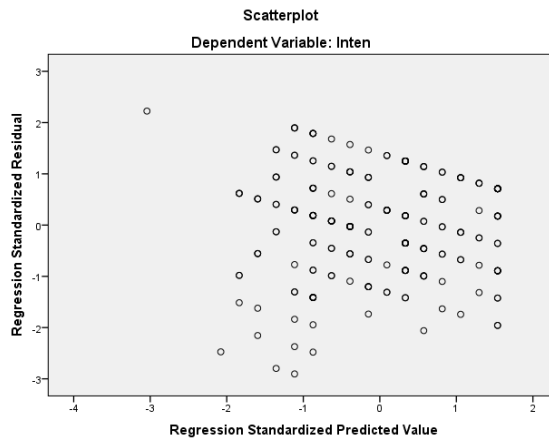


Figure 15: The relationship between standardized residual and standardized predicted value which is follow by nutrition self-efficacy as an independent variable

The homoscedasticity analysis of consumer intention with nutrition self-efficacy show by scatter plot graph which is unbiased and homoscedastic.

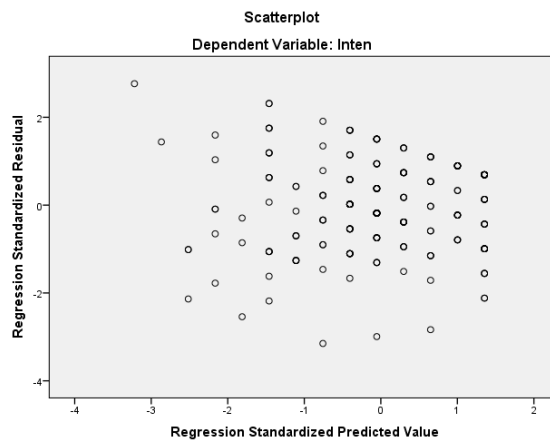


Figure 16: The relationship between standardized residual and standardized predicted value which is follow by health consciousness as an independent variable

The homoscedasticity analysis of consumer intention with health consciousness show by scatter plot graph which is unbiased and homoscedastic.

According from research analysis with homoscedasticity analysis testing represented in form of residual plot which is show the meaning of the variance around the regression line which is same values of the predict variable. In this research, all the independent variables are unbiased and homoscedastic.

4.3.2 Test of model assumptions of multiple regressions

Normality analysis

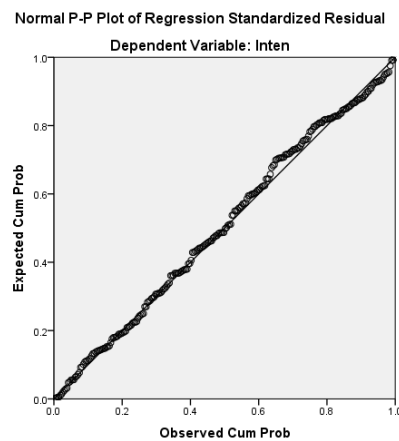


Figure 17: The statistical distribution of dependent variable with all matric variables

From multiple regression analysis of normality test, the result was shown that the matric variable is normal distribution with a good model of data set. Normality in multiple regression analysis seize that all of variable items are normal distribution.

In analyze process, the researcher point out to normally distribute by focus on the plot graph of residuals value with estimate a normal curve.

Homoscedasticity analysis

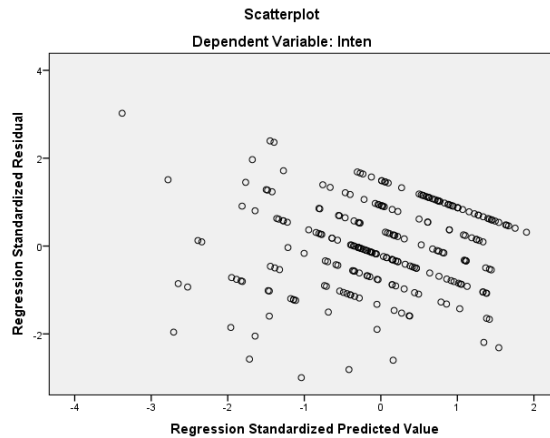


Figure 18: The relationship between standardized residual and standardized predicted value which is follow by matrix variable.

Homoscedasticity analyze is the method used to determine level of variance which is correlate over all of independent variables level. From the above graph, graph show where the variance of matrix variable is compare across the four nonmetric variables. Good homoscedasticity result should have the same scatter in graph. From data analysis, the result was show scattered which mean matrix variable are in the same extent but also have a problem which is not mean so much to effect the research result. The homoscedasticity result is a kind of acceptable result in educational research study.

Multicollinearity analysis

Table4.10: Model summary analysis

Model Summary ^b					
Model	Change Statistics				
	R Square Change	F Change	df1	df2	Sig. F Change
1	.281 ^a	23.994	4	245	.000

a. Predictors: (Constant), Health, Refer, Perc, Nutri

b. Dependent Variable: Inten

In table 4.15 which are determining the summary of research model are shown as the follow. For research model have a significance value equal to 0.000 which mean all of the variable items are perfectly significant to each other in the model.

Multicollinearity analysis is the analysis method used to determine the independent variables are uncorrelated assumption. Multicollinearity happens when many independent variables correlated in high levels with one another variable it or when one of independent variable is near with a linear combination of another independent variable items. According from (Joseph F. Hair, Black et al. 2010), in multicollinearity analysis use the tolerance and VIF values to analyze multicollinearity which the tolerance value must greater than 0.10 and VIF values must less than 10. An acceptable of the tolerance and VIF should be closer 1.

Table 4.11: Multicollinearity statistic

		Coefficients ^a						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Collinearity Statistics	
		B	Std. Error	Beta			Tolerance	VIF
1	(Constant)	2.090	.255		8.196	.000		
	Refer	-.014	.034	-.022	-.404	.686	.991	1.009
	Perc	-.022	.023	-.059	-.979	.328	.818	1.223
	Nutri	.178	.054	.216	3.269	.001	.671	1.490
	Health	.391	.063	.406	6.199	.000	.683	1.465

a. Dependent Variable: Inten

In multicollinearity analysis where used to analyze among each factors if the result of analysis shown the level of VIF value is equal to 1 which mean no multicollinearity among each variables. If the VIF value is greater than 1, it means moderately correlated between each variable items in research. From table 4.16, the tolerance of research model is between 0.683 to 0.991 and VIF values is

approximately 1.009 to 1.490 which mean the research model is moderately correlated between each variable items.

4.4 Regression results

In the result of regression analysis in table 4.16, the researcher uses multiple linear regression analysis of all independent variables associated with all hypotheses and questions as dependent variable. The result of linear regression analysis exist the significance variable in these research are two variables which is following (nutrition self-efficacy including significant level = 0.001), and (health consciousness including significant level = 0.000). For the significance analysis, the lower level of significance is the more confident in duplicate research result. In educational research, 0.05 and 0.1 level of significance are commonly used because 0.5 of significance level is equally to 95 times in the population sample.

In this research study, A beta value are -0.022 in perceived price factor, -0.014 in reference group, 0.178 in nutrition self-efficacy and 0.391 in health consciousness factor. The beta value is the value that can change a standard deviation such as in nutrition self-efficacy, the beta coefficient value equal to 0.391 which mean change of 0.391 standard deviations in the criterion variable item. The higher beta values the greater impact of the predictor variable on the criterion variable. And in multiple regression analysis, beta coefficient signs which can be plus or minus sign can use to interpret the relationship between variables direction. In case of positive level of B coefficient mean the relationship of those variables with dependent variable is positive. And in contrast, if the B coefficient is negative sign then the relationship between independent variable and dependent variable are negative. Eventually, the B coefficient is equivalent to zero which mean no relate between variables.

4.5 Hypothesis testing

Regression analysis was applied for testing the hypothesis of each factor of research study. Therefore, there is an evident that these four factors have significant; only two factors are the most influence consumer intention to healthy food consumption. Predictors: (constant), reference group, perceived price, nutrition self-efficacy, health consciousness. The hypotheses of this study are concerned with the individual effect of four variables on the intention to healthy food consumption. Therefore (nutri), (health) are supported in this study to summarize, results of hypothesis testing is presented in the table 4.17.

Table 4.12: Summarized result of hypothesis

Hypothesis		Results
H1	Reference group	not supported
H2	Perceived price	not supported
H3	Nutrition self-efficacy	supported
H4	Health consciousness	supported

CHAPTER 5

CONCLUSION

In the last chapter of research, the purpose of undertaking research is to study the main factors that influence consumer intention to healthy food consumption. The research purpose is to find out what is the factor that could be able to motivate consumer intention to consume healthy food.

5.1 Summary of the results

The majority of respondents are female (88.8%) in age 18 – 34 years old range (82.8%) and they are being single (86.4%). They mainly are employee in government and private company with (44.0%) of contribution.

From reliability test by using Cronbach's alpha to analyze with each variable item in each factor, the reliability result are over 0.7 of reliability value except perceive price factor. In P3 item of perceived price is a negative value. Researcher solves the problem by analyzing from Pearson's correlation to find out how correlated in each item and researcher decide to deleted P3 item to increase in more reliability to perceived price factor. After deleted P3 value, the Cronbach's alpha value of perceived price was increasing from 0.443 with 3 items to 0.867 with 2 items of perceived price factor.

In linearity analysis, the relationship for nutrition self-efficacy (nutria) and health consciousness (health) are reasonably well defined which mean these two independent variables strong and significant effects in the regression equation.

From analysis of normality, all variables in this research study except consumer intention factor are normal in a sense and all of combinations are normal probability plot without any univariate distribution of the result graph. In consumer intention factor has a not well defined in QQ plot but it is acceptable for the educational research. And multiple regression analysis of normality test, the result was shown that the matrix variable is normal distribution with a good model of data set that all of variable items are normal distribution with the normal curve.

In homoscedasticity analysis testing represented all the independent variables are unbiased and homoscedastic.

In multicollinearity analysis where used to analyze the tolerance of research model is between 0.683 to 0.991 and VIF values is approximately 1.009 to 1.490 which mean the research model is moderately correlated between each variable items.

In the regression analysis, the result of linear regression analysis exist the significance variable in these research are two variables which is following (nutrition self-efficacy including significant level = 0.001), and (health consciousness including significant level = 0.000). Beta value are -0.022 in perceived price factor, -0.014 in reference group, 0.178 in nutrition self-efficacy and 0.391 in health consciousness factor. The values of beta of nutrition self-efficacy factor and health consciousness factor are the good impact of predictor variable on the criterion variable.

In conclusion, the regression analysis result proves that hypothesis (nutri) and (health) are significant which means that nutrition self-efficacy and health consciousness are two main factors that influence consumer intention to healthy food consumption. And (refer) and (perc) are not significant. Health consciousness

becomes the most important criteria in influence consumer intention to healthy food consumption followed by Nutrition self-efficacy factor and another two factors are not significant (perceived price and reference group). Research result signifies that the most influence factor about healthy trends may influence by consumer attitude which is external factor of individual effect toward to their behavior.

5.2 Discussion

Hypothesis one is the hypothesis assumed that perceived price significantly influences consumer intention to healthy food consumption. This hypothesis is not accepted because the results show high level in significance of regression analysis, the correlation is weak.

Hypothesis two is predicted that reference group significantly influences consumer intention to healthy food consumption. This hypothesis is not accepted because high level of significance.

Hypothesis three is predicted that nutrition self-efficacy significantly influences consumer intention to healthy food consumptions. The results reveal this hypothesis is accepted because the strongly correlation among variables.

Hypothesis four is the last hypothesis which predicted that health-consciousness significantly influences consumer intention to healthy food consumption. This hypothesis is accepted because there us a positive significant relationship between health consciousness and consumer intention.

At last, referred from the Theory of Planned behavior of (Ajzen 1991), the factor that influence consumer intention will be attitude toward behavior, subjective norm and perceived behavioral control. In this research, researcher use those three

factors to study about consumer intention in healthy food consumption by use reference group as an subjective norms but researcher specify reference group as an aspirational group of people who have motivate by social network or celebrity because nowadays, healthy food trend are rapidly growth in Bangkok, Thailand and all respondents know about healthy food from social media such as Facebook, Instagram and Twitter. And for the attitude toward behavior, researcher use nutrition self-efficacy and health consciousness as an factor to determine the attitude of consumer and the result show that the attitude are the most influence consumer intention to healthy food consumption.

5.3 Managerial implications

From business view, the output of this research study is able to be applied to understand more about consumer intention in healthy trend. In healthy food consumption, reference group and perceived price are not the main factors to influence consumer intention but nutrition self-efficacy and health consciousness are the mainly factors which influence healthy food consumer intention to healthy food consumption. In a meanwhile, the most influence factor which study from this research is internal opinion such as attitude of consumer are the most influence. That mean in a real world of business, external influence can influence consumer with some kind of product but in healthy business even healthy food or another healthy product. Despite of that, healthy food provide a variety of benefits, food business should consider launching a new product or new menu to established business growth. By the research result, business can use the advertisement to influence consumer by establishing their consciousness about the health.

5.4 Recommendations for future research

From the paper provides, there are many areas to be investigated in the future as the followings

- The study was gather information from the respondents who are consume more than 5 days in a week, in the future study should be asked from new healthy food consumer or who are interested in healthy food.
- For future research study to study about consumer intention to healthy food consumption have to focus on price sensitivity with reference from their income or family income because in this research, the perception of price is not significant to consumer intention
- In this research, researcher focuses the healthy food consumers whom have an aspiration group as a reference group. The result is very limited to determine the consumer intention by limited their reference group.

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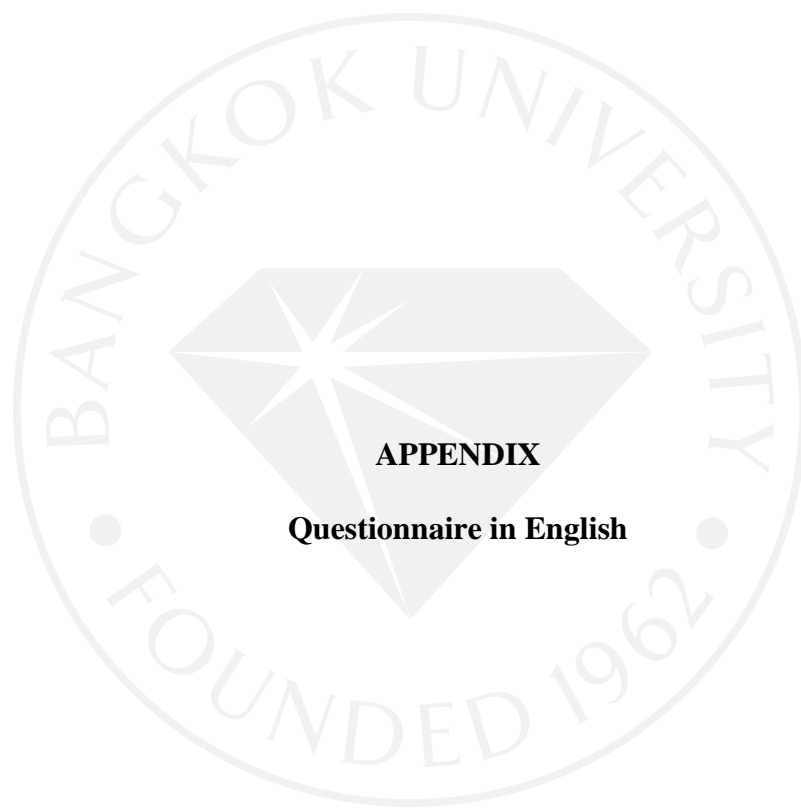
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Questionnaire

Factors effect to consumer intention towards to healthy food consumption in Bangkok, Thailand

Objective of this research is to gather information to study about what are the main factors that effect to consumer intention towards to healthy food consumption in Bangkok area. For Independent Study, Master degree in Business Administration at Bangkok University. Collected data will be use in educational purpose. Finally, thank you for your time and be the part of research.

Instructions: Please mark √ in the space which matches to the most reality and opinions of yours. Questionnaire consists of two parts.

Part 1: Personal Information

Part 2: Factor that effecting to consumer intention towards to healthy food consumption

Part1: Personal Information

1. **Sex :** 1) Male
 2) Female

2. **Age:** 1) 18 – 24 years old
 2) 25 – 34 years old
 3) 34 – 44 years old
 4) Over 45 years old

3. **Status:** 1) Single
 2) Married

4. **Occupation:** Employee
 Homemaker
 Student
 Entrepreneur
 Others

5. **How often do you eat healthy food per week?**
 - Less than 5 days per week
 - More than 5 days per week

How did you get information, recipe of healthy food

- 1) Social Network (Facebook, Twitter or Instagram)
- 2) Friends or Family
- 3) Celebrity
- 4) Others

Instructions:

Please answer the following questions about your opinion by putting \surd in the spaces.

Statement	Level of Agreement				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I would like to be a part of healthy food group					
I look up to this type of person					
I wish I had more friends in this group					

Instructions:

Please answer the following questions about your opinion by putting \surd in the spaces.

Statement	Level of Agreement				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I've been a regular consumer of healthy foods					
I always purchase healthy food for future needs					
I always purchase healthy food, although hard to come by in the market					

How much do you typically spend on healthy food in a meal?

- 1) less than 50฿
- 2) 50฿ - 100฿
- 3) 101฿ - 150฿
- 4) Over 150฿

Instructions:

Please answer the following questions about your opinion by putting √ in the spaces.

Statement	Level of Agreement				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Any payment for healthy food in a meal was a very reasonable price					
I was satisfied in payment for healthy food in every meal					
I think my payment in healthy food in a meal was a rip-off					

Instructions:

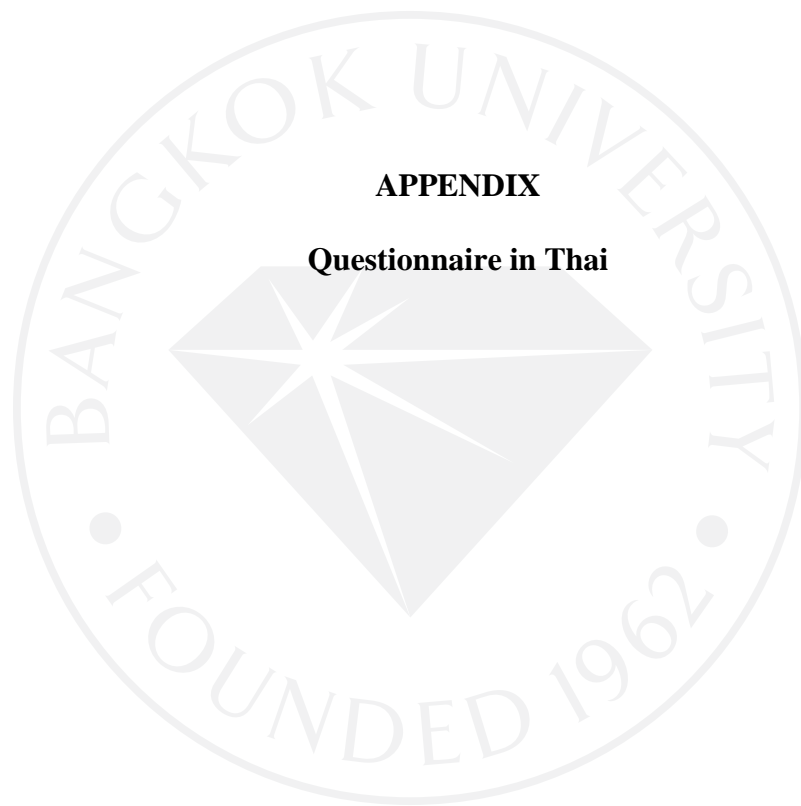
Please answer the following questions about your opinion by putting \surd in the spaces.

Statement	Level of Agreement				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I can manage to stick to healthy food consumption...					
Even if I have to learn much about nutrition					
Even if I have to watch out in many situations					
Even if I have to try several times until it works					
Even if I have to rethink my entire way of nutrition					
Even if I initially do not receive much support					

Instructions:

Please answer the following questions about your opinion by putting \surd in the spaces.

Statement	Level of Agreement				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I reflect about my health a lot					
I'm very self-conscious about my health					
I'm generally attentive to my inner feelings about my health					
I am constantly examining my health					



APPENDIX

Questionnaire in Thai

แบบสอบถามการวิจัย

เรื่อง ปัจจัยที่มีอิทธิพลต่อพฤติกรรมการบริโภคผลิตภัณฑ์อาหารสุขภาพ

ของผู้บริโภคในเขตกรุงเทพมหานคร

แบบสอบถามฉบับนี้มีวัตถุประสงค์เพื่อใช้ในการเก็บรวบรวมข้อมูลเพื่อการศึกษาปัจจัยที่มีอิทธิพลต่อพฤติกรรมการบริโภคอาหารเพื่อสุขภาพของผู้บริโภคในเขตกรุงเทพมหานคร เพื่อนำมาใช้ในการประกอบการเรียนการสอนในวิชาค่าน้ำอิสระ หลักสูตรปริญญาโท คณะบริหารธุรกิจ มหาวิทยาลัยกรุงเทพ โดยข้อมูลส่วนตัวของท่านจะไม่ได้รับการเปิดเผยหรือนำไปใช้ประโยชน์อื่นใดนอกจากเพื่อการศึกษาเท่านั้น สุดท้ายนี้คณะผู้วิจัยต้องขอขอบพระคุณท่านอย่างสูงในการเสียสละเวลาช่วยตอบแบบสอบถามมา ณ ที่นี้ด้วย

คำชี้แจง: 1. กรุณาทำเครื่องหมาย ✓ ลงในช่องว่างที่ตรงกับความเป็นจริงหรือความคิดเห็นของท่านมากที่สุดแบบสอบถามนี้มี 2 ส่วนดังนี้

ส่วนที่ 1 เป็นแบบสอบถามเกี่ยวกับข้อมูลส่วนบุคคล

ส่วนที่ 2 เป็นแบบสอบถามเกี่ยวกับข้อมูลปัจจัยที่มีอิทธิพลต่อพฤติกรรมการบริโภคอาหารสุขภาพ (Healthy food)

ส่วนที่ 1 ข้อมูลส่วนบุคคล (Personal Information)

2. เพศ: 1) ชาย

2) หญิง

2. อายุ: 1) 18-24 ปี

2) 25-34 ปี

3) 34-44 ปี

4) 45 ปี ขึ้นไป

3. สถานภาพ: 1) โสด
 2) สมรส
4. อาชีพ: พนักงานเอกชน/ข้าราชการ
 แม่บ้าน/พ่อบ้าน
 นักเรียน/นักศึกษา
 เจ้าของกิจการ
 อื่นๆ โปรดระบุ.....
5. ความถี่ในการบริโภคอาหารเพื่อสุขภาพของคุณ
- น้อยกว่า 5 วันต่อสัปดาห์
- 5 วันต่อสัปดาห์ขึ้นไป

ปกติคุณรับรู้ข่าวสารข้อมูล สูตรอาหารเกี่ยวกับอาคารเพื่อสุขภาพจากแหล่งใดมากที่สุด

1) สื่อออนไลน์ (facebook, twitter, หรือ instagram)

2) คนรอบข้าง (เพื่อนสนิท หรือ บุคคลครอบครัว)

3) บุคคลมีชื่อเสียง

4) อื่นๆ.....

กรุณาทำเครื่องหมาย ✓ ในช่องว่างด้านล่างทุกข้อตามความคิดเห็นของท่านว่าเห็นด้วยหรือไม่เห็นด้วยเพียงใด
กับข้อความด้านล่าง

ด้านอิทธิพลจากกลุ่มอ้างอิง	ระดับความคิดเห็น				
	ไม่เห็น ด้วยอย่าง ยิ่ง	ค่อนข้าง ไม่เห็น ด้วย	เห็นด้วย และไม่เห็น ด้วยพอๆกัน	ค่อนข้าง เห็นด้วย	เห็นด้วย อย่างยิ่ง
ฉันอยากเป็นส่วนหนึ่งของกลุ่มผู้บริโภค อาหารเพื่อสุขภาพ					
ฉันชื่นชมบุคคลต้นแบบในการบริโภค อาหารเพื่อสุขภาพของฉัน					
ฉันหวังว่าฉันจะมีเพื่อนเพิ่มมากขึ้นจาก กลุ่มคนที่บริโภคเพื่อสุขภาพ					

กรุณาทำเครื่องหมาย ✓ ในช่องว่างด้านล่างทุกข้อตามความคิดเห็นของท่านว่าเห็นด้วยหรือไม่เห็นด้วยเพียงใด
กับข้อความด้านล่าง

ด้านความตั้งใจในการบริโภค	ระดับความคิดเห็น				
	ไม่เห็น ด้วยอย่าง ยิ่ง	ค่อนข้าง ไม่เห็น ด้วย	เห็นด้วย และไม่เห็น ด้วยพอๆกัน	ค่อนข้าง เห็นด้วย	เห็นด้วย อย่างยิ่ง
ฉันบริโภคอาหารเพื่อสุขภาพเป็นประจำ					
ฉันเลือกซื้ออาหารเพื่อสุขภาพเป็นประจำ					
ฉันซื้ออาหารเพื่อสุขภาพเสมอแม้ว่าช่อง ทางการจัดจำหน่ายมีน้อย					

ช่วงราคาของอาหารเพื่อสุขภาพที่คุณรับประทานในแต่ละมื้อ

- 1) ต่ำกว่า 50 บาท
- 2) 50 – 100 บาท
- 3) 101- 150 บาท
- 4) สูงกว่า 150 บาท

กรุณาทำเครื่องหมาย ✓ ในช่องว่างด้านล่างทุกข้อตามความคิดเห็นของท่านว่าเห็นด้วยหรือไม่เห็นด้วยเพียงใด
กับข้อความด้านล่าง

ด้านราคา	ระดับความคิดเห็น				
	ไม่เห็น ด้วยอย่าง ยิ่ง	ค่อนข้าง ไม่เห็น ด้วย	เห็นด้วย และไม่เห็น ด้วยพอกัน	ค่อนข้าง เห็นด้วย	เห็นด้วย อย่างยิ่ง
คุณคิดว่าราคาค่าอาหารเพื่อสุขภาพที่คุณ จ่ายข้างต้นเหมาะสม					
คุณพอใจกับราคาค่าอาหารเพื่อสุขภาพในแต่ละ มื้อ					
คุณคิดว่าราคาค่าอาหารเพื่อสุขภาพในแต่ละ มื้อไม่คุ้มค่า					

กรุณาทำเครื่องหมาย ✓ ในช่องว่างด้านล่างทุกข้อตามความคิดเห็นของท่านว่าเห็นด้วยหรือไม่เห็นด้วยเพียงใด
กับข้อความด้านล่าง

ด้านการรับรู้ความสามารถของตนเองต่อ การบริโภคอาหารสุขภาพ	ระดับความคิดเห็น				
	ไม่เห็น ด้วยอย่าง ยิ่ง	ค่อนข้าง ไม่เห็น ด้วย	เห็นด้วย และไม่เห็น ด้วยพอกัน	ค่อนข้าง เห็นด้วย	เห็นด้วย อย่างยิ่ง
ฉันสามารถบริโภคอาหารเพื่อสุขภาพได้ตามที่ตั้งใจได้สำเร็จ...					
แม้ว่าฉันจะต้องศึกษาเกี่ยวกับคุณค่าทาง โภชนาการอาหารเป็นอย่างมาก					
แม้ว่าฉันจะต้องระมัดระวังเกี่ยวกับคุณค่า ทางโภชนาการของอาหารเพื่อสุขภาพใน แต่ละมื้อ					
แม้ว่าฉันจะต้องพยายามลองบริโภคอาหาร เพื่อสุขภาพหลายๆครั้งจนประสบ ความสำเร็จ					
แม้ว่าฉันจะต้องคิดทบทวนเกี่ยวกับ หลักการทางโภชนาการอาหารใหม่ ทั้งหมด					
แม้ว่าฉันจะไม่ได้รับการสนับสนุนจากคน รอบข้าง					

กรุณาทำเครื่องหมาย ✓ ในช่องว่างด้านล่างทุกข้อตามความคิดเห็นของท่านว่าเห็นด้วยหรือไม่เห็นด้วยเพียงใด
กับข้อความด้านล่าง

ด้านทัศนคติต่อการบริโภคอาหารสุขภาพ	ระดับความคิดเห็น				
	ไม่เห็น ด้วยอย่าง ยิ่ง	ค่อนข้าง ไม่เห็น ด้วย	เห็นด้วย และไม่เห็น ด้วยพอกัน	ค่อนข้าง เห็นด้วย	เห็นด้วย อย่างยิ่ง
ฉันพิจารณาเกี่ยวกับสุขภาพของฉันอย่าง สม่ำเสมอ					
ฉันคำนึงถึงสุขภาพของฉันอย่างมาก					
ฉันใส่ใจความรู้สึกของตัวเองเกี่ยวกับ สุขภาพของฉัน					
ฉันตรวจสุขภาพอย่างสม่ำเสมอ					

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