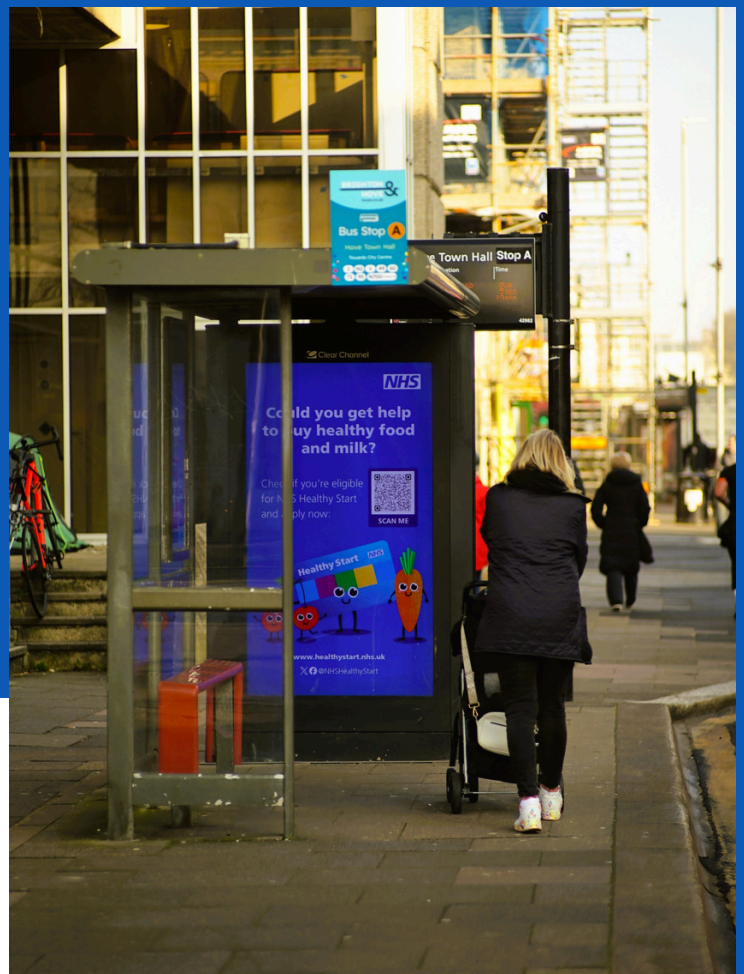


BRIGHTON & HOVE UK

FEBRUARY - MARCH 2025

ASSESSING THE IMPACT OF BUS STOP ADVERTISING FOR HEALTHY START SCHEME AWARENESS IN BRIGHTON AND HOVE

EVALUATION REPORT



FOODSEQUAL PROGRAMME

UNIVERSITY OF SUSSEX,
BRIGHTON & HOVE FOOD PARTNERSHIP,
AND
BRIGHTON AND HOVE COUNCIL

Could you get help to buy healthy food and milk?

Check if you're eligible
for NHS Healthy Start
and apply now:



SCAN ME



www.healthystart.nhs.uk

  @NHSHealthyStart

ASSESSING THE IMPACT OF BUS STOP ADVERTISING FOR HEALTHY START SCHEME AWARENESS IN BRIGHTON AND HOVE

EVALUATION REPORT

Research and Report produced by:

Katerina Psarikidou (SPRU),
Pablo Ayala-Villalobos (SPRU),
Angela Blair (B&H City Council),
Shelley Taylor (B&H Food Partnership),
Meg Lewis (B&H City Council),
Emma Moore (B&H Food Partnership),
Cailan Magee (B&H Food Partnership) and
Rachel Fricker (B&H Food Partnership).

Brighton & Hove, United Kingdom June 2025



For further information regarding this research study, please contact:

- Dr Katerina Psarikidou (SPRU, University of Sussex):
a.psarikidou@sussex.ac.uk
- Dr Pablo Ayala Villalobos (SPRU, University of Sussex):
p.ayala-villalobos@sussex.ac.uk

Any concerns regarding the conduct of the study can be directed to the Chair of the Social Sciences & Arts Cross-Schools Research Ethics Committee (SSARTA C-REC) at the University of Sussex: recss@sussex.ac.uk.

The Research was funded by FoodSEqual Project and UK Research and Development (UKRI)

Brighton & Hove, United Kingdom June 2025

EXECUTIVE SUMMARY

This report evaluates a digital bus stop advertising campaign run in Brighton & Hove during early 2025 to raise awareness of the Healthy Start scheme, a vital UK government program providing nutritional support to low-income families with young children. While the campaign faced challenges, it offers valuable lessons for future public health initiatives.

Key Findings:

- *Bus Stop Adverts Influence Habits:* Advertising is an impactful tool for influencing people's everyday eating practices. Over half of the survey respondents (56%) believe that bus stop adverts affect their family's eating habits, confirming their role as an influential channel in the urban environment.
- *Strong Public Appetite for Healthier Ads:* There is a significant public desire for more positive, healthy food advertising. An overwhelming majority (86%) of residents are happy to see adverts with positive food messages, coupled with considerable dissatisfaction with the prevalence of junk food promotions. This validates using bus stop advertising for public health campaigns.
- *Visibility and Recall are Key Challenges:* The campaign's visibility was somewhat limited, with only a quarter of respondents recalling the specific bus stop advert. This highlights the difficulty of cutting through a visually congested urban environment, a challenge compounded by the short display time of just 6 to 10 seconds for digital ads.
- *Trust is a Major Strength:* The campaign's credibility was its strongest asset. The prominent use of the NHS logo generated significant trust, with 87% of respondents stating they would trust such an advert.
- *High Potential and Community Support for Healthy Start:* The evaluation revealed a strong potential for the scheme's uptake. A majority of residents (55%) reported they would be likely to apply in the next month if eligible, and a high proportion (75%) were willing to share the information with others, indicating strong community support for the programme.
- *Clarity Drives Action, Not Just Visibility:* Simply noticing the advert did not guarantee action. Instead, the perceived clarity of the message was identified by respondents as the most significant factor in motivating people to consider applying for the scheme.
- *Bridging the Gap from Awareness to Action:* While there was high willingness to engage (e.g., scan a QR code or share information), converting this interest into applications requires overcoming specific barriers. Feedback consistently pointed to a need for clearer upfront eligibility information and non-digital alternatives (like a phone number) to improve accessibility.
- *Diverse Audience Engagement:* The campaign resonated differently across the population. Analysis identified three distinct audience segments: a highly "Engaged & Receptive" group (21%), a "Cautious but Persuadable" group (32%), and a "Somewhat Disengaged" segment (47%). This suggests that a one-size-fits-all approach has limitations, and future campaigns would benefit from tailored strategies.



INTRODUCTION

This report presents an evaluation of a digital bus stop advertising campaign designed to promote the Healthy Start scheme in Brighton and Hove during February and March 2025. The Healthy Start scheme is a UK Government initiative aimed at supporting families with children under four and pregnant individuals on low incomes. The campaign aimed to increase awareness and uptake of the scheme, particularly among eligible families. This evaluation not only assesses the campaign's impact but also reveals a significant and supportive public appetite for such health-focused social messaging in the community.

This initiative was undertaken as part of the UKRI FoodSEqual project ('Co-producing Healthy Sustainable Food Systems for Disadvantaged Communities'), specifically focusing on local policy changes to improve community food lives and experiences. Developed in collaboration with local policy organisations, this specific research piece aims to understand public perception of bus stop advertising and assess their effectiveness in raising awareness about Healthy Start. Earlier FoodSEqual research indicated a public desire for advertising featuring positive food messages, which informed the campaign's development (Psarikidou et al, 2024).

The campaign evaluation was a collaborative effort involving researchers at the Science Policy Research Unit (SPRU), University of Sussex, community researchers from the Brighton & Hove Food Partnership, and officers from Brighton & Hove City Council. The timing of the campaign is also noteworthy, occurring within the context of the new Brighton and Hove Food Strategy Action Plan 2025-2030 (B&H City Council, 2025, January 23), as well as the Brighton & Hove City Council's decision to restrict junk food advertising on council-owned sites, including bus shelters, expected to take effect in 2025 or 2026.

BACKGROUND

This section provides context on the Healthy Start scheme, the use of bus stop advertising for public health messaging, and the specifics of the campaign conducted in Brighton & Hove.

The Healthy Start Scheme

Healthy Start is a UK government initiative designed to improve the nutrition of low-income families operating across England, Wales, and Northern Ireland (with Scotland having its distinct Best Start Foods programme). It targets pregnant individuals and families with children under four years old who have low income (household monthly 'take-home pay' or 'earned income' is £408 or less from employment, as in 2025), as well as all pregnant teenagers under 18.

According to the Healthy Start Working Group (2023), the scheme provides a critical nutritional safety net through two main components: a cash allowance and free vitamin supplements. Eligible individuals receive £4.25 per week (£8.50 for infants under one) via a prepaid card. These funds are intended for purchasing specific healthy foods, including fresh, frozen, or tinned fruit and vegetables, pulses, cow's milk, and first infant formula (Feree et al., 2025). Free multivitamins are also provided for pregnant and breastfeeding mothers, infants, and children under four. The scheme recently transitioned from paper vouchers to a digital prepaid card system (Feeding Britain, 2019; Ferree et al., 2025; House of Commons, 2024).

Bus Stop Advertising for Public Health

Bus shelter advertising is a significant out-of-home (OOH) advertising channel in the UK. It forms a major part of street furniture advertising, offering extensive network coverage. The sector has seen significant digital transformation, with static panels increasingly converted to digital screens, allowing for improved targeting and measurement.

Digital bus stop advertising offers extensive reach, potentially connecting with 70-80% of the urban adult population within one to two weeks (Route, 2022). With billions of local bus passenger journeys annually in England and over half the UK population using bus services, bus stops represent high-traffic locations. The average waiting time (dwell time) of 5-10 minutes provides a window for message exposure (JCDecaux, 2021). Furthermore, bus stops allow for hyper-local targeting near essential services or specific demographic areas (Clear Channel, 2021).

Studies indicate the effectiveness of bus stop advertising. Research has shown significant increases in website traffic (98% uplift) and mobile app downloads (79% increase) following exposure (Outfront Media & StreetMetrics, 2023). Ad recall rates can range from 50-70%, with high notice rates among youth (Outsmart, 2022). Public health campaigns utilising bus stop advertising have demonstrated a 20-25% uplift in programme awareness compared to baseline levels, with enhanced impact near essential services and among lower socio-economic groups (Public Health England [PHE], 2019). Research in Edinburgh also found that a significant proportion (48.9%) of bus shelter ads were for food and beverages, suggesting audience receptiveness to nutrition-related messages (Robertson & Thyne, 2020). Previous campaigns, like the "Our Health Is in Our Hands" initiative in New York City targeting obesity, have successfully used bus shelter ads, evaluated through mixed methods including street surveys (George et al., 2016).

The Brighton & Hove Campaign

The bus-shelter advertising campaign evaluated in this report ran in Brighton & Hove during February and March 2025. It utilised 50 digital advertising screens located at bus stops across the city. These screens are part of the city's infrastructure of 508 total bus shelters, 204 of which feature advertising panels managed by Clear Channel. The Healthy Start advert was displayed for 6 to 10 seconds within a one-minute loop on these digital screens.

The campaign's primary objective was to increase awareness and uptake of the Healthy Start scheme among eligible low-income families (pregnant or with children under 4), including non-English speaking families (EAL) and the support workers who interact with them. The simple poster design presented the text "Could you get help to buy healthy food and milk?" with a QR code and website/social media links for the application. This outdoor advertising component was part of a larger promotional effort by Brighton & Hove Council.





METHODOLOGY

This study employed street intercept surveys to evaluate the perception and effectiveness of the Healthy Start digital bus stop advertising campaign in Brighton & Hove. The evaluation primarily focused on gathering direct feedback from individuals present at bus stops where the campaign advertisements were displayed. In line with local stakeholder evaluation needs, based on research co-production methodological principles, the survey questionnaire has been co-designed with Brighton and Hove City Council and Brighton and Hove Food Partnership community researchers.

Data Collection

Data was collected during the campaign period, between February and March 2025, when the particular bus stop advert was displayed. Researchers from the Science Policy Research Unit (SPRU) at the University of Sussex Business School and Community Researchers affiliated with the Brighton & Hove Food Partnership administered the surveys face-to-face at selected bus stops. A total of 207 individuals responded to the survey invitation.

Survey Instrument

A structured questionnaire was developed to assess campaign impact, taking between 5 and 8 minutes to complete. The survey gathered information on several key areas:

- **Demographics:** Residency in Brighton & Hove, age group, presence of children under four in the household, and current use of Healthy Start vouchers.
- **Advert Awareness and Recall:** Whether participants noticed the advert, recall of specific elements (e.g., visuals, QR code), and perceived clarity of the message.
- **Attitudes and Perceptions:** Trust in the advertisement, perceived impact of food advertising on eating habits, and opinions on positive food messaging.
- **Healthy Start Scheme Knowledge:** Prior awareness of the scheme and sources of information.
- **Practice Change and Behavioural Impact:** Actions taken or likely to be taken as a result of seeing the advert (e.g., scanning the QR code, visiting the website, applying for vouchers, sharing information), and likelihood of applying if eligible.
- **Feedback for Further Improvement:** Open-ended questions soliciting likes/dislikes about the advert, suggestions for improvement, and types of other food adverts participants would like to see.

The survey was administered using the Qualtrics platform, approved by the University of Sussex. A QR code linking to the survey was also available on the participant information sheet.

Ethical Considerations

Participation in the survey was entirely voluntary. Potential participants were provided with an information sheet detailing the study's purpose, procedures, and confidentiality measures. Consent was explicitly obtained before commencing the survey. Participants were informed they could skip any questions or withdraw at any time without giving a reason.

All collected information was kept strictly confidential and anonymized during analysis and reporting. Data management adhered to the General Data Protection Regulation (GDPR) and the UK Data Protection Act, with secure storage in University of Sussex folders (Box). The study protocol was submitted for ethical review to the Social Sciences & Arts Cross-Schools Research Ethics Committee (SSARTA C-REC) at the University of Sussex. Contact details for the research team and the ethics committee representative were provided for any queries or concerns.

Assessing the Impact of Bus Stop Advertising for Healthy Start Scheme

We are conducting a survey to understand what people think about the current bus stop advert across Brighton & Hove promoting Healthy Start Vouchers. This research is part of the FoodSEqual project, involving the University of Sussex, Brighton & Hove Food Partnership, and Brighton & Hove City Council.

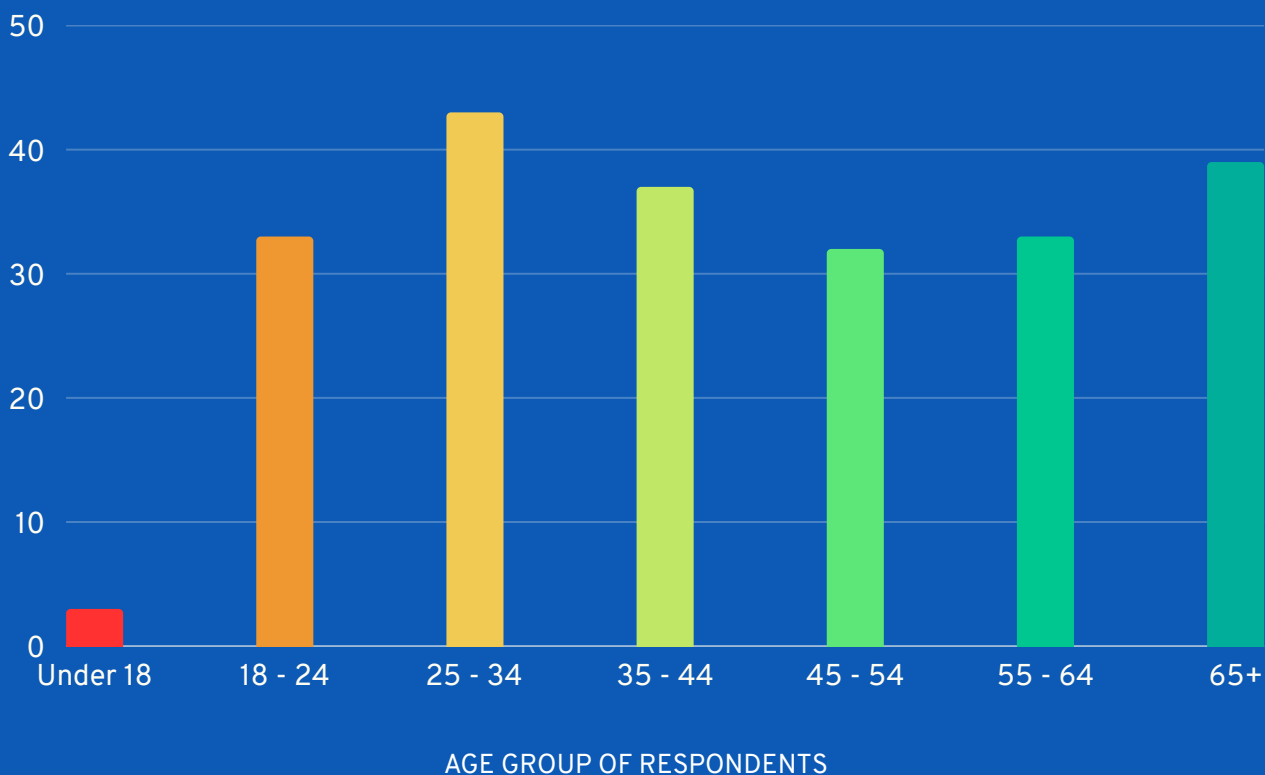
RESULTS

This section details the key findings from the 198 consented survey participants.

Participant Demographics

The majority of survey respondents resided in Brighton & Hove (87%, 170 out of 195 responses). The age distribution was varied, with the largest groups being 25-34 years old (22%) and 65+ (20%). Other represented age groups included 18-24 (12%), 35-44 (18%), 45-54 (16%), 55-64 (12%), and under 18 (2%).

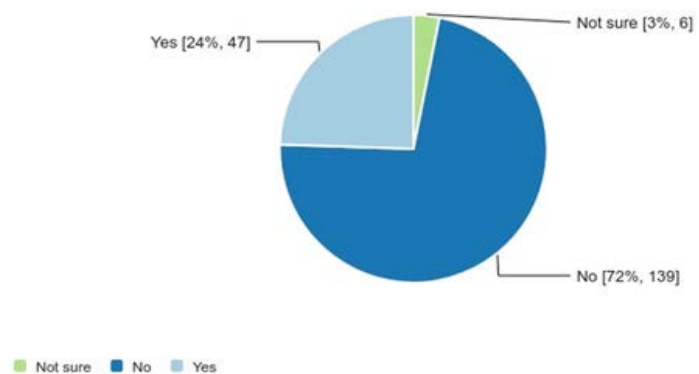
Relatively few participants reported having children under the age of four (10%, 19 out of 198 responses) or currently using Healthy Start vouchers (6%, 12 out of 198 responses).



Healthy Start Scheme Knowledge

Prior awareness of the Healthy Start scheme was low among survey participants. Only 24% (47 out of 192 respondents) reported knowing about the scheme before potentially seeing the advertisement. The vast majority (72%) had not heard of it previously.

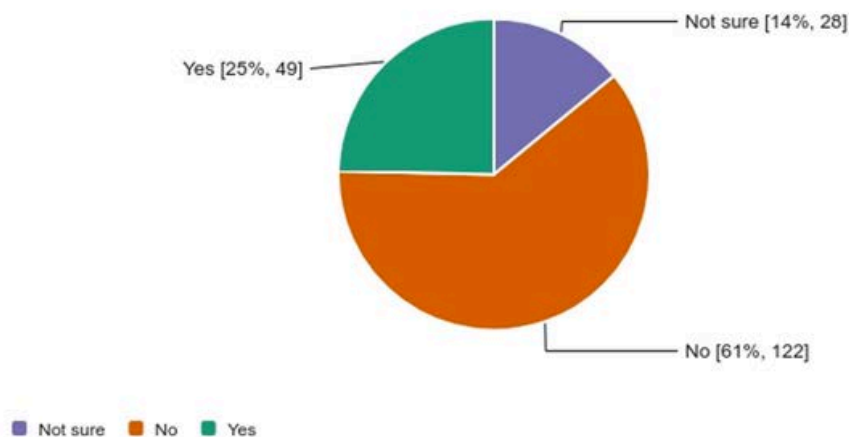
Previous knowledge of Healthy Start:



Advert Awareness and Recall

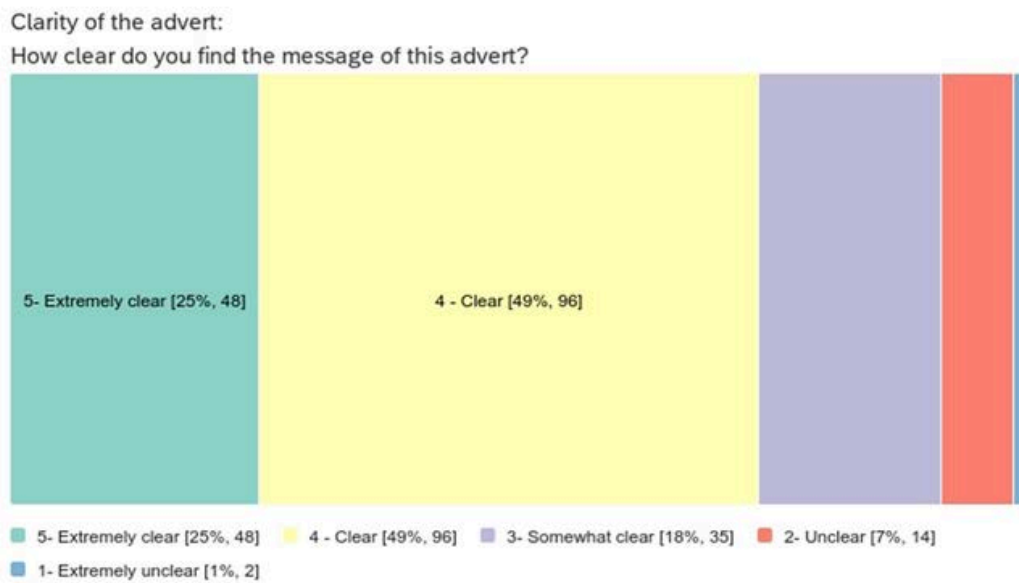
25% of the respondents reported they had noticed the specific Healthy Start bus stop advert (49 out of 199) reporting they had noticed it. The majority had either not seen it (61%) or were unsure (14%).

Awareness of the advert:
Have you seen it?
199 Responses

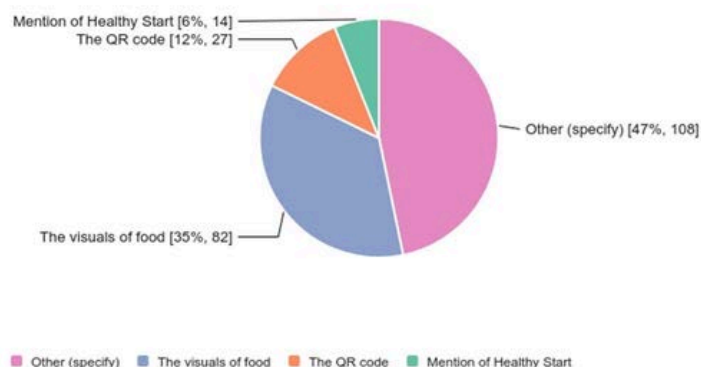


Clarity of Message

Among those who commented on its clarity (195 responses), the message was generally well-received: 74% found it either 'Clear' (49%) or 'Extremely clear' (25%). Only a small percentage found it 'Unclear' (7%) or 'Extremely unclear' (1%).



Design:
What stands out to you about this advertisement?



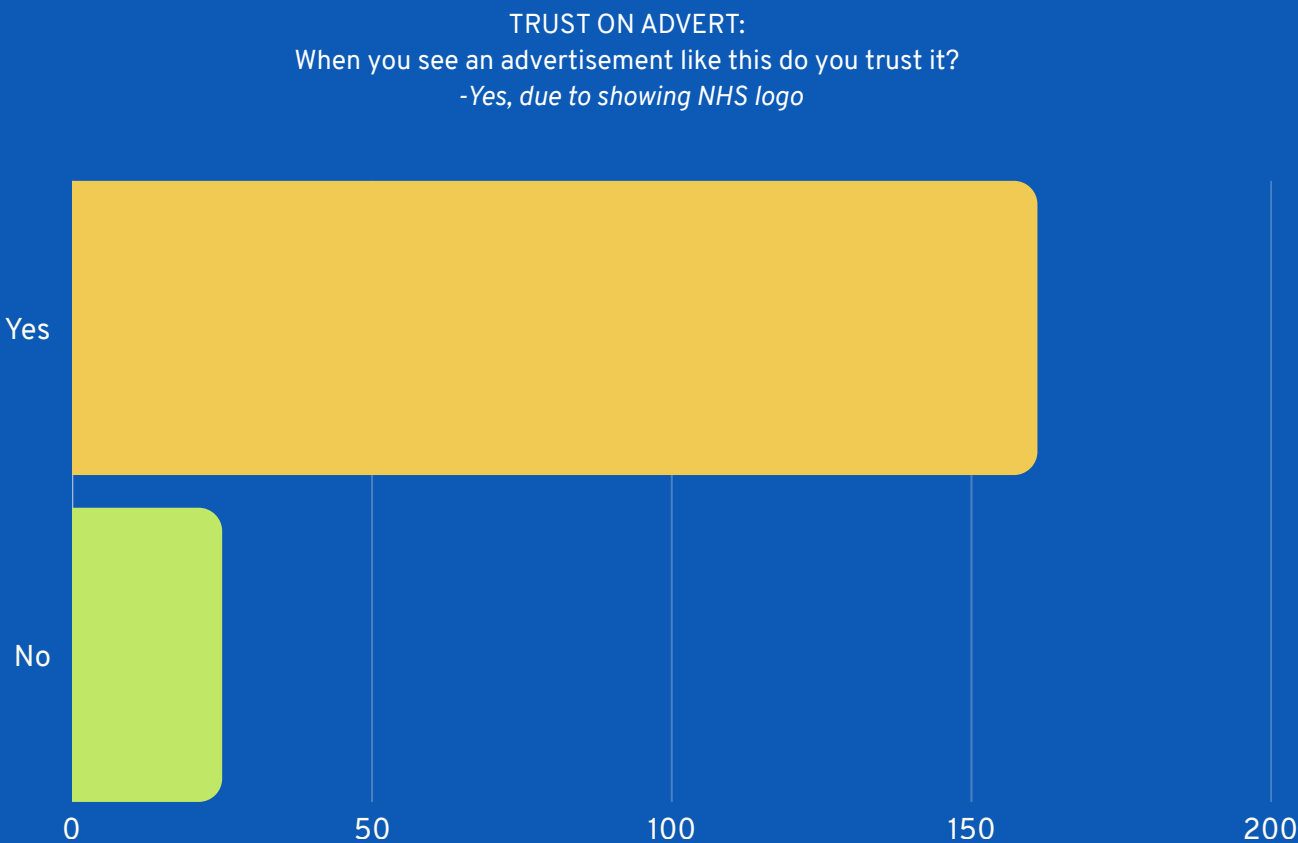
Design

Qualitative data indicated that the visual elements of the advert (food imagery, colour, design) were often the most recalled aspect, followed by the QR code (12% recall) and the NHS branding. Mention of the "Healthy Start" name itself was recalled by only 5%.

Trust and Perception

The advertisement garnered a high level of trust among those who expressed an opinion (186 responses), with 87% stating they would trust an advert like this. The most frequently cited reason for this was the prominent NHS logo and the perceived government affiliation. Typical comments included: "yes because it has NHS on it", "NHS logo", "looks official, NHS", "From government", and "provided by NHS (known gov organisation)". Some also felt it "seems real" or noted it would be "regulated by an advertising board, ethical."

Conversely, reasons for distrust primarily centred on concerns about QR code scams or phishing ("trouble before with QR codes", "been scammed quite a lot") and a general skepticism towards advertising or government ("don't trust adverts at all", "don't trust anything too many scams", "don't trust. NHS or government"). One participant expressed the conflict some felt: "A bit of both really, there are concerns about phishing using QR codes, but it's an NHS advert, so I tend to trust it". Lack of clarity was also mentioned: "It's unclear, there is no direct message and it has the NHS logo on it".

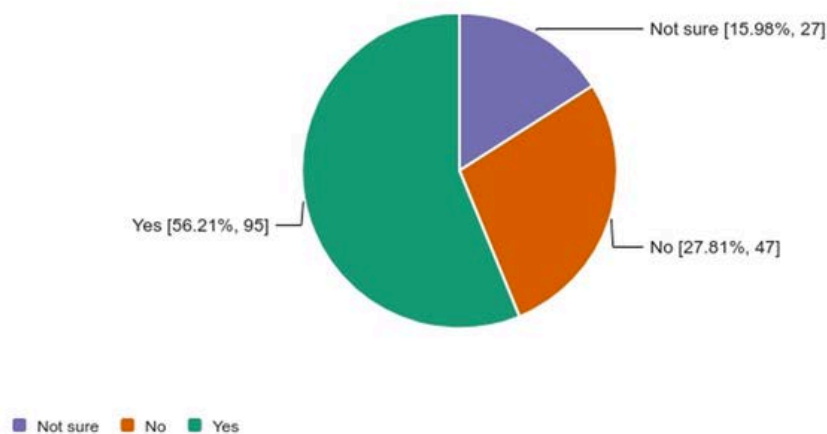


Perception of advertisement over food consumption

Regarding the broader influence of food advertising, over half of the respondents (56%, 95 out of 169) believed that bus stop adverts impact their family's eating habits.

Perception of advertisement over food consumption:

Do you think bus stop adverts around food impact what you and your family eat?

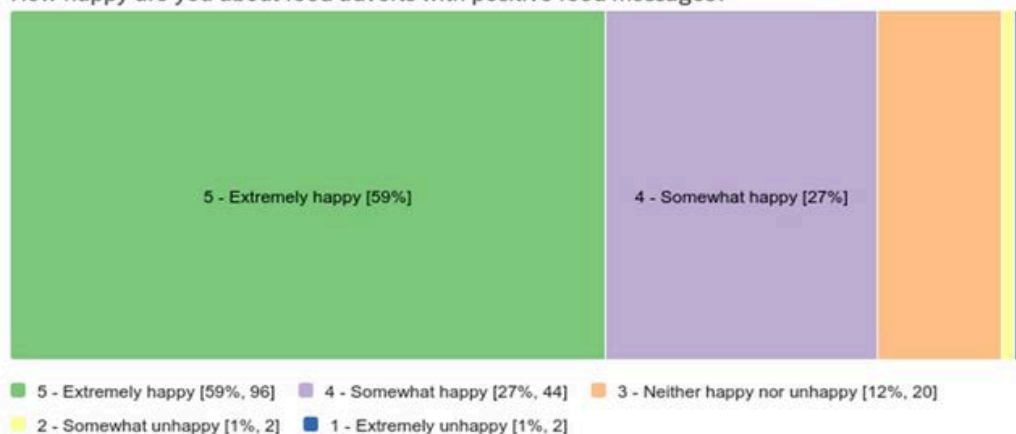


Positive food messages

There was strong support for adverts with positive food messages, with 86% (of 164 respondents) stating they were 'Somewhat happy' (27%) or 'Extremely happy' (59%) about seeing them.

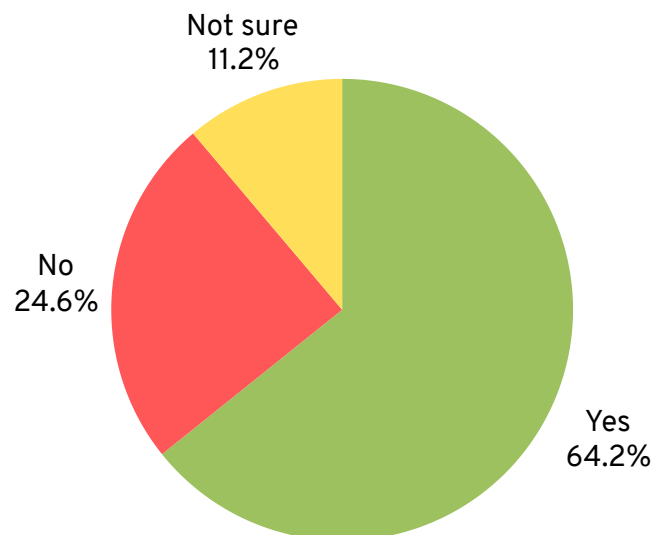
Perception about positive food messages:

How happy are you about food adverts with positive food messages?

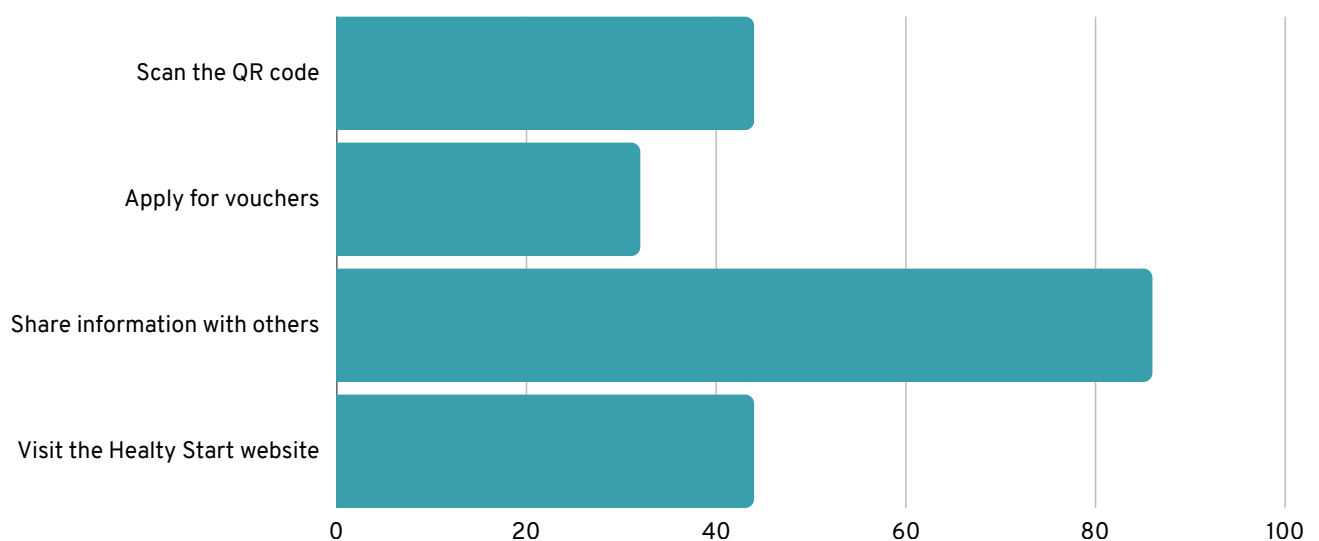


Behavioural Impact and Intentions

When asked if they would click the QR code if they felt eligible, 64% (115 out of 179 respondents) indicated they would, while 25% said they would not and 11% were unsure.



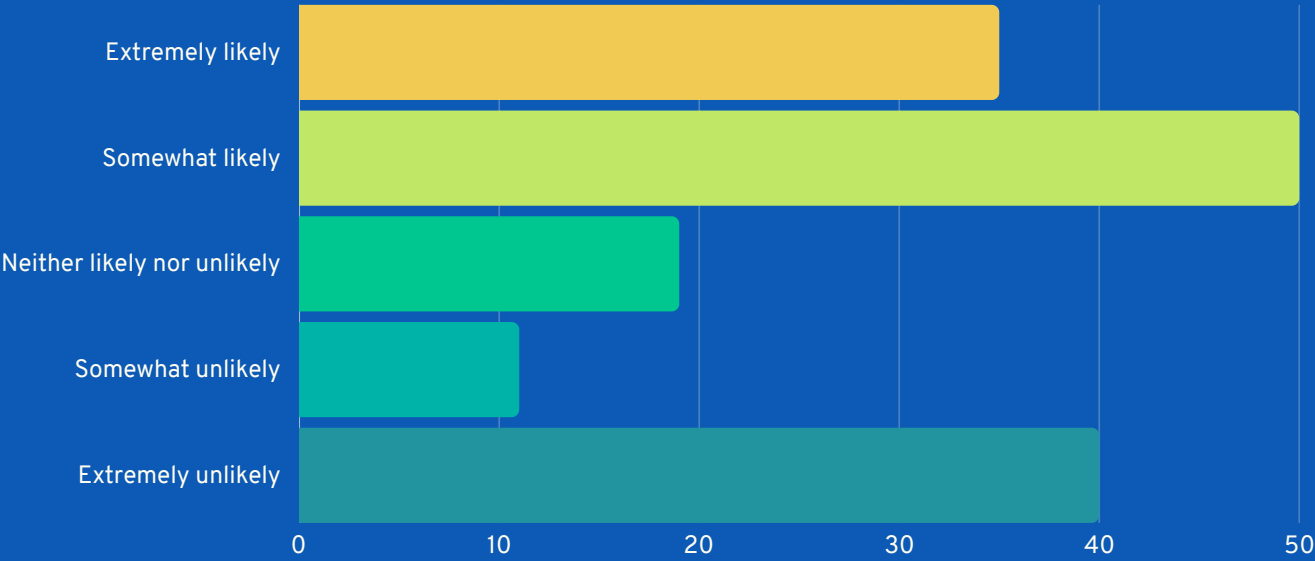
Among those who would potentially click the QR code (115 respondents), the most commonly cited intended action was to share the information with others (75%). Visiting the Healthy Start website and scanning the QR code were equally likely actions (both 38%), while applying for vouchers was mentioned by 28%.



Willingness to apply

Considering future actions among a broader group who answered the question (155 respondents), 55% reported being 'Somewhat likely' (32%) or 'Extremely likely' (23%) to apply for Healthy Start vouchers in the next month if eligible. However, a significant portion remained hesitant or unlikely to apply (26% 'Extremely unlikely', 7% 'Somewhat unlikely', 12% 'Neither likely nor unlikely').

WILLINGNESS TO APPLY IN A TIMEFRAME:
If eligible, how likely are you to apply for Healthy Start vouchers in the next month?



Parents with children under four

Sixteen respondents reported caring for a child under four, representing 10 per cent of the survey sample. Analysis of this subgroup indicates strong alignment with the campaign objectives while revealing a distinct access barrier:

High receptivity to the message

- 87 per cent expressed approval of healthy-food advertising at bus stops.
- 88 per cent agreed that such advertising can influence their family's eating habits.

Willingness to act once eligibility is clear

- 69 per cent stated that they would be very or somewhat likely to apply for Healthy Start if eligible, a level comparable with other respondents.

Digital access remains a constraint

- Only 19 per cent would scan the QR code, compared with 77 per cent among respondents without young children (cross-tabulation of survey microdata).

What this means for families with children under four?

Parents of very young children are managing time, childcare, and digital-access constraints. These conditions generate three practical frictions:

1. Cognitive load

If the eligibility criteria appear complex, busy parents are unlikely to start an application.

2. Channel mismatches

Reliance on a QR code excludes carers who are holding a pram, supervising children, or using a basic mobile phone.

3. Trust and prior experience

Some parents report previous rejections or concerns about unfamiliar links, which discourages a new attempt.

These results suggest that parents of very young children constitute a motivated audience that values the campaign's content and trusts its source, yet faces some practical challenges engaging with a QR-only call to action. Providing an SMS keyword or telephone line alongside a concise eligibility statement, and positioning materials in settings frequently visited by parents, including nurseries, GP practices, and family hubs, could help turning positive intent into applications.

Finally, participants suggested more strategic advert placement, questioning its location "right next to a McDonald's" and proposing placement "closer to schools" or "doctor surgeries, where you take your kids".

There was significant interest in practical tips and nutrition education: "Simple recipes to how to use up or tips to understand food safety & storage, i.e. use-by / best before", guidance on "What type of foods are healthy and guidance on how much to consume", and information specifically for "Childcare support" or "children growing."

Conversely, there was a very strong and frequent call for less junk food advertising: "Lose all the fast junk ads PLEASE", "Less McDonald's less unhealthy", and generally wanting to "Remove the adds, another screen and distraction most of it is junk food and things we don't need". One participant urged action: "Stop the fast food adverts, advertise local markets and community fridges where people can find healthy food cheaply and avoid waste".

Suggestions also included promoting affordable, healthy options ("healthy food, about what to eat and cheap"), local food sources ("locally sourced healthy food"), and culturally relevant foods ("learn about local dishes to share culture"). Some also desired more creative and engaging formats that felt positive and "inviting, not telling".

Suggestions about further food advertisement:
What other food adverts would you like to see?



- **Researcher Observations**

The researchers conducting the surveys noted several qualitative observations during their interactions. Some observations include:

- Participants were generally very interested and engaged in conversations about food.
- Some discussions expressed discontent with the NHS's failure to function as it should due to funding deficits or other reasons.
- Researchers observed that the wider food advertising environment appeared dominated by junk food promotions.
- Different demographic groups interacted differently with the advert; for instance, some older people and individuals identifying themselves as recently-arrived migrants expressed feeling excluded or that the advert wasn't relevant to them, while students and mothers generally held positive views.



Further Analysis

To further assess the factors influencing participants' intentions to apply for Healthy Start vouchers, we conducted an ordinal logistic regression. This statistical method is suitable when the outcome variable is ordered but not continuous. In this case, respondents' self-reported likelihood of applying for vouchers on a five-point scale (from "extremely unlikely" to "extremely likely"). The model estimated the relationship between this outcome and several predictors, including whether the respondent noticed the advert, perceived its message as clear, trusted the advert, had a child under the age of four, and had prior awareness of the Healthy Start scheme. Only complete cases were included in the analysis, resulting in a sample of 151 participants.

The regression results showed that the perceived clarity of the advert was a statistically significant predictor of the likelihood to apply for Healthy Start vouchers ($p = 0.021$). This suggests that clearer messaging may be key in motivating action, highlighting the importance of accessible and well-designed communication. There was also a marginally significant positive association for participants with children under four ($p = 0.063$), aligning with the scheme's target eligibility criteria. Although trust in the advert and prior awareness of the scheme showed positive trends, these did not reach statistical significance. Interestingly, simply noticing the advert was not associated with an increased likelihood of application. These findings reinforce the idea that visibility alone is insufficient. Suggesting that public health messaging should not only be seen but also be trusted, understood, and perceived as relevant to drive engagement. Another potential interpretation, using the nuance of the qualitative observations, is related to the profiles of people who answered positively to questions, who consistently tried to answer positively to all questions.



DISCUSSION

The findings from the evaluation of the Healthy Start digital bus stop advertising campaign in Brighton & Hove offer valuable insights into the potential and challenges of using this strategic urban advertisement for positive food messaging and public health promotion.

Appetite for Healthier Advertising

The findings resonate strongly with the broader policy context in Brighton & Hove regarding restrictions on junk food advertising. Participants tended to show discontent with junk food and strongly desired more positive food messages, focusing on healthy eating, practical tips, fresh ingredients, and local/affordable options. There was vocal opposition to the prevalence of unhealthy food advertising. The strong desire for positive health messaging, particularly evident in the "Engaged & Receptive" segment but also present overall, continues to support the value of initiatives like this. This suggests strong public support for initiatives like the Healthy Start campaign and similar efforts promoting healthier food environments.

NHS Branding: Trust and Perception

The NHS logo was a powerful asset, undeniably establishing the advert's credibility and inspiring trust in its health information. This finding confirms that using established, trusted institutional brands is a cornerstone of effective public health communication.

As a point of context for future campaigns, it is worth noting that general frustrations with broader NHS services were mentioned by a few participants. While this did not appear to impact trust in this specific advert, it remains a background factor in the wider public sphere.

Campaign Effectiveness: A Formula for Trust and Clarity

The campaign revealed a successful formula for creating credible and clear public health messages. The advert achieved an exceptionally high level of trust among residents, with 87% stating they would trust a message like this. This trust was strongly linked to the prominent use of official NHS branding, which participants frequently cited as the primary reason for believing the advert's legitimacy. Furthermore, for those who noticed the advert, the message was highly effective, with 74% finding it 'Clear' or 'Extremely clear'. This highlights a key strength and a valuable lesson for future initiatives: utilising trusted institutional branding is a powerful tool for strengthening credibility in public communication campaigns.

The primary challenge identified was not with the content of the advert, but with its visibility in a busy urban environment⁵. Despite the campaign's strengths in trust and clarity, only a quarter of survey respondents recalled having noticed the specific Healthy Start advert. This relatively low recall rate suggests that cutting through the visual noise of a city, even with digital screens, requires a focused strategy to ensure well-designed messages reach their intended audience.

Engagement Potential and Barriers to Action

The campaign showed strong potential for engagement and information dissemination. The high willingness of respondents to share information with others suggests the campaign could effectively tap into word-of-mouth networks. Furthermore, the significant proportion willing to visit the website or scan the QR code indicates a clear interest in learning more.

Translating this interest into direct scheme uptake is not straightforward, but the feedback from participants provides a clear roadmap for future enhancements. Rather than being viewed as barriers, these points highlight specific opportunities for improvement:

- **Opportunity to Enhance Clarity:** Some participants expressed frustration with needing to scan a code just to determine their eligibility. This presents an opportunity to increase engagement in future campaigns by incorporating key eligibility criteria directly into the advert's design, allowing viewers to quickly assess its relevance.
- **Opportunity to Improve Accessibility:** Concerns about digital exclusion were raised, as the reliance on QR codes can disadvantage those without smartphones or digital confidence, particularly older residents or some migrant groups. This feedback offers a chance to make future campaigns more inclusive by providing simple, non-digital alternatives, such as a dedicated phone number, alongside QR codes.

- **Opportunity to Optimise Timing:** The short 6 to 10-second display time was noted as a practical difficulty for those trying to scan the QR code. This highlights a possibility to significantly boost campaign effectiveness by negotiating longer display times, ensuring viewers have adequate time to read, understand, and act.

Limitations

To provide full context for the findings and to guide the design of future research, the following limitations are acknowledged. The survey relied on convenience sampling at bus stops, which may not fully represent the target population of low-income families eligible for Healthy Start; indeed, only 10% of the sample had children under 4, and 6% used the vouchers. The campaign duration was relatively short (two months), and Researcher observations suggest that the adverts may have only begun appearing two weeks into the two-month intended period, potentially limiting cumulative exposure. The short display time (6 to 10 seconds) was also noted as a practical challenge for QR code engagement.

Furthermore, beyond the remits of this study, a limitation lies at the lack of national data on Healthy Start use. According to NHS Business Services Authority (NHSBSA), (Western, 2024, November 21), a technical data issue resulted in removing the statistics for eligible individuals and any corresponding uptake percentages from January 2023. This has an impact on measuring the uptake of Healthy Start Vouchers, including uptake percentages during the two months of this advertising campaign.

RECOMMENDATIONS

The evaluation of the Healthy Start bus stop advertising campaign provides some actionable recommendations for future public health communication initiatives in Brighton and Hove and some considerations for the Healthy Start scheme itself. Most of these recommendations are based on citizens' points of view rather than other research or political criteria.

Recommendations for Future Advertising Campaigns:

1. Build on Proven Campaign Strengths

The campaign demonstrated a successful formula for creating trusted and well-received public health messages. Future initiatives should continue to:

- *Leverage Trusted Branding:* The use of the NHS logo was a key driver of the campaign's success, resulting in 87% of respondents trusting the advert. Continuing to anchor campaigns with credible, recognised institutional branding is a powerful strategy for building immediate legitimacy.
- *Utilise Positive and Inviting Messaging:* The campaign confirmed a strong public appetite for positive health content. With 86% of people happy to see adverts with positive food messages, future campaigns should continue to frame messages in an "inviting, not telling" manner, meeting a clear citizen demand.

2. Enhance Message Effectiveness and Reach

To build on the strong foundation of trust and clarity, future campaigns can be enhanced through the following:

- *Refine Message Clarity and Specificity:* The campaign message was perceived as clear and helpful by the majority who saw it (74% found it 'Clear' or 'Extremely clear'). To further improve on this success and help viewers assess relevance instantly, adverts should include key eligibility information upfront. Clarifying the core offer (e.g., vouchers for food and vitamins) can also help translate awareness into action more quickly.
- *Boost Visibility to Promote Healthy Choices:* Respondents strongly indicated a desire to see more healthy food advertising and less promotion of junk food. Digital bus stop adverts are a valuable tool for increasing the visibility of healthy food campaigns. This strategy helps meet public demand and contributes to a healthier food environment.
- *Improve Accessibility and Inclusivity:* To ensure these positive messages reach everyone, campaigns should include non-digital alternatives alongside QR codes. Adding a dedicated phone number can effectively cater to individuals without smartphones or those who are less digitally confident.

3. Optimise Visuals and Placement for Maximum Impact

- *Deploy Engaging and Simple Visuals:*
Feedback suggested that bright colours and appealing imagery help advertising campaigns capture attention. Utilising engaging visuals of appealing healthy foods, with fewer words, can make the message more attractive and memorable.
- *Adopt Strategic Placement and Timing:*
Continue using high-traffic bus stops, but also consider placing adverts in other relevant community spaces like GP surgeries, family hubs, and near schools to maximise reach-out of target audiences. Negotiate longer display times (more than 10 seconds) for digital ads in order to give passers-by adequate time to read the information and scan a QR code and, thus, maximise the campaign's impact.

4. Recommendations for Broader Healthy Start Promotion & Scheme Improvement:

- *Implement Multi-Channel Communication:*
Bus stop advertising is a positive tool for raising public engagement and awareness. However, integrating findings into a strategy that also incorporates other communication channels would enhance the success of those campaigns (e.g. targeted mail-outs, SMS messages including translated versions for EAL families), digital outreach, and engagement with local partners from the health, academic, business, and community and voluntary sector as outlined in the "Food Strategy Action Plan 2025-30" plan by Brighton & Hove Council (2025).



CONCLUSION

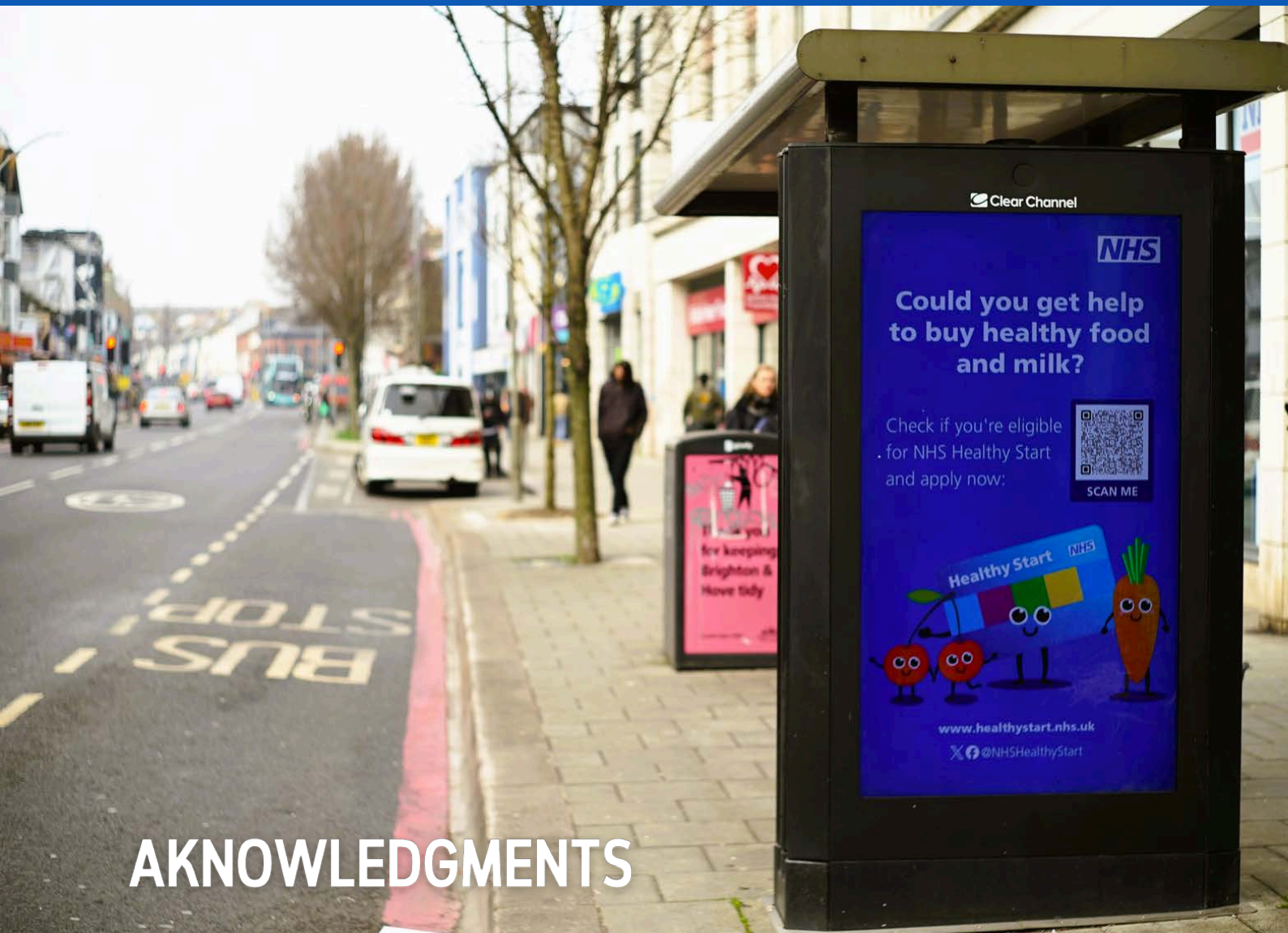
This evaluation of the Healthy Start digital bus stop advertising campaign in Brighton & Hove reveals a positive picture of its potential impact and citizen satisfaction with this type of advertising. The campaign's use of the trusted NHS brand helped achieve high levels of message credibility among those who noticed the adverts. Visibility and impact can be further improved with extended advertisement timeframes and a variety of complementary advertisement types.

Most respondents showed satisfaction with this type of advertisement and expressed a desire for more positive food adverts in a landscape they perceive as dominated by junk food publicity. The strong public appetite for positive health messaging validates the importance of initiatives like this one. It demonstrates considerable public support for efforts by the Council, the Brighton & Hove Food Partnership, the University of Sussex, and other partners to promote a healthier food environment.



The findings highlight the potential for such campaigns to stimulate interest and information sharing through word-of-mouth, yet they also point to opportunities for improvement to better translate awareness into action. While the campaign's overall visibility was a challenge within the short timeframe and busy advertising landscape, the analysis suggests message clarity is the most significant factor in driving engagement, surpassing visibility or baseline trust. Respondents' feedback suggests that including eligibility criteria directly on advertisements, coupled with accessible, non-digital options, is key to interacting with audiences effectively and equitably. For advertisements in public spaces, it is crucial to consider the diverse audiences who will see them, as the message contributes to the community's health dialogue beyond just the primary target group.

Ultimately, this campaign served as a valuable learning exercise, demonstrating that digital out-of-home advertising can be a powerful tool for public health communication. Its effectiveness relies on the careful consideration of message design, accessibility, placement, and integration within a broader, multi-channel strategy. Promoting awareness of the Healthy Start scheme remains crucial, as it provides an essential nutritional safety net for families. This evaluation confirms that bus stop advertising is an effective and well-received method for building public awareness and engagement with the scheme, as well as highlighting the importance of broader public-welfare food and health communication.



ACKNOWLEDGMENTS

We would like to extend our sincere gratitude to all the residents of Brighton & Hove who took the time to participate in the survey and share their valuable perspectives and experiences. Your insights are crucial to this research.

We also acknowledge the dedicated work of the research team, including the Community Researchers from the Brighton & Hove Food Partnership and the Researchers from the Science Policy Research Unit (SPRU) at the University of Sussex.

We would like to thank the Brighton and Hove City Council for developing the Bus Stop Advertising for Healthy Start Vouchers also based on earlier FoodSEqual research findings and for co-designing the survey.

This evaluation was conducted as part of the FoodSEqual project and made possible through the collaboration between the University of Sussex, the Brighton & Hove Food Partnership, and Brighton & Hove City Council.

REFERENCES

- Brighton & Hove City Council. (2025, January 23). *Brighton and Hove Food Strategy Action Plan 2025-30*. Cabinet Report. <https://bhfood.org.uk/wp-content/uploads/2025/04/Food-Strategy-Action-Plan-2025-2030.pdf>
- Clear Channel. (2021). *Why OOH Works: Research & Case Studies*. Clear Channel UK. <https://www.clearchannel.co.uk>
- Feeding Britain. (2019). *Healthy Start*. https://feedingbritain.org/wp-content/uploads/2019/02/Healthy_Start_Uptake-Feeding_Britain_Case_Study_2-1.pdf
- Ferree, T., Childs, R., Sibson, V., & Goudie, S. (2025, April). *Briefing: Strengthening the Healthy Start Scheme to protect children's health*. Ford Foundation. Retrieved from <https://foodfoundation.org.uk/sites/default/files/2025-05/Healthy%20Start%20Briefing%202025.pdf>
- FoodSEqual Project. (2025, April). Results dashboard April. [Unpublished raw data]. University of Sussex/Brighton & Hove Food Partnership.
- George, K., Roberts, C., Beasley, S., Fox, M., & Rashied-Henry, K. (2016). Our health is in our hands: A social marketing campaign to combat obesity and diabetes. *American Journal of Health Promotion*, 30(4), 283–286. <https://doi.org/10.1177/0890117116639559>
- Healthy Start Working Group. (2023, March). *Healthy Start Working Group Policy Positions*. The Food Foundation.
- JCDecaux. (2021). *Bus Shelter & Street Furniture Advertising: Audience and Impact Studies*. JCDecaux UK. <https://www.jcdecaux.co.uk>
- Outfront Media & StreetMetrics. (2023). *Bus advertising measurement report: Impact and effectiveness study*. Outfront Media.
- Outsmart. (2022). *Out-of-Home Overview: Market Insights and Effectiveness*. Outsmart. <https://www.outsmart.org.uk>
- Psarikidou, K., Taylor, S., Roughton, M., Dowbiggin-Lamb, N., Martin, S. (2024) Policies for Transforming UK's food system: insights from Brighton and Hove's local community, Policy@Sussex, June 2024, University of Sussex Policy Briefing Series.
Available online: <https://www.sussex.ac.uk/webteam/gateway/file.php?name=policy-briefing-psarikidou-bhfp-foodsequal.pdf&site=274>
- Public Health England [PHE]. (2019). *Social marketing strategy: OOH and digital synergies for public health interventions*. PHE. <https://www.gov.uk/government/organisations/public-health-england>
- Robertson, K., & Thyne, M. (2020). *Socioeconomic patterning of food and drink advertising at bus stops in Edinburgh, Scotland*. *Public Health Nutrition*, 23(9), 1615–1622. <https://doi.org/10.1017/S1368980019003743>
- Route. (2022). *Route Data Release and Methodology Reports*. Route Research. <https://route.org.uk/research>
- Science Policy Research Unit (SPRU), University of Sussex. (2025). *Participant Information Sheet: Assessing the Impact of Bus Stop Advertising for Healthy Start Voucher Awareness in Brighton and Hove*. University of Sussex.
- Western, A. (2024, November 21). Healthy Start Uptake Data. UK Parliament. Retrieved from <https://questions-statements.parliament.uk/written-statements/detail/2024-11-21/hcws242>