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Assisting dietary change in low-income communities: assessing the impact of a community-based practical food skills intervention (CookWell)

Project number N0911

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1. Executive Summary

1.1 Aims and Objectives

The overall aim of the project was to develop, implement and evaluate a transferable, community-based, food skills initiative (CookWell) aimed at increasing consumption of fibre-rich starchy carbohydrates, fish, vegetables and fruit and decreasing consumption of fat in adults living in areas of deprivation.

The individual objectives were:

- To develop the CookWell programme for use in community-based settings in the UK.
- To develop and pilot all tools for assessing changes in food, nutrient and expenditure, cooking and food preparation skills.
- To identify locations and facilities (in conjunction with the Scottish Community Diet Project) that wish to implement the CookWell programme.
- To implement the CookWell programme.
- To undertake pre- and post-intervention measures in intervention and control subjects.
- To undertake a follow-up (after 6 months) post-intervention measure in intervention and control subjects.
- To analyse and interpret data and to disseminate results.

1.2 Approach

The process of establishing the intervention used a community development approach taking account of the perceived needs of the groups, defined dietary targets and resources (money, time, skills and retail facilities). During the period 2000-2001, the CookWell programme was run in locations throughout Scotland for a period of approximately 2-3 months in each community. Eight communities (with 6-10 participants in, or expected in, the intervention group) were recruited and the programme delivery staggered to allow the project research worker to run the classes as necessary (although local instructors led the groups in 4 of the locations). These communities included those based in a Child and Family project in a church in Dundee, a community education centre in Greenock, a community café in Edinburgh, a child and family centre in Alloa and a community school in Hawick. In nearly all cases a local community worker recruited people to take part.

The development of the programme was informed by results from preliminary focus groups with prospective participants in two of the communities. Popular topics included soups and budget cookery, but interest in fish and vegetables was low. Using this information a CookWell manual was designed to enable facilitators to follow a standardised, but flexible, programme in each community.

Evaluation used pre- and post-assessments of food intakes (highlighted in dietary targets), cooking skills, household food budgets and expenditure in intervention and delayed intervention groups. A 'delayed intervention' group was necessary in each community to provide a control for comparison with those who had joined the CookWell classes. Quantitative evaluations using food diaries, shopping diaries and questionnaires were carried out in intervention and delayed intervention (thereafter called control) subjects at baseline (T1), immediately after the intervention (T2) and 6 months later (T3). Qualitative interviews were also carried out at T3 in a sample of intervention subjects and a small sample of control subjects.

1.3 Key findings

Of the 113 subjects initially recruited 93 completed the T1 assessments (51 intervention and 42 controls). At T3 a total of 63 (36 intervention and 27 controls) completed some or all of the assessments.

Results from the food diaries showed that at T1 the mean frequency of consumption for fruit was approximately twice a week for intervention and control groups. Vegetable and salad consumption amounted to 6 times a week in the intervention group and 7 in the control group. Fish was consumed a mean of once a week with tuna constituting approximately one-third to a half of this. Starchy foods (a total of bread, potatoes (non-fried), pasta, rice and breakfast cereal) were consumed an average of 17 times a week with bread constituting 10, and pasta and rice 2, of these occasions. A mean increase equivalent to one portion a week was seen in the intervention group at T2 for fruit ($P=0.047$), but no other significant changes were seen. This change was not sustained and the mean frequency of consumption of fruit at T3 was similar to baseline levels. Estimated energy intakes were very low and suggested under-reporting by the majority of subjects. There were no significant differences in the mean changes of energy and nutrients from T1 to T2 or T1 to T3 between intervention and control subjects.

The percentage of people cooking from basic ingredients increased in the intervention ($P=0.091$) but not in the control ($P=0.675$) group. There was a significant increase ($P=0.044$) in the proportion of intervention (but not control) subjects reporting confidence in following a recipe over the 8 months of the project, this confidence being maintained at T3.

Post-intervention the qualitative assessments also demonstrated that many subjects were cooking from basic ingredients and buying less convenience food. Popular recipes were soup, scones, tuna bake (incorporating white sauce), chicken curry, pizza, potato wedges and carrot cake. At T3 (6 months after the completion of the intervention) participants reported an increase in their personal confidence and pride, an increased likelihood of tasting and experimenting with new foods, facilitation of new skills and an increased awareness of food preparation and production. It was noted that a separate crèche with familiar workers was also crucial to the attendance of participants with young children. Participants also reported barriers to changing food intake at home including time, demands of looking after young children, taste preferences of family members, and dented confidence if a recipe did not turn out as expected.

The mean cost of the weekly shop at T1 was between £30 and £40 and although this decreased from T1 to T2 there was no significant difference in the change seen for intervention and control subjects. The cost of implementing the 7-week CookWell course was £192 per person and the average cost of food per person per week was £3.80.

1.4 Technical evaluation and interpretation

The results of the assessments contribute to the evidence base on the contribution and value of food skills to healthy dietary choices at reasonable costs. Overall the fruit and vegetable consumption of the participants in the study was lower (<1.5 portions per day) than that of the average consumption (approximately 2.5 portions per day) in Scotland which itself falls below the recommended intake of 5 portions a day. Although the impact of the programme appears to be small in quantitative outcomes the research confirms that a practical food skills intervention can contribute to improving dietary choice. It is also likely that interventions of

this type need to be ongoing and set alongside other measures to improve acceptability, affordability and access to food in low-income communities.

The materials and methods used in the project will be taken forward in conjunction with the Scottish Community Diet Project and for use through the National Food Alliance (Sustain) activities.

2. Glossary of Terms and Abbreviations

Anthropometric measures	In this study, these were measurements of height and weight.
Basal Metabolic Rate	A measure of the energy needed per day to maintain vital functions that sustain life. Can be predicted (as in this study) from standard equations using body weight ¹ .
Benefits (receiving)	In receipt of Retirement Pension, Income Support, Family Credit, Job Seeker's Allowance, Housing Benefit or other state benefits.
BMI	<i>Body Mass Index.</i>
BMR	<i>Basal Metabolic Rate.</i>
Body Mass Index	A measure of body fatness that standardises weight for height. It is calculated as weight (expressed as kilograms) divided by height (expressed as metres squared). It is also known as the Quetelet Index.
C	<i>Control or delayed intervention group.</i>
Control group	Members of a research group who, for the sake of comparison, do not receive the <i>intervention</i> to be tested.
CPHNR	Centre for Public Health Nutrition Research (formerly the Centre for Applied Nutrition Research).
Delayed intervention	Same as <i>control group</i> .
Density (nutrient)	The amount of a nutrient per 4.18MJ (1000kcal). Assesses the quality of the diet rather than the amount consumed.
EI:BMR	Energy Intake:Basal Metabolic Rate. Measures the ratio of energy intake to basal metabolic rate. A ratio of <1.2 is generally considered to be equated with under-reporting of dietary intake.
FE	Further Education
FFQ	Food Frequency Questionnaire.
Food preference	The food selection made when all foods are equally and simultaneously available.
Food skills	The ability to select, purchase and prepare food.
g	gram.

Head of household	The head of household is defined as follows: • in a household containing only a husband, wife and children under the age of 16 years, the husband is always the head of household • in a cohabiting household the male partner is always the head of household • when the household comprises other relatives and/or unrelated persons the owner, or the person legally responsible for the accommodation, is always the head of the household In cases where more than one person has equal claim, the following rules apply: • where they are of the same sex the oldest is always the head of household • where they are of different sex the male is always head of the household
HOH	<i>Head of Household</i>
Household	A household is defined as a single person or group of people who have the accommodation as their only or main residence and who either share one meal a day or share the living accommodation.
I	<i>Intervention group.</i>
Income	Usual gross weekly or monthly income of the household from all sources before tax and other deductions. Chosen from one of 21 income groups using a showcard.
Intervention	The actions applied to members of the experimental but not the control (comparison) group.
Intervention group	The group to whom the <i>intervention</i> to be tested is applied. The data collected are compared with the data about those in the <i>control group</i> .
IQR	Interquartile Range.
kcal	kilocalorie = 1000 calories. A unit used to measure the energy value of a food.
kJ	kilojoule = 1000 joules. A unit used to measure the energy value of a food. One kcal = 4.184kJ.
kg	kilogram = 1000g.
Manual social class	Households where the head of household is in an occupation ascribed to Social Classes III manual, IV or V.

Marital status	Married and cohabiting (cohabiting includes anyone living with their partner [of the other gender] as a couple); single; widowed; divorced; separated.
Mean	The average value.
Median	The median of a distribution divides it into two equal parts, such that half the cases in the distribution fall, or have a value, above the median, and the other half fall, or have a value below the median.
mg	milligram = one-thousandth of 1g.
MJ	megajoule = 1000 kJ.
National Food Alliance	See Sustain.
NFA	<i>National Food Alliance.</i>
Non-manual social class	Households where the head of household is in an occupation ascribed to Social Classes I, II, or III non-manual.
NSP	Non-starch polysaccharides. A precisely measurable component of foods. The best measure of ‘dietary fibre’.
Nutrient density	See <i>density (nutrient)</i> .
RSA	Royal Society for the encouragement of Arts, Manufactures and Commerce
SCDP	<i>Scottish Community Diet Project.</i>
SCE	Scottish Certificate of Education.
Scottish Community Diet Project	Set up ‘to promote and focus dietary initiatives within low-income communities and to bring these within a strategic framework.’
SD	Standard deviation.
Social class	Based on Registrar General’s (1991) <i>Standard Occupational Qualification</i> , Volume 3. HMSO, London. Social class is ascribed on the basis of the occupation of the head of household.
Sustain	Formerly the <i>National Food Alliance</i> . An association that promotes better food and farming.
T1	Time 1. Baseline measurement time – pre-intervention.

T2	Time 2. Two months from baseline – immediately post-intervention.
T3	Time 3. Eight months from baseline – six months post-intervention.
µg	microgram = one-millionth of 1g.
UK	United Kingdom.

3. Introduction

It is widely recognised that a diet rich in starchy carbohydrates, fruits and vegetables and low in fats (especially saturated fats) is likely to delay the development of the major causes of morbidity and mortality in the UK (namely coronary heart disease, strokes and cancer, obesity, non-insulin dependant diabetes and dental decay).¹⁻³ Achieving dietary change in the entire population presents a major public health challenge, but particularly so in low-income households where the contribution of nutrition to inequalities in health has been well described.⁴⁻⁶

For many socially disadvantaged families, practical issues restrict attaining a healthy varied diet. These include ready access to affordable food items, limited disposable income, cooking facilities and cooking skills combined with family preferences and misconceptions about current dietary guidelines. A number of studies⁷ suggest that, in addition to personal social disadvantage (e.g. socio-economic status) poor neighbourhoods provide fewer opportunities for health promoting activities than more affluent communities. In low income households, domestic food preparation is often reported to play a key part in balancing household budgets.⁷ Dowler *et al.*⁸ have demonstrated that lone-parents who “*regularly cooked from fresh or raw ingredients...achieved healthier dietary variety for themselves and their children*”. However confidence in cooking techniques is strongly related to income and social class⁹ with a higher percentage claiming confidence in techniques such as boiling, steaming, grilling and oven-baking in the high as opposed to low-income groups.

The relationship between food skills and dietary intake has not been studied in any systematic manner in adults. One study showed that cooking skills were positively associated with vitamin C, fruit and vegetable intake and negatively associated with convenience food consumption¹⁰ and a more recent Department of Health funded project has shown that boys, but not girls (aged 11-12 from a deprived social background) increased their fruit and vegetable consumption following a 20-week after-school food skills club.¹¹ For adults, evaluation reports from studies in Glasgow, Grampian and Leicester report participants claiming that they have made changes to their eating habits and increased vegetable and fruit consumption.¹²⁻¹⁴ However the impact of interventions to improve food preparation skills on nutrient and financial factors has not been studied in detail. Designing and implementing successful health interventions for socially disadvantaged people necessitates building on existing community projects and avoiding a ‘top down’ approach. In many areas of social disadvantage, local food projects such as ‘*Get Cooking!*’¹⁵ and national campaigns as run by the RSA^{16, 17} have developed to address barriers to progressing dietary change. These vary in success, but community ownership (where local people are regarded as equal partners) has been described as a key feature and an important factor in the design of projects targeted at disadvantaged communities.⁷ It is recognised that dealing with any one barrier to dietary change is unlikely to radically alter dietary behaviour, that will have developed over a lifetime, but pilot studies suggest that food skills interventions may be a useful starting point for initiating dietary change. They may lead on to the development of other issues such as self-esteem or community capacity to develop and tackle the food supply in an area.^{14, 18}

An audit of Community Food Initiatives in Scotland¹⁹ has documented over 170 ongoing food and health projects in low-income areas and one third of these projects have included a cookery skills component. However, the overall impact of practical food skills interventions on nutrient intake, changes in shopping and eating behaviour and food costs have to date never been systematically assessed and are required to present an evidence base for cost-

effective work in this arena. The reported work combined the experience of previous food skills work and materials (e.g. National Food Alliance, Get Cooking, Grampian Health Board food manual) to develop and evaluate a cookery skills intervention in areas of urban social disadvantage.

In low-income households food choice reflects a complex interaction between economic circumstances, access to affordable foods and cultural norms and expectations. Improving practical food preparation skills has the potential to contribute to reducing health inequalities by improving the nutritional quality of the diet within low-income budget restraints.

It is intended that the work of this project be used directly to aid the development of future community-based practical food skills interventions through the Scottish Community Diet Project (SCDP) and the National Food Alliance (now Sustain). Results will be disseminated through SCDP networks (including quarterly newsletter) and similar projects in the rest of the United Kingdom, to inform evidence-based health promotion practices and to support future community-based food activities through the development of guidelines for good practice. Valuable information on research methodologies for use in community settings can also be used to inform future evaluations of diet in low-income groups.

4. Aims and objectives

The overall aim of the project was to develop and **assess the impact of a community-based practical food skills intervention (CookWell) in low-income communities.**

PHASE 1 (01/07/00 TO 30/09/00) DEVELOPMENT OF COOKWELL PROGRAMME

Objective 1 To develop the CookWell programme for use in community-based settings in the UK.

Objective 2 To develop and pilot all tools for assessing changes in food, nutrient and expenditure, cooking and food preparation skills.

Objective 3 To identify locations and facilities (in conjunction with the Scottish Community Diet Project) who wish to implement the CookWell programme.

PHASE 2 (01/10/00 TO 31/12/01) IMPLEMENTATION OF COOKWELL PROGRAMME

Objective 4 To implement the CookWell programme developed in Phase 1

Objective 5 To undertake pre- and post-intervention measures in intervention and control subjects

Objective 6 To assess the cost-effectiveness of implementing the CookWell programme

Objective 7 To undertake a follow-up (after 6 months) post-intervention measure in intervention and control subjects

PHASE 3 (01/01/02 TO 30/06/02) EVALUATION OF COOKWELL PROGRAMME

Objective 8 To analyse and interpret data and to disseminate results

5. Experimental Procedures

5.1 Overview

A range of community projects in low-income areas throughout Scotland was recruited. Consultation with potential participants in two of the communities, community workers, and reviews of existing reports and manuals used in previous community food preparation classes led to the development of a standard but flexible intervention (CookWell) combining practical cooking with encouragement to consume key foods (particularly fruit, vegetables and starchy carbohydrates).

The intervention was implemented in 8 communities. Quantitative evaluations using food diaries, shopping diaries and questionnaires were carried out in intervention and delayed intervention (thereafter called control) subjects at baseline (T1), immediately after the intervention (T2) and 6 months later (T3). Qualitative interviews were also carried out at T3 in a sample of intervention subjects and a small sample of control subjects.

5.2 Identification of locations for intervention (Objective 3)

Short articles (Appendix 1) in the newsletter of the Scottish Community Diet Project asked for community groups interested in running Cooking Skills/Healthy Eating Classes to contact the Centre for Public Health Nutrition Research (formerly Centre for Applied Nutrition). Informal contacts with groups already known to the project team and the Scottish Community Diet Project were also made to assess interest. Enquiries from interested groups were initially made to the Project leader who explained the project and then asked whether the community project had potential to meet the following criteria:

- Recruitment of approximately 20 subjects
- Kitchen/food preparation (this could be a large room if hand washing facilities available) for approximately 10 people
- Ability to timetable a 2-3 hour group for 10 weeks between October 2000 and June 2001
- The project served a low-income area and was situated in an urban environment

Visits were then made to the various sites to assess the premises and to discuss arrangements for equipment, crèche, tutor and recruitment. It was explained that it was necessary to recruit a group of people who were all interested in improving their food skills but that half the group would be asked to delay their participation in the CookWell practical course for 8 months in order to have a control group for comparison.

Thirteen community projects expressed initial interest and 8 were finally included in the project. Details of venues are given in Appendix 2.

5.3 Development of CookWell Programme (Objective 1)

Reviews of existing reports and manuals used in previous community food preparation classes were utilized to identify relevant practical approaches which would provide an appropriate (e.g. given limitations on budgets, skills and facilities) practical structure to encourage and enable participants to increase starchy carbohydrates, vegetables and fruits whilst decreasing fat in everyday cookery. In addition visits were arranged to existing food skills classes in low-income areas and discussions were held with those who run such groups. In order to ensure that the CookWell course content was designed with the needs and preferences of potential participants, exploratory qualitative research was conducted with a sample of potential course participants in two of the communities identified in 5.2. The discussion guide used to direct the moderation of the groups covered: food shopping and preparation, food preferences,

feelings about and experiences of cooking, familiarity with specific types of cooking method and specific dishes, response to proposed course topics, and other suggestions for course content.

The sample in this development phase consisted of three groups of potential course participants from two of the CookWell communities, Greenock and Alloa. Greenock is a large port on the Clyde with a population of around 65,000, while Alloa is a small (population 13,000) industrial town in central Scotland. Both areas have unemployment rates above the Scottish average, and score highly on deprivation indices (General Register Office (Scotland) Census data). Participants were recruited through the Blairmore Community Education Centre in Greenock and the Alloa Family Centre, with the assistance of centre workers, who were asked to identify individuals known to have a potential interest in attending a cooking skills course. See Appendix 3 for report of this development work.

Following these investigations the CookWell recipe and facilitator's pack was designed. Attention was given to the use of basic foods (e.g. rice, pasta, potatoes) with simple but innovative ways to achieve dietary balance, and variety through additions such as herbs and spices and the use of ethnic recipes where desired. Recipes were tested and sensory evaluation carried out by the project team and staff in the University. Adjustments to recipes were made where advised prior to inclusion in the recipe book. Colour photographs were taken of a range of finished dishes for inclusion in the manual.

A protocol for the organisation and delivery of the CookWell programme was designed, and included in the facilitator's pack, so that dietary objectives were identified and facilities, resources, crèche and food-safety issues were clearly addressed. (Appendix 4 - available separately from final report) A draft facilitator's pack was used for the first two pilot interventions and, following feedback from facilitators, amendments were made before producing the final pack. Those amendments included recipe modification and the inclusion of an introduction. At the conclusion of the intervention, certificates were awarded to those who attended a majority of the sessions. (Appendix 5)

5.4 Development and piloting of tools for assessing changes in food, nutrients, expenditure, cooking and food preparation skills (Objective 2)

All assessment tools for measuring changes in food purchase, food expenditure, meal composition, main meal menus and dietary intake were drafted and tested in a group in the community setting. The participants found the tools generally acceptable but some changes were made to the questionnaires where it was deemed necessary e.g. a question had been misinterpreted. The methods outlined here follow those described by Dowler *et al*⁸ in their study of lone parent families. At each measurement time (T1, T2 and T3), all subjects were asked to complete the following assessment tools:

GENERAL INTERVIEW QUESTIONNAIRE (Appendix 6)

- This included questions on the socio-demographic details of the family; family mealtimes; frequency of eating out and buying 'takeaways'; cooking information e.g. what kind of meals are prepared and what type of cooking information would be useful and food shopping behaviour.

COOKING SKILLS QUESTIONNAIRE (Appendix 7)

- This questionnaire was used to assess changes over time with reference to family meals; confidence in cooking certain foods and techniques and following a recipe; kitchen equipment; factors influencing food choice and shopping behaviour; addition of salt and frequency of eating fish, fruit and vegetables.

FOOD FREQUENCY QUESTIONNAIRE (Appendix 8)

- The food frequency questionnaire (FFQ) was used as a cross-check for the 7-day food diaries and was completed when the food diaries were collected. The frequency of eating a total of 71 foods was recorded, 27 of those specifically concerning fruit and vegetables. A question concerning the reasons for rarely or never eating certain foods was also included.

FOOD DIARIES (Appendix 9)

- Diaries were provided to record estimated dietary intake for 7 days for all members of the family.

SHOPPING DIARIES (Appendix 10)

- Shopping diaries were provided in which to record details of food shopping and to identify specific foods purchased (notably low fat products, fruit and vegetables and wholegrain items). A plastic wallet was also provided in which to collect till receipts from supermarkets and food outlets.

ANTHROPOMETRIC MEASURES (included in General Interview questionnaire)

- Height at T1 and weight at T1, T2 and T3.

5. 5 Implementation of the CookWell programme (Objective 4)

The overall design of the implementation phase was a between intervention and control subjects, repeated measures design, with 3 time-points of data collection i.e. at baseline and 2 and 6 month intervals: pre intervention (T1), at the end of the intervention main phase (T2). The final measurements were taken 6 months (T3) after end of intervention.

The CookWell programme was implemented in 8 communities in various parts of Scotland over the period October 2000-June 2001. (Appendix 11) The intervention was designed to take place over 10 weekly 2 hour sessions. (Table 5.5.1) In weeks 1 and 10, participants gathered together for data collection. In week 2 everyone took part in an informal educational session, which was also designed to enable participants to get to know each other better. Participants divided into teams and covered topics such as food hygiene, nutrition and food tasting using light-hearted quizzes. Small prizes were given to everyone at the end. All participants (control/delayed intervention and intervention) were provided with this education programme at the start of the intervention but the practical sessions for the control group were run at a later date after the final dietary assessment (T3) for the main project.

Implementation of the CookWell programme was staggered to allow CPHNR researchers to facilitate all classes as necessary although the involvement of local voluntary instructors was encouraged where appropriate. This staggered approach also allowed baseline data collection and entry at the start of each programme, at its completion and six months later for both intervention and control subjects.

Table 5.5.1 CookWell Intervention Timetable.

Week no.	Assessments	Intervention group	Control group
1	Baseline measurements for both groups.	Recruitment – allocation to intervention or control group.	
2	Return of 7-day food and shopping diaries and completion of FFQs for both groups.	Light-hearted, educational introductory session for all covering food hygiene, nutrition and food tasting.	
3		Cheese Sauce and Pasta Bake	
4		Soups and Scones	
5		Mince-based dishes	
6		Rice-based dishes	
7		Pizza and Salad	
8		Chicken Curry/Stew and Potato Wedges	
9	Participants sent T2 Food Skills questionnaire and food and shopping diaries	Carrot Cake and healthy puddings	
10	Collect T2 assessments.	End of session ‘celebration’ with snacks, presentation of CookWell certificates (for intervention group and cookery packs.	

5.6 Evaluation of the CookWell Programme (Objectives 5 and 7)

QUANTITATIVE MEASURES

The evaluation of the CookWell programme was carried out using the assessment tools as described in 5.4 above.

A pack of cooking utensils was provided for each participant (intervention and controls) as an incentive for completing the T2 assessments. The contents of this pack were chosen after scrutiny of information provided in the baseline Food and Cooking questionnaires and also complemented the recipes in the CookWell course. By providing this equipment for both intervention and control subjects equipment was hopefully eliminated as a reason for not cooking in both groups. To aid the return of the T3 assessments a £10 voucher was provided for the written assessments and a further £10 voucher for those who undertook an in-depth interview with the qualitative researchers.

QUALITATIVE MEASURES

An informal discussion with participants was held at the end of each cookery course, the aim of which was to investigate the value and enjoyment of the course, the acceptability of the recipes to participants and their families and to discover if the course had any effect on food consumption. (Appendix 12)

Individual interviews were held with those who had attended the CookWell classes and attended the T3 data collection session. Interviews were based on a semi-structured interview schedule designed to:

- a) Elicit reasons for attending.
- b) Strengths of the programme.
- c) Weakness of the programme.
- d) The impact of the programme on self-reported behaviour.
- e) Immediate response to the intervention in terms of recall and enjoyment.
- f) Response to specific elements of the intervention: teaching and learning methods, venues and facilities, size of group, length of course, specific topics and recipes.
- g) Whether and to what extent respondents were able to put what they had learned during the intervention into practice at home, and the factors that inhibited and facilitated this.
- h) Any self-reported impacts of the intervention on participants' attitudes and confidence regarding cooking, specific skills, preparation methods, shopping behaviour, or other impacts.

The interviews lasted around 30-40 minutes, and were audio-taped with respondents' permission. Tapes were transcribed and transcripts were analysed by the two qualitative researchers to identify key themes and categories. Verbatim quotes are used in the report to illustrate findings.

Individual interviews were also held with managers or facilitators responsible for running the programme or recruiting the subjects.

5.7 Process evaluation and assessment of cost effectiveness (Objective 6)

5.7.1 Process evaluation

Detailed records were kept on all aspects of the process of implementing the intervention strategy in each community setting,

5.7.2 Assessment of cost effectiveness

The following were calculated:

- a) Cost of running/implementation of intervention.
- b) Cost of change of outcomes of intervention e.g. how much change achieved for price.

5.8 Analysis and interpretation of data (Objective 8)

Analysis of questionnaire and diary data was carried out to assess changes in the following between T1, T2 and T3:

- Frequency of consumption of key foods (fruit, vegetables and salads, fruit and vegetables, total fish, tuna, total bread, pasta and rice) and changes. This was standardised by comparing information from diaries completed for 7 days at both time points of comparison, i.e. if an individual had completed 7 days at T1 and T2 they would be

included in the calculation for changes between T2 and T1 but if they had only completed T1 and not T3 they would not be included in the calculation of changes between T3 and T1.

- Frequency of key food preparation and cooking methods as indicated by answers to questions on the kind of cooking carried out (cooking from basic ingredients, cooking convenience foods), salt added during cooking, as well as frequency of consumption of fried/roast potatoes and boiled/baked potatoes from food diaries and changes.
- A dietary variety score for fruit and vegetables was calculated by counting the number of different varieties of fruit, vegetables and fruit juice (single variety) consumed over 4 days. This was similar, but simpler than the dietary variety frequency score used by Dowler². The change in dietary variety was assessed by using only data from completed 4-day diaries (two week day and two weekend days) if the subject had provided these at all three time points.
- Mean intakes of energy and nutrients including % energy from carbohydrate, starch and sugars, fat and saturates, NSP, sodium, calcium, folate, vitamin C and iron and changes in nutrient content. This was standardised by only entering 4 days (two week days and two weekend diaries) from diaries completed at all three time points by the same individuals.
- Confidence in cooking selected items, following a recipe and using basic ingredients was reported and changes in frequency of those expressing confidence from T1, T2 and T3. For the purpose of analysis confidence categories were merged such that very confident and quite confident became confident and not very confident, not confident at all and 'don't know' became 'not confident or don't know'.
- The weight of subjects was recorded and changes T2-T1 and T3-T1 noted. Only those who gave consent for these measurements to be made at the appropriate time points were included. BMI was calculated for those subjects who agreed to have their height measured and changes in BMI and weight from T2-T1 and T3-T1 noted.
- Total shopping costs (supermarket and other) were documented and changes T2-T1 and T3-T1 noted for those subjects who recorded costs at these times.
- Costs for food eaten out and eaten in were also noted and changes calculated.

5.8.1 Statistical Analysis

The magnitude of changes between these time points (T2-T1 and T3-T1) were compared between intervention and control groups using the Student t-test. Changes in frequency categories (e.g. cooking confidence, use of salt) over T1, T2 and T3 were analysed using the Chi-square test in intervention and control groups. Only subjects who had completed measurements at the comparative points were included in this statistical analysis of differences.

Analysis of interview data in the intervention group is aimed at providing further information on the various changes between T1, T2 and T3 and looked at factors that inhibited or enhanced compliance with intervention skills programme.

6. Results

6.1 Recruitment

6.1.1 Recruitment and response rates

The community worker carried out recruitment in each of 8 communities. The study assessment tools comprised five components - a general interview questionnaire; a food and cooking skills questionnaire; a food frequency questionnaire (FFQ); a 7-day estimated food diary and a shopping diary. The number initially recruited in the communities varied from a maximum of 17 in both Greenock and Alloa to a minimum of 11 in Addiewell. At T3 the maximum number completing the interview questionnaire was 12 in Hawick with a minimum of 5 in both Addiewell and Edinburgh. Every participant did not complete all the components at each measurement time. Of the 113 originally recruited who completed the general interview questionnaire, 20 were considered to be ‘withdrawals’ having, in general, completed only the initial interview and food and cooking skills questionnaires. The remaining 93 comprised 51 intervention and 42 controls (delayed intervention). Reasons for withdrawal at T1 included securing a job; change of circumstances making it difficult to participate; inability to continue because of the extent of commitment required; illness and the onerous nature of the study. At T3 a total of 63 (36 intervention and 27 controls) completed the interview questionnaire but some did not do the other assessments. The gender of participants at T1 by community and by study group is summarised in Table 6.1 1.1 below.

Table 6.1.1.1 Community, gender and group status of participants at T1.

Community	Intervention		Control		Group Withdrawals		Total		
	M	F	M	F	M	F	M	F	All
	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>
Greenock	0	10	2	3	0	2	2	15	17
Alloa	0	7	0	8	1	1	1	16	17
Ardler	0	7	0	4	0	1	0	12	12
Edinburgh	0	3	2	5	1	3	3	11	14
Kirkcaldy	1	5	0	6	1	2	2	13	15
Ferguslie	1	5	0	2	0	4	1	11	12
Addiewell	0	6	0	2	0	3	0	11	11
Hawick	1	5	2	6	1	0	4	11	15
Total	3	48	6	36	4	16	13	100	113

M=Male

F=Female

The response to each component varied at each measurement time despite efforts both by researchers and community workers to ensure maximum response. The reasons for this were multiple and included inability to attend assessment sessions; illness, employment, moving out of the area or change in circumstances e.g. other commitments (especially relevant at T3); loss of interest after second measurement time when cooking sessions completed and loss of questionnaires returned by post. The responses to each part of the study by community and by group (intervention or control) at each measurement time are shown in Appendix 13, Tables 1 to 3. Those completing various combinations of components as used for analysis are summarised in Appendix 13, Tables 4 to 10.

6.1.2 Socio-economic details of participants

This section provides socio-economic details of those participants who completed the majority of components of the study at T1. Several socio-economic factors were examined in relation to the group status (intervention or control) of the participants ($n=113$) who completed interview questionnaires at T1 and are summarised in Appendix 14, Tables 1 and 2. Those factors included the age and gender of the participant; marital status; smoking status of participant; household income; accommodation; social class of the head of the household; employment and benefit status of participant; age of leaving school and highest educational qualification of participant.

The number of female participants at T1 far outnumbered the males, being 100 (88%) to 13 (12%). The mean age of all groups was similar with an overall mean age of 32.3 (SD, 10.2) years and an age range of 16 to 65 years at T1. The total number of those who were married or co-habiting was greater than the single/widowed/divorced or separated especially in the control group, with percentages of 62% and 38% respectively, whereas the percentages in each group were equal among those who withdrew from the study. Almost half of all participants smoked (47%) with 50% of the withdrawals being smokers. The majority of participants (72%) rented their accommodation while 13% had their rents paid for them and only 12% were owner-occupiers. The majority of owner-occupiers were in the intervention group whereas, among those who paid rent to the council, there were almost twice as many in both the control and withdrawal groups. Thirty-three per cent claimed housing benefit while 46% were on Income Support and 14% received Job Seeker's Allowance. As a whole, 48% had incomes of less than £150 per week and only 4% of participants were employed full-time while 14% were in part-time employment. Sixty-four per cent of participants were manual social class, the distribution being similar across groups, while 11% of heads of household had never worked. There was a smaller percentage of non-manual households among controls (14% compared to 20% for both intervention and withdrawals). The majority (77%) of participants finished their full-time education at 16 years or below, the intervention group having the highest percentage (84%) in this category. Thirty-two percent of participants had no formal qualifications, more of those being in the intervention and withdrawal groups while 39% had other qualifications, of which the majority were courses done at FE colleges or in the communities themselves.

6.2 Dietary assessment measures

6.2.1 Frequencies of consumption of key foods

Information from the estimated food diaries was used to calculate the mean weekly consumption frequency of key foods for the diary keepers. From this any changes in consumption from baseline T1 to T2 (frequency at T2–frequency at T1) and from T1 to T3 (frequency at T3–frequency at T1) were calculated. Results are given in Tables 6.2.1.1 and 6.2.1.2. Only complete 7-day diaries were used in the calculations and the differing numbers of subjects completing both T1 and T2 diaries and both T1 and T3 diaries resulted in slight differences in the overall frequencies reported at T1. At baseline, mean frequency of consumption for fruit was approximately twice a week for intervention and control groups but nearer three times a week in the control group when fruit juice was included. Vegetable and salad consumption amounted to 6 times a week in the intervention group and 7 in the control group. Fish was consumed a mean of once a week with tuna constituting approximately one-third to a half of this. Starchy foods (a total of bread, potatoes (non-fried), pasta, rice and breakfast cereal) were consumed an average of 17 times a week with bread constituting 10, and pasta and rice 2, of these occasions. A mean change equivalent to one portion a week was seen in the intervention group at T2 for fruit ($P=0.047$), fruit and fruit juice ($P=0.11$) but no

other significant changes were seen. It should be noted that the significant difference in the change seen in the control versus the intervention groups was in part due to a decrease in consumption of fruit by the control group. This change was not sustained and the mean frequency of consumption of fruit at T3 was similar to baseline levels. There were no significant differences in the changes (T3-T1) when intervention subject were compared with controls although tuna consumption showed a slight increase ($P=0.10$) in the control compared with the intervention group.

Table 6.2.1.1 Mean (standard deviation) weekly frequencies of consumption from completed 7-day diaries for intervention (I, $n=29$) and control (C, $n=21$) groups T1 and T2 and mean change (T2-T1).

Commodity	Mean T1		Mean T2		Mean difference (T2-T1)		P value* (2-sided)
	I	C	I	C	I	C	
Fruit (excluding fruit juice)	1.69 (2.36)	2.29 (2.90)	2.72 (3.28)	2.05 (2.94)	1.03 (2.26)	-0.24 (2.07)	0.05
Fruit juice	0.10 (0.31)	0.48 (1.03)	0.35 (0.86)	0.81 (1.72)	0.24 (0.95)	0.33 (1.43)	0.79
Fruit and fruit juice	1.79 (2.34)	2.76 (3.42)	3.07 (3.65)	2.86 (4.05)	1.28 (2.55)	0.10 (2.51)	0.11
Vegetables and salads	5.97 (2.97)	7.05 (3.57)	6.41 (4.79)	6.62 (3.89)	0.45 (3.69)	-0.43 (4.96)	0.48
Fruit and vegetables	7.76 (4.26)	9.81 (5.64)	9.48 (7.11)	9.48 (5.11)	1.72 (4.71)	-0.33 (6.00)	0.18
Tuna	0.31 (0.85)	0.43 (0.68)	0.38 (0.73)	0.52 (0.87)	0.07 (1.07)	0.10 (1.00)	0.93
All fish	0.97 (0.98)	1.10 (1.00)	1.17 (1.36)	1.29 (1.06)	0.21 (1.21)	0.19 (1.17)	0.96
Total bread	10.21 (4.28)	10.05 (3.60)	9.28 (4.37)	10.67 (4.70)	-0.93 (4.53)	0.62 (4.73)	0.25
Pasta and rice	2.14 (1.41)	2.00 (1.67)	1.93 (1.75)	2.67 (1.93)	-0.21 (1.80)	0.67 (2.11)	0.12
All starchy foods	17.21 (5.59)	16.57 (5.90)	16.24 (6.35)	18.48 (5.85)	-0.97 (5.63)	1.90 (6.49)	0.10

* T-Test for equality of means. *P* value is for probability that difference in means is due to chance.

Table 6.2.1.2 Mean (standard deviation) weekly frequencies of consumption from completed 7-day diaries for intervention (I, $n=24$) and control (C, $n=17$) groups T1 and T3 and mean change (T3-T1).

Commodity	Mean T1		Mean T3		Mean difference (T3-T1)		P value* (2-sided)
	I	C	I	C	I	C	
Fruit (excluding fruit juice)	1.88 (2.75)	2.11 (2.71)	1.75 (2.58)	1.24 (1.52)	-0.13 (2.45)	-0.88 (2.29)	0.32
Fruit juice	0.08 (0.28)	0.94 (1.78)	0.08 (0.28)	0.76 (1.68)	0.00 (0.29)	-0.18 (2.24)	0.75
Fruit and fruit juice	1.96 (2.73)	3.06 (3.25)	1.83 (2.57)	2.00 (2.35)	-0.13 (2.42)	-1.06 (3.19)	0.29
Vegetables and salads	6.42 (3.31)	6.29 (3.70)	7.17 (4.57)	7.71 (5.67)	0.75 (3.12)	1.42 (2.85)	0.49
Fruit and vegetables	8.38 (4.95)	9.35 (5.41)	9.00 (5.46)	9.71 (6.95)	0.63 (4.06)	0.35 (4.61)	0.84
Tuna	0.38 (0.92)	0.35 (0.61)	0.33 (0.56)	0.76 (1.03)	0.04 (0.91)	0.41 (0.80)	0.10
All fish	1.17 (1.05)	0.94 (1.09)	1.33 (1.13)	1.00 (1.06)	0.17 (0.92)	0.06 (1.48)	0.78
Total bread	10.04 (4.76)	10.53 (3.64)	9.83 (4.49)	12.06 (3.51)	-0.21 (3.71)	1.53 (3.91)	0.16
Pasta and rice	2.21 (1.53)	1.88 (1.36)	1.67 (1.43)	2.35 (1.00)	-0.54 (1.91)	0.47 (2.13)	0.12
All starchy foods	17.04 (6.33)	16.76 (5.85)	17.08 (6.14)	18.88 (4.21)	0.04 (5.12)	2.12 (4.87)	0.20

* T-Test for equality of means. *P* value is for probability that difference in means is due to chance.

6.2.2 Dietary variety for fruit (including fruit juice), vegetables and fruit and fruit juice

An index of dietary variety was calculated for subjects who completed 4-day (2 week days and 2 weekend days) diaries at all three time points. The mean number of varieties consumed in the 4 days was just less than 1 for fruit and fruit juice in the intervention group but rose to 1.4 at T2. This was more than in the control group where the mean change was negative ($P=0.07$) for difference between intervention and control). However this change was not sustained at T3. The mean number of varieties of vegetables consumed across both groups and time-points was approximately 4 and that for fruit and vegetables was approximately 5. No significant changes were seen in either group during the course of the project. (See Appendix 15). The change in the **variety** of fruit consumption accompanied the change in the **frequency** of consumption at T2 and the return to baseline at T3 in the intervention groups (Table 6.2.1.2)

6.2.3 Estimated mean daily energy and nutrient intakes and changes

Mean daily intakes of energy and a range of nutrients were estimated from those subjects who completed 4 days (2 week days and 2 weekend days) diaries at all three time points. (Appendix 16) Mean energy intakes were low in both intervention and control groups at all time points and comparison of individual intakes with the estimated energy expenditure³ suggested that the majority (80%) of the subjects under-reported or under-rated during the study period. Mean changes in energy and nutrient intakes were small and the only difference between intervention and controls that approached statistical significance was for calcium intake (T2-T1, $P=0.09$) and (T3-T1, $P=0.07$). In both cases calcium intakes decreased in the intervention group but increased slightly in the control group. This difference was also seen when nutrient intakes were expressed as nutrient densities (mg nutrient/4.18MJ).

6.3 Cooking and food preparation methods, confidence and skills

6.3.1 Food preparation and cooking methods

A range of questions was used to assess changes. The food diaries were used to record consumption of fried (chips, fried and roast) and non-fried potatoes (boiled and baked) to see if any changes had occurred in the cooking method for potatoes. Weekly frequencies of consumption were between 2 and 3 times for fried potatoes and 2 to 2.5 times for the non-fried variety. There was very little or no change from T1 to T2 or T1 to T3 and differences between control and intervention groups were not significant. (Appendix 17)

The number and percentage of subjects reporting positive responses to a range of questions to do with key food preparation methods is given in Table 6.3.1.1. Only those who had completed these questions at all three time points were included in this analysis and results show that the percentage of people cooking from basic ingredients increased in the intervention ($P=0.091$) but not in the control ($P=0.675$). There were no significant differences in the proportions reporting that they assembled meals from ready made ingredients (e.g. pasta and ready made sauce), used convenience foods or added salt during cooking in either control or intervention subjects across the three time points.

Table 6.3.1.1 Changes in percentage of subjects reporting use of key food preparation and cooking methods.

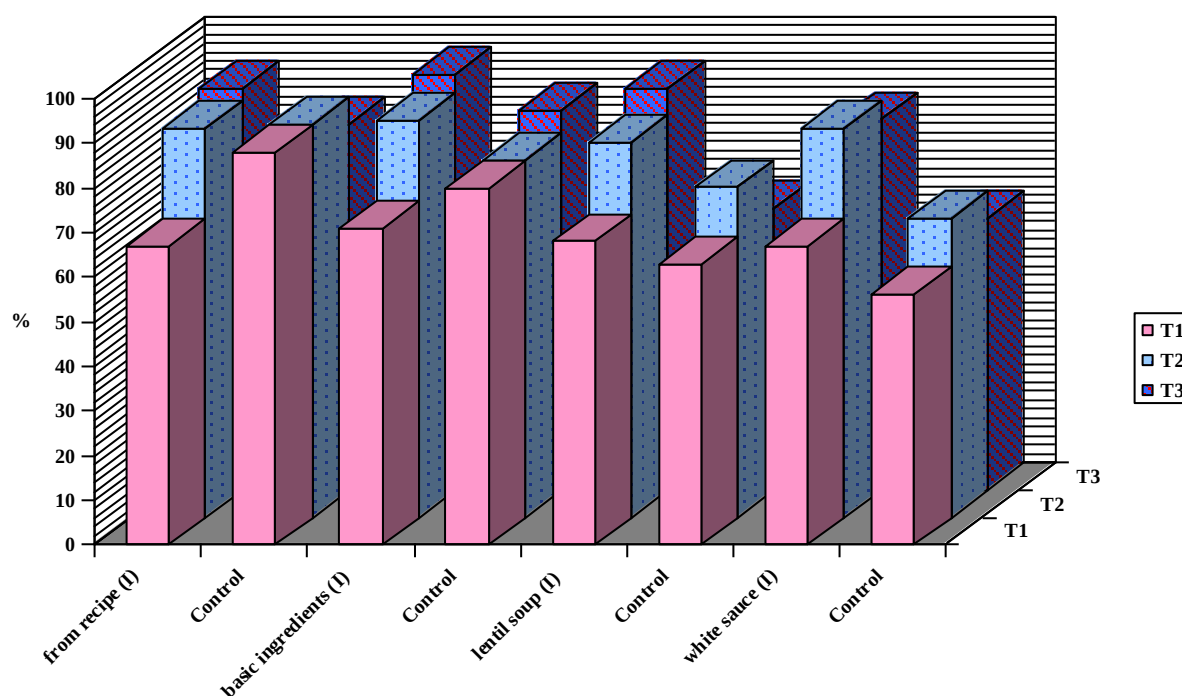
Cooking method		Intervention Group					
	T1		T2		T3		P value (2-sided)*
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	
Cooking from basic ingredients (<i>n</i>=31)	21	68	23	74	28	90	0.091
Assembling ready-made ingredients (<i>n</i>=31)	17	55	18	58	19	61	0.876
Convenience foods (<i>n</i>=31)	20	65	21	68	21	68	0.953
Adding salt during cooking (<i>n</i>= 34)	17	50	15	44	19	56	0.629

Cooking method		Control Group					
	T1		T2		T3		P value (2-sided)*
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	
Cooking from basic ingredients (<i>n</i>=20)	15	75	17	85	15	75	0.675
Assembling ready-made ingredients (<i>n</i>=20)	14	70	15	75	12	60	0.583
Convenience foods (<i>n</i>=20)	13	65	2	60	16	80	0.367
Adding salt during cooking (<i>n</i>=20)	3	15	6	30	7	35	0.437

* *P* values are for chi-square analysis for differences in proportions of subjects at each time point.

Numbers reported are for those who answered the same question at every time point.

Figure showing the percentage of intervention and control subjects expressing cooking confidence at T1, T2 and T3.



6.3.2 Cooking confidence

Table 6.3.2.1 and the figure above show the changes in the number and percentage of intervention and control subjects reporting confidence in a range of cooking skills. There was a significant increase in the proportion of intervention (but not control) subjects reporting confidence in following a recipe over the 8 months of the project, this confidence being maintained at T3. A higher percentage of intervention subjects reported confidence in cooking from basic ingredients, cooking lentil soup and white sauce at T2 and T3 (P values approached significance). No other changes in the responses to cooking confidence questions were reported. For example, there was no change in confidence in cooking rice but over 80% of subjects expressed confidence in cooking this commodity.

Table 6.3.2.1 Changes in percentage of subjects reporting cooking confidence for specific aspects at T1, T2 and T3.

Aspect of cooking		Intervention Group					
	T1		T2		T3		P value (2-sided)*
	n	%	n	%	n	%	
Following a recipe (n=30)	20	67	26	87	27	90	0.044
Cooking from basic ingredients (n=28)	20	71	25	89	26	93	0.060
Cooking lentil soup (n=31)	21	68	26	84	28	90	0.068
Cooking white sauce (n=30)	20	67	26	87	25	83	0.126

Aspect of cooking		Control Group					
	T1		T2		T3		P value (2-sided)*
	n	%	n	%	n	%	
Following a recipe (n=17)	15	88	15	88	14	82	0.847
Cooking from basic ingredients (n=20)	16	80	16	80	17	85	0.895
Cooking lentil soup (n=19)	12	63	14	74	12	63	0.729
Cooking white sauce (n=18)	10	56	12	67	11	61	0.792

* Chi-square test

Numbers reported are for those who answered the same question at every time point.

6. 4 Anthropometric data

The mean weight and BMI is given for those subjects who consented to being weighed at all three time points (Tables 6.4.1 and 6.4.2). The mean BMI was between 26 and 28, indicating a tendency to overweight, but similar to the mean for the Scottish population⁵. A slight **decrease** in mean weight (-0.6 kg) and BMI was observed for intervention subjects from T1 to T3 and this was significantly different from the slight **increase** (mean 1.8kg) seen in control subjects. As both groups recorded their food intake this is unlikely to be due to the effect of keeping a food diary. The slight increase seen in control subjects is not surprising given the general tendency to increase in weight with age⁵ and the fact that these measurements were 8-9 months apart, but it is larger than would be expected from the Scottish Health Survey data⁵. The true significance of these results is difficult to gauge but there does appear to be a small measurable effect of the intervention on weight.

Table 6.4.1 Mean differences in weight (kgs) and Body Mass Index (BMI) between measurement times T2 and T1 (T2-T1) and T3 and T1 (T3-T1) for those completing weight measurements at T1, T2 and T3.

Measurement time										
	T2-T1					T3-T1				
	Intervention (n=24)		Control (n=12)		P value* (2-sided)	Intervention (n=24)		Control (n=12)		P value* (2-sided)
	Mean	SD	Mean	SD		Mean	SD	Mean	SD	
Weight (kgs)	-1.0	3.0	0.3	2.8	0.204	-0.6	4.3	1.8	2.6	0.052
BMI	-0.4	1.1	0.1	1.0	0.186	-0.2	1.6	0.6	0.9	0.049*

* P=0.05 using Students t-test

Table 6.4.2 Mean weight and BMI measurements at measurement times T1, T2 and T3 for those completing weight measurements at T1, T2 and T3.

Measurement time												
	T1				T2				T3			
	Intervention (n=24)		Control (n=12)		Intervention (n=24)		Control (n=12)		Intervention (n=24)		Control (n=12)	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD
Weight (kgs)	74.2	20.3	71.2	10.3	73.2	20.3	71.5	11.1	73.6	20.9	72.9	12.1
BMI	28.2	6.5	26.1	4.5	27.8	6.5	26.2	4.8	27.9	6.9	26.7	5.1

6.5 Costs

The mean cost of the weekly shop for the household at T1 was between £30 and £40 and although this decreased from T1 to T2 there was no significant difference in the change seen for intervention and control subjects (Appendix 18). For the small number of subjects (17 at T1 and T2, 11 at T1 and T3) who reported the cost of takeaways weekly expenditure was between £6 and £10. No significant differences were seen for the changes from T1 to T2 or for T1 to T3. Similarly 18 subjects at T1 and T2, and 12 at T1 and T3 reported eating out costs of between £6 and £12 but no significant differences were seen between intervention and control subjects despite the fact that the mean cost of eating out doubled for the 8 intervention subjects from T1 to T3.

6.6 Qualitative findings

6.6.1 Informal evaluation

This was carried out immediately after the intervention by one of the CookWell project workers. Results from the individual groups are provided in Appendix 19. In general CookWell was well received by all participants but some topics were more favourably received than others. Many reported that they were cooking more from basic ingredients and buying less convenience food. Popular recipes were soup, scones, tuna bake (incorporating white sauce), chicken curry, pizza, potato wedges and carrot cake but efforts to encourage fish consumption using the smoked mackerel incorporated into kedgeree were not appreciated. Most participants disliked this recipe. There was a feeling expressed that tinned tomatoes and mushrooms were over-represented.

6.6.2 In-depth structured interviews

The full report of the qualitative interviews carried out at T3 is provided in Appendix 20. In summary, post-intervention, participants reported an increase in their personal confidence and pride, an increased likelihood of tasting and experimenting with new foods, facilitation of new skills and an increased awareness of food preparation and production. The importance of a separate crèche with familiar workers was also crucial to the attendance of participants with young children. Participants also reported barriers to changing food intake at home including time, demands of looking after young children, taste preferences of family members, and dented confidence if a recipe did not turn out as expected. In summary, the qualitative data showed that CookWell delivered on a number of levels, namely specific cooking skills, confidence and enjoyment around food, personal life skills and community capital. An example of a comment post intervention:

“It was ken (you know), just the sort of idea of pulling things together, starting from scratch and saying to yourself ‘I made that’, and you felt good about it, ken, it was good”

6.7 Process evaluation and assessment of cost effectiveness

6.7.1 Process evaluation

The process evaluation (Appendix 21) provides background information on each CookWell community, the location of the intervention and facilities available. Recruitment methods are described and their level of success commented on and compared to other interventions. Where an intervention ran over budget an explanation is given and services provided free of charge to the University are also noted. (For detailed costs see Appendix 22). Some additional comments have been added regarding the running of CookWell with the Control group 6 months after the end of the intervention group. Finally, comments are provided on any

particularly interesting or outstanding aspect of each project. In particular it was noted that the ability to recruit and retain participants was often dependant on a

- Large client-base
- Previous thought being put into who to target
- Enthusiastic project worker in all aspects, not just learning new skills but also maintaining a good support group

The less successful projects

- Targeted people in a general area
- No ongoing support each week
- Project workers not as enthusiastic later on as initial meeting

These factors for success/failure need to be programmed into future research.

6.7.2 Cost effectiveness

The total cost of implementing 13 CookWell courses (8 intervention and 5 control) is shown in Appendix 22. In all 85 participants were catered for making a weekly food cost of £3.80 per person. The total cost of running the courses was calculated by adding the following:

Food Costs	2269
Crêche	1887
Room hire (1 venue only)	260
Equipment	2336
Travel for CPHNR staff	2165
Wages for CPHNR staff	5568
Cookery Books	<u>1848</u>
Total	£16333

Thus per participant the course cost £192. If courses were run by local staff and equipment was already in place it would be expected that these costs could be reduced to £139 per participant (this is including the cost of the tutor as similar to the average cost per hour of the CPHNR staff, i.e. £18 per hour for 4 hours per week).

7. Discussion

7.1 Recruitment

It was originally intended that 10 participants per community (with a minimum of 6 participants finishing the programme) and a similar number of control subjects would be recruited. However, in practice, it was not possible to recruit 20 subjects initially and randomly allocate half to the intervention with the other half serving as the comparison or delayed intervention group. This is due to the fact that facilities in the community are not normally large enough to provide for 10 participants and six or less is a much more manageable number for the practical CookWell course. The other factor is that participants who initially expressed an interest in the classes were unable to turn this interest into a commitment to attend and/or complete the assessments.

7.2 Evaluation of dietary changes

Several measures were used to evaluate food and dietary intakes in this study such that any changes could be monitored from baseline to T2 and T3. Participants were asked to keep food diaries for themselves and the family for 7 days. For simplicity only the intake recorded for the actual participants themselves are reported here. Despite the fact that the numbers of subjects completing the diaries for 7 days or for 4 days (two weekend days and two weekdays) at successive time points were considerably lower than the anticipated 48 per group (29 for intervention group and 21 for control group for comparison of T1 and T2), the small quantitative changes seen were supported by the food frequency data, nutrient data and qualitative interviews. The only measurable changes seen were in fruit and vegetable consumption in the intervention group from T1 to T2 and this change equated to an increase of one portion of fruit per week on a baseline level of approximately two portions per week. It should be noted that the significance of this increase was partly due to a small decrease in the control group. Vegetable consumption as recorded showed a change of less than half a portion on a baseline of 6 portions per week so overall the increase in **daily** total fruit and vegetable consumption changed from just over one portion to just less than 1.5 portions. At T3, 6 months after completion of the CookWell course no significant differences in the changes (T3-T1) in the frequency of consumption of key foods were seen when intervention and control subjects were compared. Fruit consumption was similar to baseline as was overall fruit and vegetable consumption. The food frequency questionnaires administered as a cross check showed no significant differences between time points but confirmed the low fruit and vegetable consumption in this low-income group with over three quarters of subjects recording a less than daily (around 50%) or no consumption of fresh fruit (approximately one quarter). It is not surprising that there were no changes recorded in nutrient intakes as the increase seen from the diaries would result in a very small change in vitamin C intake. The quantities of fruit and vegetables eaten are considerably less than the recommended 5 portions per day²¹ but are similar to that seen for women of manual social class in the Scottish Health Survey⁵ where less than half claimed daily fruit consumption. Results from the MONICA study in north Glasgow in 1995 showed that only 12% of women in the most deprived quarter (as measured by postcode) consumed fruit and vegetables 4 times a week and that despite an general increase in fruit and vegetables in the population over the previous ten years there had been little change in the most deprived group.²² Thus overcoming barriers to increasing fruit and vegetable consumption will require a sustained effort. The work described here showed that cooking skills classes make a small measurable change in dietary habits but this was not maintained when the encouragement to cook and eat these key foods was withdrawn.

Information from qualitative work showed that participants did not discuss changes in intake of key foods or food groups as such but concentrated more on the cooking and the dishes prepared. Thus the popularity of the fruit salad was noted and the increase in fruit consumption could be due to the encouragement and skills provided by CookWell to produce this dish. Participants also commented on how they were now making soup and incorporating fruit and vegetables into pasta bakes but often the description provided in the food diaries was not detailed enough to record that vegetables were incorporated. For example an entry of soup could not be recorded as a incident of vegetable consumption unless it was called vegetable or by a specific vegetable name such as lentil.

7.3 Evaluation of changes in cooking methods and cooking confidence

The quantitative increase in the percentage of subjects reporting that they cooked from basic ingredients was confirmed by comments noted in the qualitative evaluations. Hence many, but not all, participants reported that they were doing more cooking from basic ingredients and eating less convenience foods. This did not mean that convenience foods were being avoided altogether so it was not surprising that the quantitative results showed no change in the percentage of subjects cooking convenience foods. It was encouraging that the percentage of intervention subjects cooking from basic ingredients was higher six months after the intervention than at baseline or T2. Although there were some concerns as to whether the question on cooking confidence was understood by all, results obtained from the quantitative questionnaire data were confirmed by qualitative work. Confidence in cooking from basic ingredients was expressed by 90% of English women and 77 % English men surveyed in the 1993 Health and Lifestyle Survey.⁹ The participants in the CookWell project represent a sample skewed towards the lower socio-economic section of society where confidence in using a range of techniques and cooking specific foods is expressed by a lower percentage of subjects so the baseline figure of 71% of intervention subjects and 80% of control subjects expressing confidence could be considered high. Nevertheless the percentage of subjects expressing confidence in following a recipe, cooking lentil soup and cooking white sauce increased amongst intervention but not amongst control subjects and comments from the qualitative work about increased confidence in these areas confirmed that this was a valid result. To our knowledge there is no published evidence to date that cooking skills classes increase cooking confidence and it would be hoped that such confidence can overcome one of the barriers that prevent dietary change.

7.4 Costs

7.4.1 Cost benefit to participants

The mean of the weekly spending on food was between £30 and £40. The suggested expenditure for a low cost but acceptable diet for a two parent family with two children under 10 has been calculated as £49 with that for a single parent with two children under 10 as £32.66 (on 1998 prices).²³ The family sizes represented in the study varied but of the 54 subjects who provided shopping costs, 13 were part of a two parent family and 6 were lone parents, both with two children under 10. It is not possible therefore to make a direct comparison with these figures. However the mean weekly spending on food for the 13 two-parent families was £44.44 at T1 with a minimum of £20 and a maximum of £92. This, together with the low fruit and vegetable consumption and overall food intake suggests that the money being spent on food is probably less than ideal. If the family budget does not allow for further money to be allocated to food any methods of reducing this cost or providing more high quality food for the same cost could be welcomed. Participants reported two changes in shopping behaviour, that of buying value ranges in the supermarket and the other of buying fresh and/or basic ingredients such as herbs, spices and vegetables. It could be that over the

period of the assessments this change could not manifest itself in a significant change in food spending and as one participant commented:

“I think it costs maybe a wee bit more at first. But then you have all that in your cupboards after that. And therefore the next time you go shopping you dinnae need to spend as much ‘cause you’ve got things in the cupboard already”

Given this aspect, the fairly small sample size, the range of family types and the fact that some subjects only did a large shop once a fortnight or month, it is not surprising that the change in the mean weekly cost of food recorded by subjects showed no significant differences between intervention and control subjects. Cost savings that might be achieved by cooking recipes from basic ingredients were calculated as a supplementary project. The results are given in Appendix 23.

7.4.2 Cost effectiveness of implementation

The total cost of running CookWell (including food, crèche, equipment as well as travel expenses and wages of CPHNR staff associated with running the courses) was calculated as £192 (£139 per person if equipment was already available and local staff could be employed). For this cost participants made a slight but positive change in their diet and reported increased confidence in cooking and budgeting. It has been calculated that an increase in 50g fruit and vegetables per day, equivalent to one small serving per day could reduce the risk of all cause mortality by 20%²⁴ The changes seen after CookWell were modest and estimated as one-third of a portion but if sustained have the potential to reduce the risk of illness leading to premature death. Other benefits were also seen such as an increase in self-esteem and the capability to pursue further educational avenues and job prospects.

7.5 Summary of limitations of the Study

Limitations were imposed on the study by several factors and are summarised under the following headings:

7.5.1 Recruitment and response to study

Because of the unsuitability of the majority of premises to provide cooking facilities for 10, the number who could be recruited was reduced from the number originally proposed (10 intervention and 10 control from each community) and thus a limitation to the number who could be recruited was imposed. Moreover, some sessions were held in domestic kitchens and a maximum of six could be accommodated in these premises. Although extra communities were recruited in an attempt to increase the numbers, time and personnel constraints served to prevent the number of participants originally proposed being reached.

The lack of compliance to every part of the study by some participants was a further limitation that decreased the availability of valid data for analysis. Some participants successfully completed only parts of the study and thereby reduced the total number who produced valid data for analysis. Moreover the need to complete assessments may have discouraged the participation of some people in the cooking sessions and hence eliminated those who would have gained particular benefit from the study. Literacy and numeracy problems may have been the predominant reason for self-exclusion from the assessment tools although most community workers did not suggest those as barriers to inclusion and offered help to those who might experience difficulties. With the exception of the food and cooking skills questionnaire, the majority of questionnaires at each measurement time were interviewer-administered, and while perhaps facilitating this task for some, others may have

regarded the questions as an intrusion of privacy and thus compliance may have been discouraged.

In addition, withdrawal and non-compliance was increased by factors such as illness, participants finding employment, moving house, changes in circumstances, loss of interest after cooking sessions completed and loss of questionnaires returned by post. These problems were particularly notable at T3. The nature of the communities was one of vulnerability and often the lives of the participants were complicated by multiple factors that impinged on the time and commitment needed to complete such a study.

The 7-day time period for collecting the dietary data was another limiting factor due to the burden it imposed on the participants. In addition, the necessity to keep this record for the whole family made the task arduous, especially for those who had large families. Further, this task was carried out at each of three measurement times adding to the onerous nature of the task. A shorter time-period or a record of only participants' food intake may have increased compliance. Some participants had difficulty in keeping accurate records for the seven days for the whole family especially if children were at school or partners at work and thus records were often incomplete. Certain foods may have been omitted more than others, for example, snack foods and fruit and hence resulted in incomplete frequency records for some foods. Moreover, the accuracy of the dietary records in assessing nutrient intake was limited by the fact that the diaries were records of estimated food intakes, some of which gave little detail of portion sizes, and thus establishing an evaluation of nutrient intakes was problematic. A further inaccuracy in the recording of foods, and thus a limiting factor, may have arisen through human error and also through difficulties in recording. This may have been reinforced by the fact that, due to time constraints, the researchers were often unable to check diaries for completion and accuracy of reporting. Calculation of EI:BMR ratios demonstrated that under-reporting tended to be the norm emphasising the complexity of the task for some participants whereas others may have omitted foods due to the reluctance to report foods that may have been considered 'unhealthy'.

Furthermore, limitations in the validity of the data may have been imposed by the time of data collection. Although foods are now generally available throughout the year and seasonality may not contribute to the choice of foods, the time of data collection may have had a slight impact on those communities where fruit and vegetables were available through food co-operatives and therefore produce is more likely to be seasonal. Data collection coincided with both Christmas, Easter and the summer holidays which are, traditionally, busy times for mothers with young children and this factor may have resulted in lack of compliance.

Limitations arising from the use of shopping diaries to gauge expenditure on food were imposed by the fact that participants often shopped only once a fortnight, coinciding with the payment of benefits. This resulted in shopping diaries being completed at some measurement times and not at others and thus an overview of food expenditure from T1 to T3 was not always possible. Other limitations arose due to the loss of till receipts and hence the unavailability of data. In addition, if till receipts were not provided (e.g. in small corner shops), food expenditure may have been omitted because of difficulties in remembering and/or recording purchases.

7.5.2 Food and cooking skills

An increased improvement in food and cooking skills may have been limited by the number of sessions provided. The fact that some improvements at T2 had reverted by T3 suggests that

a sustained input may be necessary to show lasting improvement and establish new habits. Many of the participants were disappointed that the sessions were unable to continue due to lack of funds in the communities and put forward suggestions for other skills and dishes that would have been useful. Continuity may be an important factor in reinforcing skills that have been learned. Moreover, some communities had better facilities than others thus enabling easier assimilation of skills.

7.5.3 Increase in fruit, vegetables, starchy carbohydrates and fish

As noted in the previous section, a limitation of the study in relation to increased intake of fruit, vegetables, starchy carbohydrates and fish may have been the number of cooking sessions. More sessions may have been needed to reinforce habits and may have served to decrease any misconceptions associated with 'healthy' eating. Although fish was not popular, an increase in the number of sessions would have allowed a greater variety of fish dishes to be included and the tasting of those dishes may have decreased the resistance to cooking and eating fish. Confidence in cooking unfamiliar foods may also have increased with greater exposure allowing those foods to become more prevalent in the diet when cooking at home.

7.6 Capabilities and potential benefits

The capabilities and potential benefits of this study can be summarised under the following headings:

7.6.1 Recruitment and response to study

The capability of the study with regard to recruitment was related to the ability of the community worker in each community to recruit participants. The input of the community worker was also invaluable in enabling those who took part to be divided into intervention and control groups and in encouraging participants to complete the assessment tools. In some cases, they also helped the participants with the completion of the assessments. The commitment of some community workers increased both the recruitment and response rate in some areas. In addition, the fact that the researchers were often involved with the cooking sessions as well as with data collection and thus became known to the participants, may have encouraged the completion of assessment tools.

7.6.2 Food and cooking skills

Both quantitative and qualitative data have shown that, in general, the intervention group showed increased confidence in food and cooking skills particularly in the ability to follow a recipe. This skill should enable the participants to experiment with new recipes in the future without fear of failure and resultant costly food wastage. Dietary variety should thus increase and shopping costs may be reduced as dishes may now be made that were previously purchased as ready-prepared meals. In addition, some participants expressed a liking for foods they may not have tried if the opportunity had not arisen during the cooking sessions and gave them the confidence to include new dishes in their diets thus also increasing the variety of foods eaten. Moreover, foods used during the cooking sessions were often 'value' foods from the supermarkets. This gave the participants an opportunity to try these low cost foods and discover their palatability thus reducing the cost of expenditure on food shopping. In addition, an interest in cooking from basic ingredients was stimulated when the initial 'fear' of this method of cooking was overcome. Although time and circumstances may contribute to the difficulty for many participants in achieving this, the confidence should remain.

A further capability of the intervention was the ability of cooking skills to be demonstrated and knowledge to be imparted during the cooking sessions. For example, cooking rice was a

skill that participants believed to be complicated and thus often chose to buy ‘boil-in-the-bag’ alternatives that are more expensive than cooking raw rice. Moreover, as classes were small, participants were able to ask questions as they arose and thus enabled skills to be learned that may otherwise not have been covered by the sessions.

The production of the recipe book and the facilitator’s pack was another capability of the study. The recipe book includes low-cost recipes of popular dishes suggested by the focus groups held before recipe development. The facilitator’s pack provides a useful tool for anyone interested in running similar sessions and interest has already been expressed in both this and the recipe book. Included in the facilitator’s pack are shopping lists for each cooking session along with discussion points and suggestions for imparting ‘healthy eating’ advice relevant to the ingredients and the dishes made during that session.

The study also provided ingredients to take home in order that participants could make the dishes again at home. This gave the participants an opportunity to reinforce the skills learned during the sessions and also enabled the family to try the dishes at no cost to themselves. Moreover, the cooking packs, given at the end of T2 to all those who had completed the assessments at T1 and T2, provided much-needed cooking equipment to many participants and enabled a greater range of dishes to be made.

7.6.3 Increase in fruit, vegetable, starchy carbohydrate and fish in diet

An increase in fruit intake was shown in the intervention group from T1 to T2. Although this was the only significant increase shown in the quantitative data, the use of fruit and vegetables during the cooking sessions enabled the participants to try foods that they had perhaps not previously tasted such as kiwi fruit. Both pasta and rice were incorporated into recipes thus demonstrating the use of starchy carbohydrates in ways previously not used by participants although the dishes may have been bought ready-prepared, for example, tuna pasta bake. Although fish was generally unpopular tuna was acceptable and some participants, who otherwise would not have considered tasting it, enjoyed the smoked mackerel kedgeree.

Moreover, the informality of the sessions and the knowledge of the facilitator enabled knowledge of ‘healthy’ cooking methods and of dietary intake to be imparted to the participants in a relevant and non-prescriptive manner. The nature of the sessions was such that participants were sufficiently at ease with the facilitator and with each other to ask any questions as they arose and thus any spontaneous queries could be answered.

7.6.4 Other capabilities

Although not considered to be among the original aims of the study, several other outcomes arose from the provision of CookWell. In addition to improved confidence in food and cooking skills, increased confidence in other areas was noted. This resulted in acquirement of jobs, attendance at other classes and the facilitation of other types of classes by the CookWell group. Friendships were also fostered in communities peer support may be of considerable benefit. CookWell also made possible a sense of community in some areas where this had previously been lacking.

8. Acknowledgements

We should like to thank the Food Standards Agency for funding this project; Bill Gray and the Scottish Community Diet Project for support and advice throughout the course of the project; the leaders in each community for their invaluable help with recruitment and with the general weekly running of the project; the facilitators who ran the cooking sessions; and all the participants who gave up a considerable amount of their time in completing the assessments. We are also very grateful to Linzie Porteous for her work in the initial stages of the project, and to all CPHNR staff who helped with data collection and data entry.

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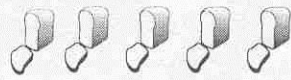
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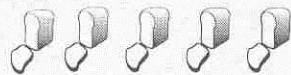
- 1** Articles in Scottish Community Diet Project newsletter
- 2** Details of venues
- 3** Report of development work
- 4** CookWell facilitator's manual (available separately)
- 5** Certificates awarded at end of cooking sessions
- 6** General Interview questionnaires
- 7** Cooking Skills questionnaire
- 8** Food Frequency questionnaire
- 9** Food diary
- 10** Shopping diary
- 11** Timetable for locations
- 12** Questions for informal evaluations
- 13** Responses to each part of the study
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Appendix 1

Fare Choice February 2000



WANTED!! Community groups who run, or want to run Cooking Skills/ Healthy Eating classes. The Centre for Applied Nutrition Research at Dundee University should soon have **funds to help start up and evaluate cooking skills classes in communities throughout Scotland.** *"If you have been unable to do this so far due to lack of funds, facilities, training or equipment we could be able to help. What we do need is the potential to recruit 20 people in each community who are likely to benefit from such classes. We hope to start our development work in July. If you are interested please contact me, Wendy Wrieden at the Centre for Applied Nutrition Research, University of Dundee, Dundee"*
Tel 01382 345281 or w.l.wrieden@dundee.ac.uk



Fare Choice May 2000



The Centre for Applied Nutrition at Dundee University are still looking for community groups in urban situations who run or want to run **Cooking Skills/Healthy Eating Classes.** The Centre has now had funding confirmed for a project to facilitate and evaluate cooking skills classes in communities throughout Scotland.

Development work starts in July. They will be able to help out with food, equipment, creche and training costs if you think you can get together about 20 recruits who would benefit from such classes.

For further information please contact Wendy Wrieden at the Centre for Applied Nutrition, University of Dundee Tel 01382 345281 or w.l.wrieden@dundee.ac.uk

Appendix 2

Locations for CookWell Programme October 2000-June 2001

Addiewell, West Lothian

- Set in Community House/Centre
- Average domestic kitchen
- Local facilitator

Alloa area – 2 projects

Alloa Child and Family Centre

- Local facilitator – careworker.
- Basic, small kitchen

Tullibody NCH Project

- Project set in flat in block of flats
- Average domestic kitchen
- Facilitated by Linzie Porteous

Ardler, Dundee, Chalmers Ardler Church Child and Family Project

- Basic kitchen with commercial range
- Set in local church hall/kitchen
- Local facilitator with initial help from project team

Edinburgh, Broomhouse Neighbourhood Centre Community Cafe

- Set in community cafe
- Small commercial kitchen
- Facilitated by Karen Valentine

Ferguslie Park, Paisley

- Classes in local College of Further Education
- Participants bussed from community to college.
- Well-equipped cooking facilities
- Local facilitator

Greenock, Second Chance Learning Project,

- Community centre
- Very basic kitchen facilities
- Local facilitator –member of the community

Hawick, Burnfoot Health Project,

- Set in community school
- Well-equipped cooking facilities
- Facilitated by Karen Valentine

Linktown Development Project, Kirkcaldy

- Set in (as yet unused) community cafe in housing development
- Large commercial kitchen
- Various local community projects involved in recruitment
- Facilitated by Karen Valentine

Appendix 2 (condt.).

CookWell Location Map

CookWell Locations



Appendix 3

COOKWELL INTERVENTION: FOCUS GROUPS TO INFORM DEVELOPMENT OF THE COURSE CONTENT

Summary Report

7 September 2000

Martine Stead

Centre for Social Marketing,
University of Strathclyde

1.0 METHODOLOGY

1.1 Method

Three focus groups were conducted with adult members of the public in two of the communities which will participate in the intervention. A discussion guide was used to facilitate the discussions (see Appendix). Three sets of show cards (containing terms associated with cooking, possible topics to cover on the Cookwell course, and cooking utensils) were shown to the respondents to stimulate discussion and probe feelings and experiences regarding specific issues.

1.2 Sample

The sample was recruited with the assistance of community workers in the two communities, and was drawn from people known by the community workers to have a potential interest in attending a cooking skills class.

Two of the focus groups were recruited in Greenock (community education centre) and one in Alloa (family centre).

- Around half of the respondents appeared to be unemployed; the rest were in part-time or full-time employment.
- Most but not all had children, ranging in age from babies under 12 months to adults in their early twenties.
- Most of the women had sole or primary responsibility for household cooking and shopping, sometimes for large or extended families. The two men appeared to have most of their meals prepared for them, but claimed to cook on occasions.
- Two of the respondents were described by Community workers as drug users who were sometimes difficult to work with because of unpredictable attendance and concentration.
- In Alloa, a Family Centre worker sat in on and participated to a limited extent in the focus group discussion.

2.0 FINDINGS

2.1 Feelings about Cooking

Respondents varied in their enthusiasm for, confidence about and claimed ability at cooking. Three broad groups could be identified.

- **Confident cooks.**

A small group who liked cooking and appeared relatively confident in their ability to cook a reasonable range of dishes. Their standard repertoire of dishes tended to be wider than that of the other two groups, and they also seemed familiar with a wider range of cooking techniques, such as poaching and steaming. Nevertheless, they felt in need of advice and encouragement to help them be more adventurous and introduce more variety into their cooking.

“I’m good at some things but I’d like to be better.”

“I’m not adventurous.”

(Alloa)

“Ah wid like to be adventurous in ma cooking.”

“Ah started buying like a different herb every week, just tae try it.”

“Ah wid say that’s why I did the class, tae learn how tae use different things.”

(Greenock 1)

- **Basic but fearful cooks.**

A large middle group who perceived their cooking as basic and in need of improvement. Despite being seemingly competent at some aspects of cooking, this group found cooking a chore and generally lacked confidence; for example, one woman who juggled part-time work with caring for five children and doing all the household cooking described feeling inadequate as a cook:

“I’m never organised, I’ve never got the time, never got the imagination.”

(Alloa)

Respondents in this group appeared to be able to cook a limited range of dishes satisfactorily (“well, naebody’s got ill or starvin’ so ah must be daein’ something right”), but felt that their standard repertoire of dishes and techniques was ‘boring’ and ‘unadventurous’. However, there was a great deal of anxiety about venturing beyond familiar dishes, and reluctance even to experiment on a small scale (for example, by adding slightly different ingredients, or by cooking the same ingredients in a slightly different way).

“Cos you only have to put wan different thing in it an’ it tastes different. But it’s tryin’ it.”

“See ah’d be feared tae dae that. Cos ye could ruin the whole dinner. Cos ah know what a like.”

(Greenock 1)

“Generally speaking we’re like traditionalists ah wid say. I mean, apart from like spaghetti bolognese, we widnae hae been eating that 20 years ago - we’re, like, no adventurous. We’re used tae whit we’re used tae.”

“Aye. Mince. Stovies.”

“Slice. Cabbage.”

(Greenock 1)

- **Disempowered and hopeless cooks.**

A small group who appeared to lack many basic cooking skills and appeared very disempowered, describing themselves as “useless”, “hopeless” and “crap” at cooking. This group relied heavily on frozen and pre-prepared foods and a microwave, or on others to cook for them; both the men were in this group. They found it difficult to identify specific areas for potential improvement, beyond a general wish to be better.

“I just dae basic things that come oot of a tin and intae a pot.”

(Alloa)

“Ma daughter doesnae let me near the kitchen, she says ah can’t cook. Ah mean, ah’m 44 years o’ age an’ she says ah can’t cook. Says ah burn everything. I’d like tae learn, just tae show her, prove that ah can.”

(Greenock 2)

“I’m hopeless. I’d just like to learn how tae cook!”

(Greenock 2)

“I’m quite useless at cooking, It’ll be quite an experience for me, because I’d love tae be able tae cook lots o’ things from scratch, but I just havenae attempted it, I’m never, I was never shown how tae dae it, so it’s just like a box oot the freezer.”

(Alloa)

There was uncertainty in this group about even the basic language and concepts of cooking:

“If you put a steak pie in the oven, is that no’ roastin’ it?”

“No, that’s no roastin’.”

(Greenock 1)

“If ah knew how tae dae it, ah wid grill fish. Ah seen, what’d ye call it fish, hingmy, steamed fish - ah dunno what it was, but ah wid like tae try that.”

(Greenock 1)

“Biling, is that just like cooking them in a pot? Aye ah dae that.”

(Greenock 1)

Age did not seem to be closely related to amount of confidence or feelings about cooking, with each of the three groups containing a mix of ages. Older respondents appeared slightly more likely than younger respondents to be able to cook more traditional dishes such as casseroles and roasts; however, they were sometimes less familiar with dishes such as rice and curry.

In general, respondents tended to be pessimistic rather than optimistic in their assessments of their cooking ability, and to their skill. For example, several questioned their own knowledge or practice, appealing to the more confident members of the group or the moderator “is that how you do such and such?” “am I right?”. Related to this pessimism and uncertainty was a tendency to react defensively (an “aye, but” response) to arguments from other members of the group that a particular aspect of cooking was not as difficult as others claimed. This was frequent in the groups, and perhaps represented a way of dealing with criticism and maintaining the status quo. For example, in the quote below an attempt by one respondent to point out that making a cheese sauce was easy and economical was rebuffed with rationalisations that it was too difficult or didn’t taste as good as from a packet:

“You, ah showed you how tae make a cheese sauce.”

“Aye but I like it better oot the packet.”

“An’ a that mess wi’ the cheese grater.”

“It’s cheaper for yersel.”

“Aye ah know, but.”

(Greenock 1)

2.2 Favourite Dishes

For the middle group of ‘basic’ cooks, the repertoire of foods and dishes which they cooked most regularly included:

- Frozen ready meals such as curries and lasagne (usually microwaved).
- Frozen burgers/nuggets/fish fingers (usually grilled or fried).
- Pasta-based meals (eg. tuna and pasta, macaroni cheese, spaghetti bolognese).
- Mince (especially in Greenock, where “mince ‘n’ totties” was described as “oor national dish”).
- Link and slice sausage (usually fried).
- Potatoes (usually boiled, sometimes roast or as chips).
- Fry-ups (eg. bacon, egg, sausage).

Older respondents and those in the more confident group also described occasionally making more traditional “home cooked” meals such as casseroles and stews, soups, and roast joints of meat.

“I like cooking like stews an’ that an’ big pots of stovies.”
(Greenock 1)

Younger respondents tended to cook or eat more of what were seen as less traditional dishes such as curries and pasta.

For respondents with young children, their repertoire of dishes was strongly influenced by what they perceived their children would eat, with personal preferences often coming second. The problem of finding a dish which fussy children and other family members would eat reinforced the tendency to stick to a core of basic dishes. The most adventurous respondent, who described reading cookbooks for pleasure, had no children and lived on her own.

Across all groups, some foods and dishes seemed to be particular favourites. Recipes based on these foods are likely to be popular with a majority of the course participants in both centres:

- Chicken based meals, including chicken dinner (roast chicken with potatoes and vegetables), casserole, curry, and sometimes pasta.
- Mince and totties.
- Sausage.
- Potatoes (especially roast).
- Soup.

Q. “What recipes would you like to see in the course?”
“Chicken dishes, that’s what we eat!”
“Mair tae dae wi’ pasta.”
“Meat, ah like meat.”
 (Greenock 1)

2.3 Aspects of Cooking in which Respondents Particularly Lacked Confidence or Skills

Some general aspects of cooking were identified by respondents, either spontaneously or on prompting, as being particularly challenging.

For the least confident group of ‘disempowered’ cooks, the idea of ‘home cooking’ or ‘cooking from scratch’ was daunting. This was defined as cooking which did not use or rely heavily on convenience foods and which involved some fresh ingredients; for example,

- Stews and casseroles.
- Cakes.
- Sauces which were made “from scratch” rather than from a packet or a jar.
- A ‘proper meal’, such as a roast dinner or Christmas dinner:

“I don’t know how to, you know, make up proper meals, you know, it’s always things oot a boxes, ah cannae just you know make up a curry, things like that, I’d like to be able to make like more interesting things. Ah do all sorts o’ frozen things, but I cannae just make up a meal, like from scratch.”

(Alloa)

“Ah wid like, see at Christmas time, ah wid like tae learn how tae dae like the roast totties, ye know like ma mother-in-law she can dae them, ye know the totties ah’m talking about? Ye parboil them, but ah’m saying ‘parboiling’ ah widnae know how tae dae that. Ah read a lot o’ cookery books but ah still don’t know how tae dae that.”

(Greenock 2)

Home cooking also seemed to be used to refer to what were seen as ‘proper’ methods of cooking. Respondents in the disempowered group relied heavily (sometimes almost solely) on the microwave, and had the experience of using the oven, preparing a dish “all in a big pot” [casserole dish], or techniques such as steaming. One respondent had never used her oven because the control button had fallen off:

“Ma hingme aff a’ ma oven thing, it disappeared wan night, an’ ah’ve never seen it since. It’s just went. Ah’ve got tae use pliers, an’ staun an’ haud it, so I dinnae bother. Ah just never mind the oven.”

(Greenock 1)

“How do ye steam fish?”

“Ye get see like a colander an’ just put it an tap o’ yer pot wi’ boiling water -”

“What’s a colander?”

“It’s like-”

“Like a sieve”

“Wi’ holes in it.”

“Has it got tae be like a hingmy wan?”

“Stainless steel, aye.”

(Greenock 1)

Attempts to cook ‘from scratch’ which ended in apparent failure (for example, a cheese sauce which went lumpy, stodgy rice) had the effect not only of reinforcing respondents’ poor ratings of their ability but also of encouraging them to turn to convenience and ‘easy cook’ products such as packet sauces and boil in the bag rice. Because these products ‘worked’ more often and lessened anxieties about failing (and wasting food), many had come to rely on them, despite their being less economical. The anxiety of not knowing whether a dish would turn out properly appeared to play a large part in discouraging respondents from trying new techniques.

“See if ah could dae it ah’d make the time, if ah knew ah could dae it an’ ah knew it was gonna work out.”

(Alloa)

Another clearly problematic area was following a recipe. Only one person from the three groups described finding it easy to follow a written recipe. The rest described themselves as unable to follow recipes, with some having tried and ‘failed’ and others simply believing that it would be beyond them.

“No I don’t follow recipes - I think I’m better watching somebody, an’ remembering it.”
(Alloa)

“I’m no sure why really - I just don’t think I would be able tae do it - that’s why I haven’t tried-”
(Alloa)

Attempts by more confident respondents to demystify the process met with little success:

“Ah widnae know how tae dae that [follow recipe]. See when it says like flour or whatever, like the amount of flour, ah’d be just like ‘well how much is that?’, ah just widnae know.”
“If ye had wee scales an’ that ye wid know.”
“Nah, ah widnae have a clue.”
(Greenock 1)

“It’s the measuring.”
“An ye get so far an ye forget whit ye’ve done an ye have tae start over again.”
“Ah get mixed up, ah lose track of whit ah’ve put in.”
(Greenock 2)

For some, the problem appeared to be understanding measurements, while others seemed put off by the need to follow a sequence of instructions, claiming that they ‘got lost’ or confused. The language of recipes was also difficult, with some claiming they “hadnae a clue” what instructions such as ‘dice’ and ‘saute’ meant. Several respondents found it difficult even to articulate what they found so difficult about following recipes, other than to say that they ‘just knew they couldn’t’. It is possible that literacy and numeracy problems underpinned some of these apparent difficulties, although it was not possible to explore this in the groups.

2.4 Response to Potential Course Topics

Respondents were shown a series of showcards listing various aspects of cooking and types of dish, and asked to discuss their feelings about and experiences of each, and also whether they were interested in learning more about them. From this exercise, several topics emerged (some not included in the showcards) about which the majority of respondents had an expressed interest in learning more. These were sauces, budget cooking and soup. Topics which also generated a reasonable amount of interest among a proportion of respondents were pasta and pasta dishes, rice and rice dishes, casseroles and stews, cakes, and cooking for children. Other topics generated a mixed, indifferent or negative response; these were fish, healthy cooking, vegetables, vegetarian cooking.

(i) Sauces

This was one of the most popular topics across all three groups.

“See this is what ah want tae learn.”

“Aye me too.”

“Aye, see ah buy them, but it’s in a jar, like Uncle Ben’s Sweet and Sour, things like that.”

“Cheese sauce.”

“See this is what we want tae learn, like wi’ cornflour an’ that.”

(Greenock 1)

“Sauces, how tae make sauces, ah wid love tae know mair aboot how tae make different sauces.”

(Greenock 1)

Nearly all respondents liked pasta or macaroni with a cheese sauce. However, many did not know how to make a cheese sauce other than by using a packet mix.

“No, I just make it oot the packet.”

“Ah’ve tried tae make it like wi’ flour an’ milk, an’ it goes lumpy. An ah’ve tried tae make it wi’ the packet an’ it still goes lumpy.”

“Ah’ve tried it wi’ cornflour, but-”

(Greenock 2)

“I just wouldn’t know where tae start tae make a cheese sauce from scratch, wouldnae have a clue, it’s always oot a packet.”

(Alloa)

Some even found packet mixes difficult, sticking instead to the branded products in which pasta and sauce granules are cooked together. Attempts by other respondents to remove some of their perceived difficulties met with a defeated shrug.

“Ah cannae make any kind o’ sauce at all, ah just buy - see ah wid like tae made ma ain macaroni cheese an’ that wi’ ma ain sauce but ah just cannae dae it, ah just need tae buy it in a box.”

“Ye could buy a packet of sauce.”

“Ah’ve tried that, but ah end up putting too much milk in an’ that.”

“It tells ye, half a pint o’ milk an’ that-”

“Ah know, but ah just cannae dae it.”

(Greenock 1)

Similarly, several liked pasta prepared with jars of branded tomato-based or other savoury sauces. Some of the more adventurous respondents described using a jar sauce as a base to which they added extra ingredients such as spices or onions, but only a small handful described making pasta sauces “from scratch”.

“It’s always from a jar, ah can’t just make it from scratch - ah’ve always got tae start off wi’ a jar.”
(Alloa)

“I make my own bolognese sauce with chopped tomatoes out of a tin.”
(Alloa)

Gravy and other sauces for meat were also difficult for some:

“Ah cannae make like a sauce aff o’ the meat, like gravy - when ye take the juice aff an’ that, ah just doahn’t know what ah’m daein’ wrong.”
(Greenock 1)

“See if they done away wi’ Bisto ah just widnae know what tae dae, cos I cannae make anything else wi’ oot Bisto.”
(Greenock 1)

However, there was a mistrust of any sauces that were ‘too fancy’; several for example thought that they would not like a meat sauce which contained wine.

“See ah dinnae like things wi’ drink in it.”
“Nah.”
“If ah know it’s in it, ah widnae like it.”
“It’s a waste.”
“Ah’ve never seen anybody cook a meal wi’ wine in it.”
(Greenock 1)

(ii) Budget Cooking

This was also a popular topic.

“Aye, we’re a’ intae that!”
“Definitely.”
(Greenock 1)

“Definitely, aye”
“Aye, we’re skint!”
(Alloa)

The concept of ‘budget cooking’ was interpreted by respondents as covering a number of different issues:

- Meals prepared with cheap ingredients, and not relying on more expensive frozen foods:

“Cheaper cooking.”

“Cheaper ingredients.”

“Something that’ll last, that you can put in the freezer or the fridge for another day.”

(Greenock 2)

“Ingredients being cheap, an’ getting as much as you can out o’ them.”

(Alloa)

“Like different food on a budget. Cos like, ah eat all like frozen foods, like meats, fish, curries, pizzas”

(Greenock 2)

- Meals which required ordinary ingredients rather than unfamiliar or one-off ingredients which could not be used in other dishes.

“Using things that ye’ve got in yer hoose, that’s budget cooking. Like everybody’s got chips ‘n’ tatties, so it’s got tae be something tae dae wi’ tatties an’ whatever else ye’ve got in the cupboard.”

“Cos it’s all the extra things ye need, like the spices an’ that, it a’ adds up.”

(Greenock 1)

“Things that you’ve got everyday in your cupboard rather than going out an’ buying fancy ingredients you never use again.”

(Alloa)

- Filling and unpretentious meals.

“Something that’s filling and tasty and doesnae cost much money basically.”

(Alloa)

“Nothing dead fancy. Not like on the telly where they’ve got like one bit o’ meat and one roast bit and wan spoonful o’ gravy!”

(Greenock 1)

Budget cooking for some also potentially covered advice on how to shop economically. Several expressed difficulty knowing how to “organise” and to “plan”; one woman expressed uncertainty buying food at its sell-by date:

“Organising it, like organising what tae buy.”

“So there’s no waste.”

(Greenock 1)

“See the other day I was at the supermarket an’ ye ken how they got a’ the cheap things ‘at are on their sell-by date, an’ I goes tae the wumman, ‘See if ah buy that can ah stick ‘at in the freezer’, an’ she goes, ‘Aye, it’ll keep for three months’. An’ see ah didn’t know that, if ah’d knew that ah couldae been getting a’ that cheap stuff an’ stickin’ it in the freezer, but I didnae know that. Ah thought wance it was on the sell-by date that wis it.”

(Greenock 2)

(iii) Soups

Soup was also a popular topic. Nearly all respondents liked soup, particularly traditional vegetable-based soups.

“Love soup.”

“Aye.”

“Broth. Tottie soup.”

“Broth. Lentil soup.”

(Greenock 1)

Older and more confident respondents described being able to make their soup (*“Ah think ‘at’s the only thing ah can make”*), while the less confident respondents said that they had either failed in previous attempts or would not know how to start.

“Ah cannae make soup. The wean eats like a tin o chicken soup for her tea, but I dinnae know how tae make it. Ah wid make it if I knew.”

(Greenock 1)

“Ah’ve tried tae make soup, but it just disnae come oot right.”

“Tastes horrible when I make it.”

“Ah wid like tae learn how tae make soup.”

(Greenock 2)

The more confident group expressed an interest in learning new soup recipes, providing they were within the range of what was considered ‘ordinary soup’ (eg. with chicken or traditional vegetables) and did not include ingredients which were seen as too exotic or strong tasting for soup:

“Ah’ve no got enough imagination tae make like different types.”

(Alloa)

“I’d like tae know how to make chicken soup.”

(Alloa)

“Ah like soup wi like turnip an carrot an that. Ah don’t like it when you’ve got those, hingmes, peppers an’ that.”

“No ah don’t like that.”

“Ah once made something, there was some recipe on the back of the packet, an’ it was like red peppers an’ green peppers an’ it was disgusting.”

(Greenock 1)

(iv) Pasta and Pasta-based Dishes

Some of the less confident respondents also expressed an interest in learning about cooking pasta. Although most said they were able to cook pasta fairly easily, one or two had never tried and appeared doubtful that they would be able to do it.

“I’m not quite sure how tae go about cooking it, or the things ‘at go with it.”

(Alloa)

“Ah wid like tae know how tae dae that pasta wi like tomato, tomato sauce ken - whit’s it called, that wan wi’ tomatoes in.”

(Greenock 2)

Others who were more confident with cooking pasta expressed an interest in learning new pasta recipes, beyond the standard tuna and pasta, macaroni cheese and spaghetti bolognese. Respondents in Greenock who had recently attended a cookery class described with enthusiasm a “pasta bake” they had made.

“See when ah dae pasta it’s just like pasta - ah can make like a sauce like wi’ spaghetti bolognese, but ah wid like tae learn how tae make like pasta wi’ different things, different sauces.”

(Greenock 2)

As with the other dishes, however, there was anxiety about pasta dishes which used unfamiliar ingredients.

(v) Rice and Rice-based Dishes

Savoury rice was slightly less popular than pasta, and was still regarded by some of the older respondents as somewhat unusual (*“Ah’m eating beef curries an’ chicken curries since two weeks ago! Me!”*). Among younger respondents, fried takeaway rice was very popular.

Some respondents cooked their own rice, and one or two of the more confident respondents described experimenting with different types of grain for different dishes (eg. risotto, curry). However, many relied on ‘boil in the bag’ rice, claiming that ‘proper rice’ was too difficult to cook.

“Not a lot, nah, I’ve cooked it a couple a’ times. I’d like tae be able tae cook it, because when ah did cook it, sheeurch, that’s what put me off, knowing how tae do it properly.”

(Alloa)

Previous failed attempts had led some to try boil in the bag rice, which was seen as more predictable.

“The first time I bought the bag an’ the second time it was the boil-in-the-bag, an’ I found that easier, that turned out a lot better.”

(Alloa)

“Ah wid like tae know how tae make like rice wi’ different things in it. An’ how tae make like rice so instead a getting the wee packets ye get like a big bag an ye can get like nine meals out of it.”

(Greenock 2)

Again, attempts by more confident respondents to persuade others that cooking ‘proper rice’ was almost as easy and quick, and also more economical, were defensively rebuffed.

“Ah widnae dae that [cook ‘proper’ rice].”

“Ah couldnae be bothered.”

“Boil in the bag, it’s so easy.”

“12-18 minutes, ah ken it aff by heart.”

“See you’re saying that, that’s the same time tae cook the ordinary rice, an’ ye get so much more wi’ that.”

“Aye but ye don’t need to dae this that an’ the other, it’s a’ done.”

“Ah’m a lazy cook.”

(Greenock 1)

(vi) Casseroles and Stews

Casseroles and stews, usually with chicken, sausage or stewing steak, posed few problems for the more confident and older respondents.

“That’s an easy kind of dish for me.”

“Aye, you just stick everything in a big pot and stick it in the oven, you can forget it’s there.”

(Alloa)

For younger and less confident respondents, however, casseroles and stews were seen as daunting examples of ‘proper’ cooking.

“Ah think I’ve got like a big pot somewhere but it’s no been out the cupboard for years.”

(Alloa)

“That’s the sort o’ think I’d like to make. I’ve tried, but - it’s havin’ the time to prepare it all.”
(Alloa)

“Ah’d like tae know how tae dae that.”
(Greenock 2)

Sausage, chicken or stewing steak, with ordinary vegetables such as potatoes, carrots and onions were popular ingredients.

(vii) Cakes

A few respondents spontaneously expressed an interest in learning how to make cakes. Making a cake without relying on a packet mix was considered an example of proper cooking ‘from scratch’.

“Ah’d like tae bake cakes an’ that. Like properly. Cos ah can dae it oot a packet an’ that, but ah’d like to know how tae dae it fae scratch, like.”
(Greenock 2)

“Ah wid make cakes, me, if ah knew how tae.”
“Aye, if ah knew.”
(Greenock 1)

However, others said they would prefer the course to concentrate on meals:

“Ah’m no bothered about that, ah’m a food person me.”
“Aye, proper food.”
(Greenock 1)

(viii) Cooking for Children

This was an area which clearly caused some frustration among respondents with younger children.

Two main difficulties with cooking for children were identified: finding a dish that fussy or faddy children would eat, and having to cater for children coming in the house at different times rather than at a fixed meal time. Some identified that one solution, at least to the latter problem, would be to make a large dish to which everyone could help themselves at different times.

“The two o’ the, they never eat the same. You’ve got tae make one thing for one, one thing for the other. It’d be great if you could make one thing that could last, that you could stick in the microwave for them at whatever time, that you could feed everybody wi’.”
(Greenock 2)

"I make something everytime somebody comes in, ah've gotta get up 'n make something again - I'd like to be able to prepare something they could all like heat up when they come in."
(Alloa)

The former problem was considered less easy to solve. For some parents, the difficulty was not that children ate the 'wrong' things (eg. too much unhealthy food or not enough vegetables), but that they did not seem to eat very much of anything and were suspicious of anything unfamiliar. These respondents felt that the course would be little help in this respect:

Q: "Would it help if you made things in the class and took them home - like new things? Would they be interested?"
"Nah they widnae touch it."
"Ah've taken my we yins roond Iceland and said, 'Pick something, doesnae matter how much it costs', an' they're like, nuh don't like it."
"It might help, like something different."
"Nah, they'd be like, 'Whit's in it?'"
 (Greenock 1)

One or two respondents also raised the issue of food additives in relation to children's food and drink, and suggested that it might be interesting to find out more:

"Like what won't make them hyper."
"Different additives an' that."
 (Greenock 2)

(ix) Fish

Fish was an unpopular food and an unpopular potential topic for the course.

"Naebody in ma family likes fish."
"Only time we eat it's oot the chip shop."
 (Alloa)

"I don't like fish. Soon as I see a bone, that's me, bwurgh-"
"Same wi' me. Don't like any fish. Don't like tuna, nothin'."
 (Greenock 1)

"Ah don't like fish."
"Tuna, that's it."
 (Greenock 2)

For those respondents who did like and occasionally eat fish, it was almost universally agreed that fish was only acceptable if cooked and presented in certain ways.

The most acceptable method was white fish fillets battered or in breadcrumbs, "like in the chippie", accompanied by chips or potatoes. This was usually fried, although some grilled it. Only one described poaching fish in milk.

“Normally I would like dip it in egg and put like the crumbs on it.”

“Aye that’s the only way ah know how tae dae it.”
(Alloa)

“Ah like a bit o’ fish wi’ the batter roond it.”
(Greenock 1)

“Ah widnae steam it, widnae know how.”
(Greenock 1)

Tinned tuna fish in mayonnaise for sandwiches or with pasta was also acceptable. Some described occasionally eating boiled whelks and mussels, although the mention of other kinds of seafood such as crab produced squeamish shudders. Frozen fish products such as scampi and fish fingers were also considered acceptable, although it was felt that these did not constitute ‘real fish’:

“I only eat like fish fingers, an’ ah widnae call that fish, that’s like kid-on fish, ken.”
(Greenock 1)

Other methods of preparing fish were felt, by a majority in all three groups, to be ‘wrong’. The thought of cooking and eating a whole fish, “wi’ the head on”, was beyond the pale:

“A whole fish wi’ the head an’ tail on it, ye’ve got tae be joking.”
“Ah widnae gae near that.”
“Ah widnae know where tae start.”
(Greenock 1)

“Ah couldn’t ever.”
“Nah, ah couldnae dae that.”
(Alloa)

“Ah couldnae eat like whole fish, ah hate that.”
(Greenock 2)

Interestingly, however, preparation methods which could be considered as at the other extreme from a whole fish, such as fish ‘hidden’ or combined in a casserole, pie or curry, were also considered wrong:

“Do you not think it’s because it’s in a pot? You just don’t - fish is like fish and chips, it’s no’ in a pot.”
“Just doesnae appeal tae me like that.”
(Alloa)

“Ah’ve made fish pie, wi’ like vegetables an’ potatoes.”

“No ah don’t fancy that, you see.”

“Nah.”

“Ah just like fish in like a wee certain way.”

“Fish an’ chips.”

“Ah widnae want it in like a big dish.”

“No, fish pie ah widnae fancy that.”

(Greenock 1)

“Ah wouldnae like it in a curry.”

(Alloa)

“I think it’s like fish is a basic thing, you just eat it like as fish, no’ in a sauce or anything, you don’t do anything fancy with fish.”

(Alloa)

Respondents found it hard to identify why the combination of fish with other ingredients were unacceptable, but the tone of voice and body language suggested that feelings were deep-seated.

Awareness of different kinds of fish seemed limited. For many, fish was simply “chip shop” fish, generic white fish and tuna, and other kinds of fish such as oily fish, trout, and salmon tended to be named only on prompting or after some discussion.

“Cod, haddock.”

(Greenock 1)

“I cannae remember the name o’ the fish I bought once. Like, yellow fish.”

“Ma granny used tae buy, what’s it, haddock?”

“Aye, haddock.”

“That white stuff, ‘at’s ok. Ah don’t know what ye call it - whiting?”

“Fillet, is that whit it’s called?”

(Greenock 2)

“White fish. Ah’ve never tried any other kind o’ fish.”

“Ah had trout once. It wis quite nice.”

(Alloa)

(x) Healthy Cooking

The idea of learning about ‘healthy cooking’ on the course produced a mixed response. For one group the notion triggered an immediate knee-jerk response of scepticism about all kinds of expert healthy eating advice.

“Ye’d die o malnutrition if ye believed everything they tell ye.”
“Something last night aboot weans getting asthma aff a junk
food! Chips an’ that!”
 (Greenock 1)

This same group had negative perception of healthy cooking, perceiving it as boring and unfilling and expensive.

“Ah think when people eat that healthy stuff they’re always
hungry!”
“Aye it doesnae fill ye up.”
 (Greenock 1)

“Healthy eating, everything’s like boiled. Boring.”
“No, healthy eatin’ is like ye grill it instead o’ fryin’ it.”
“Nah ah like ma fat.”
 (Greenock 1)

Other groups were more open to the idea, and perceived that advice on healthy cooking would cover topics such as healthier ways to prepare food and healthier ingredients.

“Well, no’ using as much fat ‘n sugar in your diet, using more
vegetables.”
“Salads, ken, broon breid, ken.”
 (Alloa)

“Grilling rather than frying. That kind o’ thing.”
 (Greenock 2)

There were mixed views in all groups about whether ‘healthy’ cooking was more expensive.

“Healthy eating is mair expensive, oh aye.”
“Aye definitely.”
“It’s like a’ that organic an’ that.”
“See when ye’re in the freezer shop, a’ the healthy stuff it’s like
mair expensive.”
“It’s too dear.”
 (Greenock 1)

Some equated it with organic vegetables and ‘healthy option’ type frozen meals; others were less sure, suggesting that the ingredients were not necessarily more dear and could even be cheaper. However, there was a feeling that healthy cooking required more thought.

“It’s harder [to cook healthily].”
“You’ve got tae think aboot it more - like what you can
substitute.”
 (Alloa)

It may be advisable to incorporate healthy cooking advice ‘covertly’ into all sessions rather than explicitly to label sections of the course content as ‘healthy’, to avoid the risk of switching off those with negative images of healthy eating and health advice.

Another way in to the theme of healthy cooking may be through the issue of dieting and weight loss:

“I would like tae eat healthy food if it was like gaein on a diet!”

(Greenock 1)

(xi) Vegetables

The idea of learning more on the course about cooking vegetables received a fairly indifferent reaction. Respondents varied in their liking for vegetables, with some claiming to eat vegetables very infrequently:

“Ah like ma veg, that’s one thing that I dae buy fresh.”

(Alloa)

“I dinnae eat veggies, ah’m no a veggie person.”

(Alloa)

“Ah doahn’t like veg. Ah like cauliflower cheese that comes in a carton an’ ye stick it in the microwave, but that’s it.”

(Greenock 1)

Traditional, ‘ordinary’ vegetables such as carrots, turnips, peas, onions, cabbage and sweetcorn were preferred. One respondent described putting peppers in stirfries, but others said they did not like peppers or found them expensive. Most bought a mixture of fresh and tinned:

“Peas, that’s aboot it fer me. Tinned peas.”

“Ma sister makes like vinegar peas, an ah love them, but see ah don’t know how tae make them, ah always put too much vinegar in.”

(Greenock 1)

“Sometimes tins o’ carrots for handiness, but it’s mostly fresh.”

(Alloa)

The majority cooked vegetables by boiling them, or by microwaving. Parsnips were sometimes roasted in the oven with roast potatoes. Only a small handful described other preparation methods such as steaming or using a blender to prepare vegetables for babies.

"Ah don't dae steamin'."
"Ah don't dae a lot o' vegetables."
"Ah just bile ma vegetables."
"Ah just microwave ma veg, it's quicker. Stick it on the plate and in the microwave."
 (Greenock 1)

Little enthusiasm was expressed for learning more about cooking vegetables, although there may be some potential for providing new ideas about preparing favourites such as peas, carrots and parsnips.

(xii) Vegetarian Cooking

Like 'healthy cooking' and vegetables, the idea of learning how to cook vegetarian meals produced a mixed, but mostly indifferent or sceptical, response.

"Nah."
"No, no we don't like that."
"We like oor meat."
 (Greenock 1)

"What's a vegetarian meal?"
"Ah couldnae dae wi' out meat."
"Ah've tried like that tof, what's it called, tofu. An' that stuff at looks like mince. It's no bad."
 (Greenock 2)

"It's mair expensive."
"Aye. Linda McCartney. £2 for a curry. The wummin's dead an' she's still making money!"
 (Greenock 2)

A few expressed a tentative interest in trying a vegetarian dish such as pasta, for the novelty value, but thought it unlikely it could become a staple part of their diet.

"No there's usually a bit o' meat in it."
"I would make like a lasagne wi' all veg, but"
 (Alloa)

"I would try it, but we'd always like have something with it."
 (Alloa)

(xiii) Other Topics

A few other topics generated a small amount of interest among some respondents. These were:

- Finding out about food labelling
- Food hygiene and safety
- Knowing what kinds of meat to buy
- Microwave cooking (several had lost their original instruction booklet)

2.5 Utensils

Finally, respondents were asked whether they owned various kitchen utensils (see Appendix for full list). A pan, cheese grater and wooden spoons were the only utensils which seemed to be universally owned; for all the rest, there was at least one person in each group who claimed not to have one.

Some of the comments made by respondents in this section of the discussions were revealing of other aspects of their lives:

*“Ah don’t have any decent knives any more, because we had
tae sell them when ma Maw died tae get some money”*
(Greenock 2)

*“All o’ ma stuff’s shite, ah just get the cheap stuff fae
Poundstretcher an’ it’s crap”*
(Greenock 1)

Certificate

Awarded to

For completion of CookWell cookery course

Presented by

**Centre for Public Health Nutrition
Research
University of Dundee**



May 2002

Director: Professor A. S. Anderson

ID Code

Measurement time

Date of interview

Community centre

Control (C) or Intervention (I)

A. Can you tell me where you would like to be interviewed in the future?

Home ☐Community ☐

ID Code

Name:

Address:.....

.....

.....

.....

Postcode:.....

Telephone no. (please include STD code).....

Details of household members:

[illegible]

PRESENT ACCOMMODATION

C1. Can you tell me what type of accommodation you have?

SHOW CARD B

Whole house, bungalow

detached house 1 ☐

semi-detached house 2 ☐

terraced or end-terraced house 3 ☐

Flat 4 ☐Bedsit 5 ☐

Other, specify..... 6 ☐

C2. Can you tell me which of the following applies to you?

SHOW CARD C

I/We own our own home 1 ☐

I/We pay rent to a private landlord 2 ☐

I/We pay rent to the council 3 ☐

The council pays our rent for us 4 ☐

I/We are living in a hotel/hostel/B&B paid for by the council 5 ☐

I/We belong to a housing association 6 ☐

Other, please specify..... 7 ☐

C3. Which, if any, of these does your household use when cooking or preparing meals? Please tick **one** box.

- A separate kitchen just for your own household's use? 1 ☐
- A separate kitchen which you have to share with other households? 2 ☐
- Cooking facilities just for your household's use but not in a separate room? 3 ☐
- Something else, specify? 4 ☐

C4. Which room do you ...and the children normally eat your meals in? Please tick **one** box for each.

SHOW CARD D

	Children	Adults
Living room, at a table	1 ☐	1 ☐
Living room, in front of the TV	2 ☐	2 ☐
Dining room, at a table	3 ☐	3 ☐
Kitchen	4 ☐	4 ☐
It depends	5 ☐	5 ☐
Never eat at home	6 ☐	6 ☐
None of these, please specify.....	7 ☐	7 ☐
		

EMPLOYMENT

C5. Can you tell me if you or your partner have a job at the moment?

SHOW CARD E

DNA, no female adult ☐	DNA, no male adult ☐		
	Female adult	Male adult	
Unemployed	1 ☐	1 ☐ ☐	C7
Employed full time	2 ☐	2 ☐ ☐	C6
Employed part time	3 ☐	3 ☐ ☐	C6
Self-employed	4 ☐	4 ☐ ☐	C6
At school/college	5 ☐	5 ☐ ☐	C7
Looking for work	6 ☐	6 ☐ ☐	C7
Looking after the family at home	7 ☐	7 ☐ ☐	C7

Not actively seeking work	8 ☐	8 ☐ ☐	C7
Retired or on disability allowance	9 ☐	9 ☐ ☐	C7
Other (please specify)	10 ☐	10 ☐ ☐	C7
			

C6. If employed, what is your/your partner's present job?

Female adult.....☐ **C9**

Male adult.....☐ **C9**

C7. May I just check, have you/your partner ever had a paid job or done any paid work?

	Female adult	Male adult	
Yes	1 ☐	1 ☐ ☐	C8
No	2 ☐	2 ☐ ☐	C9

C8. If so, what was that job?

Female adult.....☐ **C9**

Male adult.....☐ **C9**

MEALS NOT PREPARED IN THE HOME

C9. Can you tell me what the children do for lunch?

DNA, no children ☐

SHOW CARD A1

	Pre-school children	School children	
Go to lunch at school/nursery/playgroup	1 ☐	1 ☐ ☐	a)
Take a packed lunch to school/nursery/playgroup	2 ☐	2 ☐ ☐	C10
Have lunch at home	3 ☐	3 ☐ ☐	C10
Have a takeaway	4 ☐	4 ☐ ☐	C10
Go to a café/restaurant	5 ☐	5 ☐ ☐	C10
Go to friend's/relatives' house	6 ☐	6 ☐ ☐	C10

Buy food from a shop	7 ☐	7 ☐	☐	C10
Buy food from a mobile van	8 ☐	8 ☐	☐	C10
Don't eat lunch	9 ☐	9 ☐	☐	C10
Don't know	10 ☐	10 ☐	☐	C10
Other, please specify	11 ☐	11 ☐	☐	C10

a) If child/children go to school/nursery/playgroup lunches, what type of meal is provided?

Cafeteria system with meals and snacks available	1 ☐	☐	b)
Choice of meal or snack (primary school)	2 ☐	☐	b)
Meals only	3 ☐	☐	b)
Snacks only	4 ☐	☐	b)
Set meal	5 ☐	☐	b)
No school meals provided	6 ☐	☐	C10
Other, please specify	7 ☐	☐	b)

b) Is a vegetarian choice available?

Yes 1 ☐ **No** 2 ☐ **Don't know** 3 ☐

C10. Can you tell me how often the family buy takeaway meals?

SHOW CARD F

	Children	Adults
Every day	1 ☐	1 ☐
4 to 6 times a week	2 ☐	2 ☐
2 or 3 times a week	3 ☐	3 ☐
Once a week	4 ☐	4 ☐
Every 2 weeks	5 ☐	5 ☐
Once a month	6 ☐	6 ☐
Less than once a month	7 ☐	7 ☐
Never	8 ☐	8 ☐

C11. Can you tell me what type of takeaway meals are the favourites of the child(ren) and the adult(s)? Please tick more than one answer, if appropriate.

SHOW CARD W

	DNA, no children	☐
	Children	Adults
Fish and chip shop	1 ☐	1 ☐
Pizzas	2 ☐	2 ☐
Baked potatoes	3 ☐	3 ☐
Hamburgers	4 ☐	4 ☐
Chinese	5 ☐	5 ☐
Indian	6 ☐	6 ☐
Turkish	7 ☐	7 ☐
Other(s)	8 ☐	8 ☐

If the answer to **C11** is 'other(s)', please specify which type of takeaway meals are preferred by

Child(ren).....

Adult(s).....

C12. Can you tell me if the family eat out at all, apart from school or work?

Yes 1 ☐ If yes, please go to **(a)**.

No 2 ☐ If no, please go to **C14**.

(a) Can you tell me how often you eat out? Please tick **only** one box.

DNA, no children ☐

SHOW CARD F

	Children	Adults
Every day	1 ☐	1 ☐
4 to 6 times a week	2 ☐	2 ☐
2 or 3 times a week	3 ☐	3 ☐
Once a week	4 ☐	4 ☐
Every 2 weeks	5 ☐	5 ☐
Once a month	6 ☐	6 ☐

Less than once a month	7 ☐	7 ☐
Never	8 ☐	8 ☐

C13. If answer to **C12** is yes, where do you eat out?

SHOW CARD V

	Children	Adults
Fast food restaurant e.g. McDonald's, Burger King, Kentucky Fried Chicken	1 ☐	1 ☐
Pizza restaurant	2 ☐	2 ☐
Fish and chip restaurant	3 ☐	3 ☐
Hotel/bar e.g. 'pub' meal	4 ☐	4 ☐
Vegetarian restaurant	5 ☐	5 ☐
Steak house	6 ☐	6 ☐
Community café	7 ☐	7 ☐
Other(s), please specify.....	8 ☐	8 ☐

If the answer to **C13** is 'other(s)', please specify which type of meals are preferred by

Child(ren).....

Adult(s).....

FOOD INFORMATION

C14. Can you tell me if you enjoy cooking?

Yes 1 ☐ ☐ **C15**

No 2 ☐ ☐ **a)**

a) If **not**, can you tell me why this is?

.....

C15. Where did you first learn to cook? Please tick **one** answer.

SHOW CARD S

- | | |
|--|--|
| 1 ☐ Mother | 11 ☐ Cookery programmes on TV |
| 2 ☐ Father | 12 ☐ Magazine/newspaper articles |
| 3 ☐ Grandmother | 13 ☐ Booklets/leaflets from supermarkets/food producers |
| 4 ☐ Wife/husband/partner | 14 ☐ Health centre/doctor |
| 5 ☐ Other relative | 15 ☐ Community centre |
| 6 ☐ Friends | 16 ☐ Your child/children |
| 7 ☐ Childminder | 17 ☐ None of these |
| 8 ☐ Cookery classes at school | 18 ☐ Haven't learned to cook |
| 9 ☐ Other cookery classes | 19 ☐ Don't know/remember |
| 10 ☐ Cookery books | 20 ☐ Other, please specify..... |

C16. And later on, which, if any of these was useful to you in learning more about cooking?

SHOW CARD S

- | | |
|--|--|
| 1 ☐ Mother | 11 ☐ Cookery programmes on TV |
| 2 ☐ Father | 12 ☐ Magazine/newspaper articles |
| 3 ☐ Grandmother | 13 ☐ Booklets/leaflets from supermarkets/food producers |
| 4 ☐ Wife/husband/partner | 14 ☐ Health centre/doctor |
| 5 ☐ Other relative | 15 ☐ Community centre |
| 6 ☐ Friends | 16 ☐ Your child/children |
| 7 ☐ Childminder | 17 ☐ None of these |
| 8 ☐ Cookery classes at school | 18 ☐ Haven't learned to cook |
| 9 ☐ Other cookery classes | 19 ☐ Don't know/remember |
| 10 ☐ Cookery books | 20 ☐ Other, please specify..... |

C17. Would you like to learn more about cooking?

- | | | | |
|-----|----------------------------|--------------------------|------------|
| Yes | 1 ☐ | ☐ | C19 |
| No | 2 ☐ | ☐ | C18 |

C18. Can you tell me why you do **not** want to learn more about cooking? Please tick **one** box only.

- | | |
|---|----------------------------|
| I know enough already | 1 ☐ |
| Don't have time to cook | 2 ☐ |
| Prefer to eat out/get takeaways/buy convenience foods | 3 ☐ |
| Not interested in cooking | 4 ☐ |
| Other, please specify | 5 ☐ |
| Nobody would eat the food I cook | 6 ☐ |
| Don't know | 7 ☐ |

C19. If you wanted to find out more about cooking methods, which of these ways would you prefer to use? Please tick as many answers as appropriate.

SHOW CARD T

- | | |
|--|-----------------------------|
| Cookery programmes on TV | 1 ☐ |
| Specialist cookery/food magazines | 2 ☐ |
| Cookery books | 3 ☐ |
| Cookery classes/courses | 4 ☐ |
| Videos on cookery skills | 5 ☐ |
| Ask a member of the family/friend | 6 ☐ |
| Booklets/leaflets from supermarkets/food producers | 7 ☐ |
| Articles in newspapers/magazines | 8 ☐ |
| Community centre | 9 ☐ |
| Other, please specify..... | 10 ☐ |
| None of these | 11 ☐ |
| Don't know | 12 ☐ |
| Wouldn't want to find out more about cooking methods | 13 ☐ |

C20. How useful would you find more information on.....? Please tick **one** box for each food.

SHOW CARD G

	Very useful	Fairly useful	Not very useful	Not at all useful	Don't know
a) Preparing fresh vegetables and fruit	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
b) Preparing meat and poultry	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
c) Preparing fish	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
d) Preparing soup	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
e) Preparing sauces	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
f) Food hygiene	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
g) How to store food safely	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
h) Safe use of the microwave to re-heat foods	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
i) Microwave cookery generally	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐

C21. How important do you think it is to teach boys to cook?....and girls?

	Boys	Girls
Very important	1 ☐	1 ☐
Fairly important	2 ☐	2 ☐
Not very important	3 ☐	3 ☐
Not at all important	4 ☐	4 ☐
Don't know	5 ☐	5 ☐

C22. Do you teach your child/children to cook? **Yes** 1 ☐ **No** 2 ☐

Any comments

.....

C23. Can I ask you - what influences the choice of foods that you give your family? Please give as many answers as appropriate.

SHOW CARD H

- | | | |
|---|---|--------------------------|
| Cost - foods I can afford | 1 | ☐ |
| Health - try to provide healthy diet | 2 | ☐ |
| Children's likes/dislikes | 3 | ☐ |
| Spouse/partner's likes/dislikes | 4 | ☐ |
| Taste - foods I like eating | 5 | ☐ |
| Convenience - foods that are easy to prepare/cook | 6 | ☐ |
| Habit - what we usually have to eat | 7 | ☐ |
| Other, please specify | 8 | ☐ |

FAMILY MEALS

C24. Can you tell me if you usually have a meal or snack at home with all or most of the other people in your household?

- | | | |
|------------------------|----------------------------|-------------------------------------|
| DNA, live alone | ☐ | |
| Yes | 1 ☐ | ☐ C25 |
| No | 2 ☐ | ☐ C28 |
| Don't know | 3 ☐ | ☐ C28 |

C25. About how often would you say you do this?

- | | |
|--------------------------|----------------------------|
| Two or three times a day | 1 ☐ |
| Once a day | 2 ☐ |
| Every 2 to 3 days | 3 ☐ |
| Every 4 to 5 days | 4 ☐ |
| Once a week | 5 ☐ |
| Less than once a week | 6 ☐ |
| Don't know | 7 ☐ |

C26. Which **one** of these statements best describes mealtimes with other members of your household?

SHOW CARD X

- | | |
|---|----------------------------|
| I usually enjoy mealtimes | 1 ☐ |
| Sometimes I enjoy mealtimes, sometimes not | 2 ☐ |
| Mealtimes are not usually enjoyable | 3 ☐ |
| Mealtimes are too rushed to notice whether they're enjoyable or not | 4 ☐ |
| None of these | 5 ☐ |
| Don't know | 6 ☐ |

C27. Which meals or snacks, if any, do all members of your household eat together?

SHOW CARD Z

- | | |
|----------------------------|----------------------------|
| Breakfast | 1 ☐ |
| Midday meals | 2 ☐ |
| Weekday tea/evening meals | 3 ☐ |
| Saturday tea/evening meal | 4 ☐ |
| Sunday lunch | 5 ☐ |
| Sunday tea/evening meal | 6 ☐ |
| Other, please specify..... | 7 ☐ |

(If single parent ask if children are with other parent some or all weekends)

.....

FOOD SHOPPING

C28. Is there a car or a van **normally** available for use by you or any members of your household for shopping?

- | | |
|--|----------------------------|
| Yes, own car | 1 ☐ |
| Yes, use of car, e.g. works car/van, share car with someone else | 2 ☐ |
| No car | 3 ☐ |

C29. Can you tell me where you usually buy most of your food? Please tick only **one** answer.

	Fruit and vegetables	Bakery goods	Meat/ fish	Milk	Other foods eg tins, tea, flour
Supermarket, e.g. Asda, Tesco, Sainsbury	1 ☐	1 ☐	1 ☐	1 ☐	1 ☐
Local shops	2 ☐	2 ☐	2 ☐	2 ☐	2 ☐
Freezer store, e.g. Farmfoods, Iceland	3 ☐	3 ☐	3 ☐	3 ☐	3 ☐
Discount store, e.g. Lidl, Scotmid	4 ☐	4 ☐	4 ☐	4 ☐	4 ☐
Food hall in a department store, e.g. Marks and Spencer	5 ☐	5 ☐	5 ☐	5 ☐	5 ☐
Other, please specify.....	6 ☐	6 ☐	6 ☐	6 ☐	6 ☐

.....

C30. In general, how often do you shop for food (excluding milk)? Please tick only **one** answer.

Every day	1 ☐
4 to 6 times a week	2 ☐
2 or 3 times a week	3 ☐
Once a week	4 ☐
Every 2 weeks	5 ☐
Once a month	6 ☐
Other, please specify	7 ☐

C31. Can you tell me who, in general, does most of the food shopping? Please specify.

.....

C32. Can I ask you why you shop where you do? Please tick one or more answers as appropriate.

SHOW CARD Y

- | | |
|---|-----------------------------|
| Cost/affordable prices | 1 ☐ |
| Convenience - the shops are close to your home,
close to your place of work etc. | 2 ☐ |
| Good quality of food | 3 ☐ |
| Special offers available | 4 ☐ |
| Information available in the shop e.g. leaflets on 'healthy' foods,
recipes. Please specify..... | 5 ☐ |
| Good range of healthy foods | 6 ☐ |
| Wide range of foods available | 7 ☐ |
| Shop is clean | 8 ☐ |
| Sell things other than food/can do all shopping in one place | 9 ☐ |
| Family and friends shop there | 10 ☐ |
| I've always done my shopping there | 11 ☐ |
| Transport available to get to those shops | 12 ☐ |
| Parking available near to shops | 13 ☐ |
| Other, please specify..... | 14 ☐ |
| | |
| | |

C33. Have you always shopped where you do now?

- | | | | |
|------------|----------------------------|--------------------------|------------|
| Yes | 1 ☐ | ☐ | C34 |
| No | 2 ☐ | ☐ | a) |

a) If not, is this because (please tick as many answers as appropriate)

SHOW CARD B1

- | | |
|---|----------------------------|
| Shop where you used to shop is no longer there | 1 ☐ |
| Shop where you used to shop has changed and you no longer like it | 2 ☐ |
| New shops built near to you | 3 ☐ |
| No longer stay near previous shops | 4 ☐ |
| No longer have transport to get to previous shops | 5 ☐ |

- Now have transport available so can go to different shops 6 ☐
- Want to try different foods so have changed shopping location 7 ☐
- Children make it difficult to get to previous shops 8 ☐
- Easier to go to new shops because you do not have to take children with you 9 ☐
- Other, please specify 10 ☐
-
-

C34. Can you tell me - are you satisfied with the range of foods available locally?

Yes 1 ☐ ☐ **C35**

No 2 ☐ ☐ **a)**

a) If you are not satisfied, can you tell me why this is?

.....

.....

C35. Can you tell me if you agree or disagree with the following statements:

SHOW CARD I

	Agree	Neither agree nor disagree	Disagree	Don't know
The shops that serve my local community				
....have a good supply of fresh fruit and vegetables	1 ☐	2 ☐	3 ☐	4 ☐
....have good quality fresh fruit and vegetables	1 ☐	2 ☐	3 ☐	4 ☐
.....sell dairy products that have a reduced fat content	1 ☐	2 ☐	3 ☐	4 ☐
.....only have pre-packaged frozen meats, not fresh meats	1 ☐	2 ☐	3 ☐	4 ☐
.....generally have fresh baked bread	1 ☐	2 ☐	3 ☐	4 ☐
.....have a good supply of pasta, noodles, rice, etc.	1 ☐	2 ☐	3 ☐	4 ☐
.....are generally more expensive than elsewhere	1 ☐	2 ☐	3 ☐	4 ☐
.....provide information on healthy eating	1 ☐	2 ☐	3 ☐	4 ☐

C36. Can you tell me how you travel to and from the place where you do most of your food shopping?
Please tick one or more answers as appropriate.

	To	From
Walk	1 ☐	1 ☐
Bicycle	2 ☐	2 ☐
Bus	3 ☐	3 ☐
Car	4 ☐	4 ☐
Taxi	5 ☐	5 ☐
Train/tube	6 ☐	6 ☐
Other, please specify	7 ☐	7 ☐
		

SMOKING

C37. Can you tell me if you or your partner smoke cigarettes at all?

	Female adult	Male adult		
Yes, occasionally	1 ☐	1 ☐	☐	(a)
Yes, regularly	2 ☐	2 ☐	☐	(a)
Used to but not now	3 ☐	3 ☐	☐	C38
No	4 ☐	4 ☐	☐	C38

Applies if female/male adult smokes

a) About how many cigarettes a day do you (does your partner) usually smoke?

	Female adult	Male adult
Less than 1	1 ☐	1 ☐
No. smoked each day	2	2
Don't know	3 ☐	3 ☐

EDUCATION

DNA, no female adult ☐

DNA, no male adult ☐

C38. Can you tell me how old you were (your partner was) when you (he/she) finished your (his/her) full-time continuous education?

	Female adult	Male adult
Not yet finished	1 ☐	1 ☐
14 or under	2 ☐	2 ☐
15	3 ☐	3 ☐
16	4 ☐	4 ☐
17	5 ☐	5 ☐
18	6 ☐	6 ☐
19 or over	7 ☐	7 ☐
No formal education	8 ☐	8 ☐
Don't know	9 ☐	9 ☐

C39. Can you please look at this card and tell me whether you (your partner) have (has) any of the qualifications listed?

Show Card J

	Female adult	Male adult
No formal qualifications	1 ☐	1 ☐
Standard Grade/'O' Grade/GCSE/CSE/GCE 'O' Level	2 ☐	2 ☐
'A' level/Scottish Higher/Scottish Certificate of Sixth Year Studies/City and Guilds Advanced/Final	3 ☐	3 ☐
University degree (or degree level qualifications)	4 ☐	4 ☐
Other further education	5 ☐	5 ☐
Other qualifications, please specify.....	6 ☐	6 ☐
.....		
Don't know	7 ☐	7 ☐

ADULT'S PLACE OF BIRTH

C40. In which country were you born?

- | | | |
|------------|---|--------------------------|
| Scotland | 1 | ☐ |
| England | 2 | ☐ |
| Wales | 3 | ☐ |
| N Ireland | 4 | ☐ |
| Outside UK | 5 | ☐ |

C41. Can you tell me to which group you belong?

SHOW CARD C1

- | | | |
|-----------------------------------|---|--------------------------|
| White | 1 | ☐ |
| Black - Caribbean | 2 | ☐ |
| Black - African | 3 | ☐ |
| Black - Other | 4 | ☐ |
| Indian | 5 | ☐ |
| Pakistani | 6 | ☐ |
| Bangladeshi | 7 | ☐ |
| Chinese | 8 | ☐ |
| None of these(include mixed race) | 9 | ☐ |
- ☐ **(a)**

(a) How would you describe the racial or ethnic group to which you belong?

.....

INCOME

C42. Can I just check any sources of income you or anyone else in your household may have?

SHOW CARD K

- | | |
|--|-----------------------------|
| Earnings from employment or self-employment | 1 ☐ |
| State retirement pension | 2 ☐ |
| Pension from former employer | 3 ☐ |
| Child Benefit | 4 ☐ |
| Job Seekers Allowance | 5 ☐ |
| Income Support | 6 ☐ |
| Family Credit | 7 ☐ |
| Housing Benefit | 8 ☐ |
| Other state benefits | 9 ☐ |
| Other kinds of regular allowance from outside your household
(e.g. maintenance, student grants, etc.) | 10 ☐ |
| No source of income | 11 ☐ |

C43. Could you please look at this card and tell me which group represents the gross income of the whole household?

Please include income from all sources before any compulsory deductions such as income tax, national insurance and superannuation contributions.

Show Card L	Group number	
Remind informant who is included in the household	Don't know	88
	Refused	99

Weight (kg) -

Height (cm) –

General Interview Questionnaire (2)

ID Code

Measurement time

Date of interview

Community centre

Control (C) or Intervention (I)

ID Code

Name:

Details of household members:

[illegible]

PRESENT ACCOMMODATION

C1. Can I ask if your accommodation changed since the last interview?

1 ☐ Yes ☐ a)

2 ☐ No ☐ **C8**

a) If yes, can you tell me what type of accommodation you have now?

SHOW CARD B

Whole house, bungalow

detached house 1 ☒ ☐ C2

semi-detached house 2   C2

terraced or end-terraced house 3 ☒ ☐ **C2**

Flat 4  C2

Bedsit 5 ☒ ☐ C2

Other, specify..... 6 ☐ ☐ **C2**

C2. Can you tell me which of the following applies to you?

SHOW CARD C

- | | | | |
|---|----------------------------|--------------------------|-----------|
| I/We own our own home | 1 ☐ | ☐ | C8 |
| I/We pay rent to a private landlord | 2 ☐ | ☐ | C8 |
| I/We pay rent to the council | 3 ☐ | ☐ | C8 |
| The council pays our rent for us | 4 ☐ | ☐ | C8 |
| I/We are living in a hotel/hostel/B&B paid for by the council | 5 ☐ | ☐ | C8 |
| I/We belong to a housing association | 6 ☐ | ☐ | C8 |
| Other, please specify..... | 7 ☐ | ☐ | C8 |

EMPLOYMENT

C8. Can I just ask if your or your partner's employment situation has changed since the last interview?

- | | | | |
|----------------------------|-----|--------------------------|------------|
| 1 ☐ | Yes | ☐ | a) |
| 2 ☐ | No | ☐ | C12 |

a) If yes, can you tell me if you or your partner have a job at the moment?

SHOW CARD E

- | | DNA, no female adult ☐ | DNA, no male adult ☐ | |
|------------------------------------|---|---|-------------------------------------|
| | Female adult | Male adult | |
| Unemployed | 1 ☐ | 1 ☐ | ☐ C12 |
| Employed full time | 2 ☐ | 2 ☐ | ☐ C9 |
| Employed part time | 3 ☐ | 3 ☐ | ☐ C9 |
| Self-employed | 4 ☐ | 4 ☐ | ☐ C9 |
| At school/college | 5 ☐ | 5 ☐ | ☐ C12 |
| Looking for work | 6 ☐ | 6 ☐ | ☐ C12 |
| Looking after the family at home | 7 ☐ | 7 ☐ | ☐ C12 |
| Not actively seeking work | 8 ☐ | 8 ☐ | ☐ C12 |
| Retired or on disability allowance | 9 ☐ | 9 ☐ | ☐ C12 |
| Other (please specify) | 10 ☐ | 10 ☐ | ☐ C12 |
| | | | |

C9. If employed, what is your/your partner's present job?

Female adult..... ☐ **C12**

Male adult..... ☐ **C12**

MEALS NOT PREPARED IN THE HOME

C12. Can you tell me what the children do for lunch?

DNA, no children ☐

SHOW CARD A1

	Pre-school children	School children	
Go to lunch at school/nursery/playgroup	1 ☐	1 ☐ ☐	a)
Take a packed lunch to school/nursery/playgroup	2 ☐	2 ☐ ☐	C13
Have lunch at home	3 ☐	3 ☐ ☐	C13
Have a takeaway	4 ☐	4 ☐ ☐	C13
Go to a café/restaurant	5 ☐	5 ☐ ☐	C13
Go to friend's/relatives' house	6 ☐	6 ☐ ☐	C13
Buy food from a shop	7 ☐	7 ☐ ☐	C13
Buy food from a mobile van	8 ☐	8 ☐ ☐	C13
Don't eat lunch	9 ☐	9 ☐ ☐	C13
Don't know	10 ☐	10 ☐ ☐	C13
Other, please specify	11 ☐	11 ☐ ☐	C13

a) If child/children go to school/nursery/playgroup lunches, what type of meal is provided?

Cafeteria system with meals and snacks available	1 ☐ ☐	b)
Choice of meal or snack (primary school)	2 ☐ ☐	b)
Meals only	3 ☐ ☐	b)
Snacks only	4 ☐ ☐	b)
Set meal	5 ☐ ☐	b)
No school meals provided	6 ☐ ☐	C13
Other, please specify	7 ☐ ☐	b)

b) Is a vegetarian choice available?

Yes 1 ☐

No 2 ☐

Don't know 3 ☐

C14. Can you tell me how often the family buy takeaway meals?

SHOW CARD F

	Children	Adults
Every day	1 ☐	1 ☐
4 to 6 times a week	2 ☐	2 ☐
2 or 3 times a week	3 ☐	3 ☐
Once a week	4 ☐	4 ☐
Every 2 weeks	5 ☐	5 ☐
Once a month	6 ☐	6 ☐
Less than once a month	7 ☐	7 ☐
Never	8 ☐	8 ☐

C16. Can you tell me if the family eat out at all, apart from school or work?

Yes 1 ☐

If yes, please go to **(a)**.

No 2 ☐

If no, please go to **C28**.

(a) Can you tell me how often you eat out? Please tick **only** one box.

DNA, no children ☐

SHOW CARD F

	Children	Adults
Every day	1 ☐	1 ☐
4 to 6 times a week	2 ☐	2 ☐
2 or 3 times a week	3 ☐	3 ☐
Once a week	4 ☐	4 ☐
Every 2 weeks	5 ☐	5 ☐
Once a month	6 ☐	6 ☐
Less than once a month	7 ☐	7 ☐
Never	8 ☐	8 ☐

FOOD CHOICE

C28. Can I ask you - what influences the choice of foods that you give your family? Please give as many answers as appropriate.

SHOW CARD H

- | | |
|---|----------------------------|
| Cost - foods I can afford | 1 ☐ |
| Health - try to provide healthy diet | 2 ☐ |
| Children's likes/dislikes | 3 ☐ |
| Spouse/partner's likes/dislikes | 4 ☐ |
| Taste - foods I like eating | 5 ☐ |
| Convenience - foods that are easy to prepare/cook | 6 ☐ |
| Habit - what we usually have to eat | 7 ☐ |
| Other, please specify | 8 ☐ |

INCOME

C47. Can I just check if your sources of income have changed since the last interview?

- | | | | |
|----------------------------|-----|--------------------------|------------|
| 1 ☐ | Yes | ☐ | a) |
| 2 ☐ | No | ☐ | C48 |

a) Can I just check any sources of income you or anyone else in your household may have?

SHOW CARD K

- | | |
|--|-----------------------------|
| Earnings from employment or self-employment | 1 ☐ |
| State retirement pension | 2 ☐ |
| Pension from former employer | 3 ☐ |
| Child Benefit | 4 ☐ |
| Job Seekers Allowance | 5 ☐ |
| Income Support | 6 ☐ |
| Family Credit | 7 ☐ |
| Housing Benefit | 8 ☐ |
| Other state benefits | 9 ☐ |
| Other kinds of regular allowance from outside your household
(e.g. maintenance, student grants, etc.) | 10 ☐ |
| No source of income | 11 ☐ |

C48. Can I just check if your income has changed since the last interview?

1 ☐ Yes ☐ **a)**

2 ☐ No

a) If yes, could you please look at this card and tell me which group represents the **gross** income of the whole household?

Please include income from all sources before any compulsory deductions such as income tax, national insurance and superannuation contributions.

Show Card L Group number

Remind informant Don't know 88

who is included
in the household Refused 99

C49. (Intervention only) Can I ask how many of the cookery sessions you have attended?

Weight (kg) -

General Interview Questionnaire (3)

ID Code

Measurement time

Date of interview

Community centre

Control (C) or intervention (I)

ID Code

Name:

Address:.....

.....

.....

.....

Postcode.....

Telephone no. (please include STD code).....

Details of household members:

[illegible]

PRESENT ACCOMMODATION

C1. Can I ask if your accommodation has changed since the last interview?

1 ☐ Yes $\Rightarrow$ **a)**

2 ☐ No $\Rightarrow$ **C4**

a) If yes, can you tell me what type of accommodation you have now ?

SHOW CARD B

Whole house, bungalow

detached house 1 ☐

semi-detached house 2 ☐

terraced or end-terraced house 3 ☐

Flat 4 ☐

Bedsit 5 ☐

Other, specify..... 6 ☐

C2. Can you tell me which of the following applies to you?

SHOW CARD C

- | | |
|---|----------------------------|
| I/We own our own home | 1 ☐ |
| I/We pay rent to a private landlord | 2 ☐ |
| I/We pay rent to the council | 3 ☐ |
| The council pays our rent for us | 4 ☐ |
| I/We are living in a hotel/hostel/B&B paid for by the council | 5 ☐ |
| I/We belong to a housing association | 6 ☐ |
| Other, please specify..... | 7 ☐ |

C4. Can you tell me where you ...and the children normally eat your meals ? Please tick **one** box for each.

SHOW CARD D

- | | Children | Adults |
|-------------------------------------|----------------------------|----------------------------|
| Living room, at a table | 1 ☐ | 1 ☐ |
| Living room, in front of the TV | 2 ☐ | 2 ☐ |
| Dining room, at a table | 3 ☐ | 3 ☐ |
| Kitchen | 4 ☐ | 4 ☐ |
| It depends | 5 ☐ | 5 ☐ |
| Never eat at home | 6 ☐ | 6 ☐ |
| None of these, please specify | 7 ☐ | 7 ☐ |
| | | |

EMPLOYMENT

C5. Can I ask if your or your partner's employment situation has changed since the last interview?

- | | | | |
|----------------------------|-----|---|-----------|
| 1 ☐ | Yes | ⇒ | a) |
| 2 ☐ | No | ⇒ | |

C9

a) If yes, can you tell me if you or your partner have a job at the moment?

SHOW CARD E

	DNA, no female adult ☐		DNA, no male adult ☐	
		Female adult		Male adult
Unemployed	1 ☐		1 ☐	⇒ C9
Employed full time	2 ☐		2 ☐	⇒ C6
Employed part time	3 ☐		3 ☐	⇒ C6
Self-employed	4 ☐		4 ☐	⇒ C6
At school/college	5 ☐		5 ☐	⇒ C9
Looking for work	6 ☐		6 ☐	⇒ C9
Looking after the family at home	7 ☐		7 ☐	⇒ C9
Not actively seeking work	8 ☐		8 ☐	⇒ C9
Retired or on disability allowance	9 ☐		9 ☐	⇒ C9
Other (please specify)	10 ☐		10 ☐	⇒ C9
				

C6. If employed, what is your/your partner's present job?

Female adult..... ⇒ **C9**

Male adult..... ⇒ **C9**

MEALS NOT PREPARED IN THE HOME

C9. Can you tell me what the children do for lunch?

DNA, no children ☐

SHOW CARD A1

	Pre-school Children	School children	
Go to lunch at school/nursery/playgroup	1 ☐	1 ☐	⇒ a)
Take a packed lunch to school/nursery/playgroup	2 ☐	2 ☐	⇒ C10
Have lunch at home	3 ☐	3 ☐	⇒

C10

Have a takeaway C10	4 ☐	4 ☐ ⇒
Go to a café/restaurant C10	5 ☐	5 ☐ ⇒
Go to friend's/relatives' house C10	6 ☐	6 ☐ ⇒
Buy food from a shop C10	7 ☐	7 ☐ ⇒
Buy food from a mobile van C10	8 ☐	8 ☐ ⇒
Don't eat lunch C10	9 ☐	9 ☐ ⇒
Don't know C10	10 ☐	10 ☐ ⇒
Other, please specify	11 ☐	11 ☐ ⇒

a) If child/children go to school/nursery/playgroup lunches, what type of meal is provided?

Cafeteria system with meals and snacks available	1 ☐ ⇒	b)
Choice of meal or snack (primary school)	2 ☐ ⇒	b)
Meals only	3 ☐ ⇒	b)
Snacks only	4 ☐ ⇒	b)
Set meal	5 ☐ ⇒	b)
No school meals provided	6 ☐ ⇒	C10
Other, please specify	7 ☐ ⇒	b)

b) Is a vegetarian choice available?

Yes	1 ☐	No	2 ☐	Don't know	3 ☐
------------	----------------------------	-----------	----------------------------	-------------------	----------------------------

C10. Can you tell me how often the family buy takeaway meals?

SHOW CARD F

	Children	Adults
Every day	1 ☐	1 ☐
4 to 6 times a week	2 ☐	2 ☐
2 or 3 times a week	3 ☐	3 ☐
Once a week	4 ☐	4 ☐

Every 2 weeks	5 ☐	5 ☐
Once a month	6 ☐	6 ☐
Less than once a month	7 ☐	7 ☐
Never	8 ☐	8 ☐

C11. Can you tell me what type of takeaway meals are the favourites of the child(ren) and the adult(s)?
Please tick more than one answer, if appropriate.

SHOW CARD W

	DNA, no children	☐
	Children	Adults
Fish and chip shop	1 ☐	1 ☐
Pizzas	2 ☐	2 ☐
Baked potatoes	3 ☐	3 ☐
Hamburgers	4 ☐	4 ☐
Chinese	5 ☐	5 ☐
Indian	6 ☐	6 ☐
Turkish	7 ☐	7 ☐
Other(s)	8 ☐	8 ☐

If the answer to **C11** is 'other(s)', please specify which type of takeaway meals are preferred by

Child(ren).....

Adult(s).....

C12. Can you tell me if the family eat out at all, apart from school or work?

Yes 1 ☐ If yes, please go to **(a)**.

No 2 ☐ If no, please go to **C14**.

(a) Can you tell me how often you eat out? Please tick **only** one box.

DNA, no children ☐

SHOW CARD F

	Children	Adults
Every day	1 ☐	1 ☐
4 to 6 times a week	2 ☐	2 ☐
2 or 3 times a week	3 ☐	3 ☐
Once a week	4 ☐	4 ☐

Every 2 weeks	5 ☐	5 ☐
Once a month	6 ☐	6 ☐
Less than once a month	7 ☐	7 ☐
Never	8 ☐	8 ☐

C13. If answer to **C12** is yes, where do you eat out?

SHOW CARD V

	Children	Adults
Fast food restaurant e.g. McDonald's, Burger King, Kentucky Fried Chicken	1 ☐	1 ☐
Pizza restaurant	2 ☐	2 ☐
Fish and chip restaurant	3 ☐	3 ☐
Hotel/bar e.g. 'pub' meal	4 ☐	4 ☐
Vegetarian restaurant	5 ☐	5 ☐
Steak house	6 ☐	6 ☐
Community café	7 ☐	7 ☐
Other(s), please specify.....	8 ☐	8 ☐

If the answer to **C13** is 'other(s)', please specify which type of takeaway meals are preferred by

Child(ren).....

Adult(s).....

FOOD INFORMATION

C14. Can you tell me if you enjoy cooking?

Yes	1 ☐	If yes, please go to C23
No	2 ☐	If no, please go to a)

a) If **not** can you tell me why this is?

.....

C23. Can I ask you - what influences the choice of foods that you give your family? Please give as many answers as appropriate.

SHOW CARD H

- | | |
|---|----------------------------|
| Cost - foods I can afford | 1 ☐ |
| Health - try to provide healthy diet | 2 ☐ |
| Children's likes/dislikes | 3 ☐ |
| Spouse/partner's likes/dislikes | 4 ☐ |
| Taste - foods I like eating | 5 ☐ |
| Convenience - foods that are easy to prepare/cook | 6 ☐ |
| Habit - what we usually have to eat | 7 ☐ |
| Other, please specify | 8 ☐ |

FAMILY MEALS

C24. Can you tell me if you usually have a meal or snack at home with all or most of the other people in your household?

DNA, lives alone ☐

- | | | | |
|------------|----------------------------|---|------------|
| Yes | 1 ☐ | ⇒ | C25 |
| No | 2 ☐ | ⇒ | C28 |
| Don't know | 3 ☐ | ⇒ | C28 |

C25. About how often would you say you do this?

- | | |
|--------------------------|----------------------------|
| Two or three times a day | 1 ☐ |
| Once a day | 2 ☐ |
| Every 2 to 3 days | 3 ☐ |
| Every 4 to 5 days | 4 ☐ |
| Once a week | 5 ☐ |
| Less than once a week | 6 ☐ |
| Don't know | 7 ☐ |

C26. Which **one** of these statements best describes mealtimes with other members of your household?

SHOW CARD X

- | | |
|---|----------------------------|
| I usually enjoy mealtimes | 1 ☐ |
| Sometimes I enjoy mealtimes, sometimes not | 2 ☐ |
| Mealtimes are not usually enjoyable | 3 ☐ |
| Mealtimes are too rushed to notice whether they're enjoyable or not | 4 ☐ |
| None of these | 5 ☐ |
| Don't know | 6 ☐ |

C27. Which meals or snacks, if any, do all members of your household eat together?

SHOW CARD Z

- | | |
|----------------------------|----------------------------|
| Breakfast | 1 ☐ |
| Midday meals | 2 ☐ |
| Weekday tea/evening meals | 3 ☐ |
| Saturday tea/evening meal | 4 ☐ |
| Sunday lunch | 5 ☐ |
| Sunday tea/evening meal | 6 ☐ |
| Other, please specify..... | 7 ☐ |

(If single parent ask if children are with other parent some or all weekends)

.....

FOOD SHOPPING

C28. Is there a car or a van **normally** available for use by you or any members of your household for shopping?

- | | |
|--|----------------------------|
| Yes, own car | 1 ☐ |
| Yes, use of car, e.g. works car/van, share car with someone else | 2 ☐ |
| No car | 3 ☐ |

C29. Can you tell me where you usually buy most of your food? Please tick only **one** answer.

	Fruit and vegetables	Bakery goods	Meat/ fish	Milk	Other foods eg tins, tea, flour
Supermarket, e.g. Asda, Tesco, Sainsbury	1 ☐	1 ☐	1 ☐	1 ☐	1 ☐
Local shops	2 ☐	2 ☐	2 ☐	2 ☐	2 ☐
Freezer store, e.g. Farmfoods, Iceland	3 ☐	3 ☐	3 ☐	3 ☐	3 ☐
Discount store, e.g. Lidl, Scotmid	4 ☐	4 ☐	4 ☐	4 ☐	4 ☐
Food hall in a department store, e.g. Marks and Spencer	5 ☐	5 ☐	5 ☐	5 ☐	5 ☐
Other, please specify.....	6 ☐	6 ☐	6 ☐	6 ☐	6 ☐

.....

C30. In general, how often do you shop for food (excluding milk)? Please tick only **one** answer.

Every day	1 ☐
4 to 6 times a week	2 ☐
2 or 3 times a week	3 ☐
Once a week	4 ☐
Every 2 weeks	5 ☐
Once a month	6 ☐
Other, please specify	7 ☐

C31. Can you tell me who, in general, does most of the food shopping? Please specify.

.....

C32. Can I ask you why you shop where you do? Please tick one or more answers as appropriate.

SHOW CARD Y

- | | |
|---|-----------------------------|
| Cost/affordable prices | 1 ☐ |
| Convenience - the shops are close to your home,
close to your place of work etc. | 2 ☐ |
| Good quality of food | 3 ☐ |
| Special offers available | 4 ☐ |
| Information available in the shop e.g. leaflets on 'healthy' foods,
recipes. Please specify..... | 5 ☐ |
| Good range of healthy foods | 6 ☐ |
| Wide range of foods available | 7 ☐ |
| Shop is clean | 8 ☐ |
| Sell things other than food/can do all shopping in one place | 9 ☐ |
| Family and friends shop there | 10 ☐ |
| I've always done my shopping there | 11 ☐ |
| Transport available to get to those shops | 12 ☐ |
| Parking available near to shops | 13 ☐ |
| Other, please specify..... | 14 ☐ |
| | |

C33. Have you always shopped where you do now?

- | | | | |
|------------|----------------------------|---|------------|
| Yes | 1 ☐ | ⇒ | C34 |
| No | 2 ☐ | ⇒ | a) |

a) If not, is this because (please tick as many answers as appropriate)

SHOW CARD B1

- | | |
|---|----------------------------|
| Shop where you used to shop is no longer there | 1 ☐ |
| Shop where you used to shop has changed and you no longer like it | 2 ☐ |
| New shops built near to you | 3 ☐ |
| No longer stay near previous shops | 4 ☐ |
| No longer have transport to get to previous shops | 5 ☐ |
| Now have transport available so can go to different shops | 6 ☐ |

- Want to try different foods so have changed shopping location 7 ☐
- Children make it difficult to get to previous shops 8 ☐
- Easier to go to new shops because you do not have to take children with you 9 ☐
- Other, please specify ? 10 ☐
-
-

C34. Can you tell me - are you satisfied with the range of foods available locally?

Yes 1 ☐ ⇒ **C35**

No 2 ☐ ⇒ **a)**

a) If you are not satisfied, can you tell me why this is?

.....

.....

C35. Can you tell me if you agree or disagree with the following statements:

SHOW CARD I

	Agree	Neither agree nor disagree	Disagree	Don't know
The shops that serve my local community				
....have a good supply of fresh fruit and vegetables	1 ☐	2 ☐	3 ☐	4 ☐
....have good quality fresh fruit and vegetables	1 ☐	2 ☐	3 ☐	4 ☐
.....sell dairy products that have a reduced fat content	1 ☐	2 ☐	3 ☐	4 ☐
.....only have pre-packaged frozen meats, not fresh meats	1 ☐	2 ☐	3 ☐	4 ☐
.....generally have fresh baked bread	1 ☐	2 ☐	3 ☐	4 ☐
.....have a good supply of pasta, noodles, rice, etc.	1 ☐	2 ☐	3 ☐	4 ☐
.....are generally more expensive than elsewhere	1 ☐	2 ☐	3 ☐	4 ☐
.....provide information on healthy eating	1 ☐	2 ☐	3 ☐	4 ☐

C36. Can you tell me how you travel to and from the place where you do most of your food shopping?
Please tick one or more answers as appropriate.

	To	From
Walk	1 ☐	1 ☐
Bicycle	2 ☐	2 ☐
Bus	3 ☐	3 ☐
Car	4 ☐	4 ☐
Taxi	5 ☐	5 ☐
Train/tube	6 ☐	6 ☐
Other, please specify	7 ☐	7 ☐
.....		

SMOKING

C37. Can you tell me if you or your partner smoke cigarettes at all?

	Female adult	Male adult		
Yes, occasionally	1 ☐	1 ☐	⇒	(a)
Yes, regularly	2 ☐	2 ☐	⇒	(a)
Used to but not now	3 ☐	3 ☐	⇒	C39
No	4 ☐	4 ☐	⇒	C39

Applies if female/male adult smokes

a) About how many cigarettes a day do you (does your partner) usually smoke?

	Female adult	Male adult
Less than 1	1 ☐	1 ☐
No. smoked each day	2	2
Don't know	3 ☐	3 ☐

EDUCATION

DNA, no female adult ☐

DNA, no male adult ☐

C39. Can you tell me if your or your partner's qualifications have changed since the last interview ?

Yes 1 ☐ ⇒ **a)**

No 2 ☐ ⇒ **C42**

a) Can you please look at this card and tell me what those qualifications are ?

Show Card J

	Female adult	Male adult
No formal qualifications	1 ☐	1 ☐
Standard Grade/'O' Grade/GCSE/CSE/GCE 'O' Level	2 ☐	2 ☐
'A' level/Scottish Higher/Scottish Certificate of Sixth Year Studies/City and Guilds Advanced/Final	3 ☐	3 ☐
University degree (or degree level qualifications)	4 ☐	4 ☐
Other further education	5 ☐	5 ☐
Other qualifications, please specify.....	6 ☐	6 ☐
.....		
Don't know	7 ☐	7 ☐

INCOME

C42. Can I just check any sources of income you or anyone else in your household may have?

SHOW CARD K

- | | |
|--|-----------------------------|
| Earnings from employment or self-employment | 1 ☐ |
| State retirement pension | 2 ☐ |
| Pension from former employer | 3 ☐ |
| Child Benefit | 4 ☐ |
| Job Seekers Allowance | 5 ☐ |
| Income Support | 6 ☐ |
| Family Credit | 7 ☐ |
| Housing Benefit | 8 ☐ |
| Other state benefits | 9 ☐ |
| Other kinds of regular allowance from outside your household
(e.g. maintenance, student grants, etc.) | 10 ☐ |
| No source of income | 11 ☐ |

C43. Could you please look at this card and tell me which group represents the **gross** income of the whole household?

Please include income from all sources before any compulsory deductions such as income tax, national insurance and superannuation contributions.

Show Card L	Group number	
Remind informant who is included in the household	Don't know	88
	Refused	99

Weight (kg) -

APPENDIX 7

Food and Cooking Skills Questionnaire

ID Code
Measurement time
Date of interview
Community centre
Control (C) or Intervention (I)

ID Code

Name:

ID Code

Measurement Time

Food and Cooking Questionnaire

We are interested in finding out how you feel about food and cooking and would be grateful if you could spend a few minutes of your time completing this questionnaire. If you do not understand the questions or would like someone else to fill in the answers, we would be happy to help.

FAMILY MEALS

Q1. Can you tell me how many of your main meals (that is lunch or evening meal) last week were eaten out, for example, in a café, fast food restaurant, pub, restaurant? Please enter number of meals.

.....

Q2. And how many of your main meals (lunch or evening meal) were takeaways? Please enter number of meals.

.....

Q3. And how many main meals (lunch or evening meal) did you prepare from basic ingredients last week? Please enter number of meals.

.....

Q4. And how many of your main meals (lunch or evening meal) were meals bought ready-prepared, for example, from a supermarket? Please enter number of meals.

.....

Q5. How often do you cook a meal (any meal, not just main meals)? Please tick only **one** box.

- | | |
|---|----------------------------|
| Every day | 1 ☐ |
| Most days (5 or 6 days a week) | 2 ☐ |
| Some days (3 or 4 days a week) | 3 ☐ |
| One or two days a week | 4 ☐ |
| Less than once a week | 5 ☐ |
| Only for celebrations/special occasions | 6 ☐ |
| Never | 7 ☐ |
| Don't know | 8 ☐ |

COOKING AND FOOD PREPARATION

Q6. Do you feel able to prepare the following foods for cooking or serving? (Please tick **one** box for each food)

	Yes	No	Don't know
Onions	1 ☐	2 ☐	3 ☐
Carrots	1 ☐	2 ☐	3 ☐
Cabbage	1 ☐	2 ☐	3 ☐
Broccoli	1 ☐	2 ☐	3 ☐
Potatoes	1 ☐	2 ☐	3 ☐
Salad	1 ☐	2 ☐	3 ☐
Fish	1 ☐	2 ☐	3 ☐

Q7. How confident do you feel about cooking the following the foods? (Please tick **one** box for each food)

(SHOW CARD N)

	Very confident	Quite confident	Not very confident	Not at all confident	Don't know
Onions	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
Carrots	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
Cabbage	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
Broccoli	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
Potatoes	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
Fish (fresh or frozen)	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
Rice	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
Pasta	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
White sauce	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐
Lentil soup	1 ☐	2 ☐	3 ☐	4 ☐	5 ☐

Q8. How long do you think each of the following foods would take to cook? (Please tick **one** box for each food)

	15 minutes or less	Over 15 minutes
Pasta (for example, macaroni)	1 ☐	2 ☐
Cabbage	1 ☐	2 ☐

Q9. How confident do you feel about following a recipe? (Please tick **one** box)

(SHOW CARD N)

Very confident	1 ☐
Quite confident	2 ☐
Not very confident	3 ☐
Not at all confident	4 ☐
Don't know	5 ☐

Q10. How often do you cook the main part of your meal from basic ingredients, for example, making Shepherd's Pie using fresh mince and potatoes? (Please tick **one box)**

(SHOW CARD O)

- | | |
|------------------|----------------------------|
| Every day | 1 ☐ |
| 4-6 times a week | 2 ☐ |
| 2-3 times a week | 3 ☐ |
| Once a week | 4 ☐ |
| Less often | 5 ☐ |
| Never | 6 ☐ |

Q11. How confident do you feel about being able to cook from basic ingredients as opposed to using convenience foods or ready-meals? (Please tick **one box)**

- | | |
|--------------------------------------|----------------------------|
| Very confident | 1 ☐ |
| Quite confident | 2 ☐ |
| Not very confident | 3 ☐ |
| Not at all confident | 4 ☐ |
| Never use convenience or ready-meals | 5 ☐ |
| Don't cook | 6 ☐ |
| Don't know | 7 ☐ |

Q12. Which, if any, of these cooking techniques do you feel confident about using? Please tick as many as you want.

(SHOW CARD P)

- | | Yes | No | Don't know |
|------------------------------|----------------------------|----------------------------|----------------------------|
| Boiling | 1 ☐ | 2 ☐ | 3 ☐ |
| Steaming | 1 ☐ | 2 ☐ | 3 ☐ |
| Shallow frying | 1 ☐ | 2 ☐ | 3 ☐ |
| Deep frying | 1 ☐ | 2 ☐ | 3 ☐ |
| Grilling | 1 ☐ | 2 ☐ | 3 ☐ |
| Poaching | 1 ☐ | 2 ☐ | 3 ☐ |
| Oven-baking or roasting | 1 ☐ | 2 ☐ | 3 ☐ |
| Stewing/braising/casseroling | 1 ☐ | 2 ☐ | 3 ☐ |

	Yes	No	Don't know
Microwaving	1 ☐	2 ☐	3 ☐
Stir frying	1 ☐	2 ☐	3 ☐
None of these	1 ☐	2 ☐	3 ☐
Don't know	1 ☐	2 ☐	3 ☐

Q13. Which, if any, of these foods do you feel confident about cooking? Please tick as many as you want.

(SHOW CARD Q)

	Yes	No	Don't know
Red meat (beef, lamb or pork)	1 ☐	2 ☐	3 ☐
Chicken	1 ☐	2 ☐	3 ☐
Bacon	1 ☐	2 ☐	3 ☐
White fish (such as cod, haddock, plaice)	1 ☐	2 ☐	3 ☐
Oily fish (such as herring, mackerel, salmon)	1 ☐	2 ☐	3 ☐
Eggs	1 ☐	2 ☐	3 ☐
Pulses (e.g. beans and lentils)	1 ☐	2 ☐	3 ☐
Pasta	1 ☐	2 ☐	3 ☐
Rice (not rice pudding)	1 ☐	2 ☐	3 ☐
Potatoes (not chips)	1 ☐	2 ☐	3 ☐
Fresh green vegetables (e.g. cabbage, broccoli, spinach)	1 ☐	2 ☐	3 ☐
Root vegetables (e.g. carrots, parsnips, turnip)	1 ☐	2 ☐	3 ☐
None of these	1 ☐	2 ☐	3 ☐
Don't know	1 ☐	2 ☐	3 ☐

Q14. Which of these vegetables do you usually add when cooking mince? Please tick as many answers as you want.

- | | |
|-------------|--------------------------|
| Onions | ☐ |
| Carrots | ☐ |
| Tomatoes | ☐ |
| Peppers | ☐ |
| Peas | ☐ |
| Mushrooms | ☐ |
| Courgettes | ☐ |
| Turnip | ☐ |
| Other | ☐ |

Q15. Can you tell me what kind of cooking you do at the moment? Tick as many as appropriate.

- | | |
|--|----------------------------|
| Cook dishes from basic ingredients | 1 ☐ |
| Assemble ready-made ingredients to make a complete meal
eg. ready made sauces and pasta to make lasagne | 2 ☐ |
| Cook convenience foods and ready meals | 3 ☐ |
| Other, please specify | 4 ☐ |
| Don't cook at all | 5 ☐ |

KITCHEN EQUIPMENT

Q16. Does your household have any of the following items?

- | | Yes | No |
|-------------------------|----------------------------|----------------------------|
| Cooker with 4 rings | 1 ☐ | 2 ☐ |
| Cooker with 2 rings | 1 ☐ | 2 ☐ |
| Oven | 1 ☐ | 2 ☐ |
| Grill | 1 ☐ | 2 ☐ |
| Refrigerator | 1 ☐ | 2 ☐ |
| Combined fridge-freezer | 1 ☐ | 2 ☐ |
| Separate freezer | 1 ☐ | 2 ☐ |
| Microwave oven | 1 ☐ | 2 ☐ |
| None of these | 1 ☐ | 2 ☐ |

a) Do all of those items work? If not, which items do not work?

Q17. And does your household have any of the following items?

Yes No

Electric frying pan	1 ☐	2 ☐
Food mixer	1 ☐	2 ☐
Food processor	1 ☐	2 ☐
Hand blender	1 ☐	2 ☐
Kettle	1 ☐	2 ☐
Electric steamer	1 ☐	2 ☐
Liquidiser	1 ☐	2 ☐
Chip pan or deep fat fryer	1 ☐	2 ☐
Slow cooker	1 ☐	2 ☐
Pressure cooker	1 ☐	2 ☐

a) Do all those items work? If not, which items do not work?

Q18. And can you tell me if you have any of the following kitchen equipment?

Yes No

Colander	1 ☐	2 ☐
Grater	1 ☐	2 ☐
Mixing bowls	1 ☐	2 ☐
Casserole dishes	1 ☐	2 ☐
Chopping board	1 ☐	2 ☐
Tin opener	1 ☐	2 ☐
Kitchen scales	1 ☐	2 ☐
Baking trays	1 ☐	2 ☐
Rotary whisk	1 ☐	2 ☐
Measuring spoons	1 ☐	2 ☐
Measuring jug	1 ☐	2 ☐
Sieve	1 ☐	2 ☐
Kitchen knives	1 ☐	2 ☐
Wok	1 ☐	2 ☐
Non-stick pans	1 ☐	2 ☐
Pans	1 ☐	2 ☐
Potato peeler	1 ☐	2 ☐
Wooden spoons	1 ☐	2 ☐

FOOD CHOICE

Q19. Which, if any, of the following factors do you think limits the choice of food that you buy?
Please tick the appropriate box.

	Yes	No	Don't know
a) Ability to store food	1 ☐	2 ☐	3 ☐
b) Limited cooking facilities	1 ☐	2 ☐	3 ☐
c) Don't know how to cook some foods	1 ☐	2 ☐	3 ☐
d) Ability to carry and transport foods	1 ☐	2 ☐	3 ☐
e) Food goes off before its eaten	1 ☐	2 ☐	3 ☐
f) Difficult to get to the shops with children	1 ☐	2 ☐	3 ☐
g) Difficult to get to the shops because of age/disability	1 ☐	2 ☐	3 ☐
h) Lack of stock in shops	1 ☐	2 ☐	3 ☐
i) Cost	1 ☐	2 ☐	3 ☐
j) Other, please write in.....	1 ☐	2 ☐	3 ☐
k) None of these	1 ☐	2 ☐	3 ☐
l) Don't know	1 ☐	2 ☐	3 ☐

Q20. Thinking about any food you have in the house today, which of the following items do you have? Please tick **one** box for each food.

	Have in house	Do not have in house
Breakfast cereal		
Bread or bread rolls		
Milk or powdered milk		
A tin of baked beans or spaghetti		
Eggs		
Pasta, any kind		
Potatoes		
Rice		
Lentils or dried beans		
Fruit, fresh or frozen		
Fruit, tinned		
Vegetables, fresh or frozen		
Vegetables, tinned		
Fish, fresh, frozen or canned		

Q21. When you go shopping how much influence do the following factors, if any, have on the foods which you buy?

(SHOW CARD R)

	Large influence	Some influence	No influence
a) Cost of foods/food budget	1 ☐	2 ☐	3 ☐
b) Do not eat certain foods because advised not to by health professional or other	1 ☐	2 ☐	3 ☐
c) Eat certain foods because advised to by health professional or other	1 ☐	2 ☐	3 ☐
d) Foods which spouse/partner will eat	1 ☐	2 ☐	3 ☐
e) Foods which child/children will eat	1 ☐	2 ☐	3 ☐
f) Want to provide a healthy diet	1 ☐	2 ☐	3 ☐
g) Foods which I like	1 ☐	2 ☐	3 ☐
h) Foods which are convenient/easy to cook or prepare	1 ☐	2 ☐	3 ☐
i) Whether or not spouse/partner is with me when I shop	1 ☐	2 ☐	3 ☐
k) Whether or not child/children is/are with me when I shop	1 ☐	2 ☐	3 ☐
l) Fresh and of good quality	1 ☐	2 ☐	3 ☐
m) Good value for money	1 ☐	2 ☐	3 ☐
n) Food packaging/food display in shop	1 ☐	2 ☐	3 ☐
o) Food advertising	1 ☐	2 ☐	3 ☐
p) Programmes or news items about food in the media (TV, radio, papers etc.)	1 ☐	2 ☐	3 ☐
q) Kind of foods my friends buy	1 ☐	2 ☐	3 ☐
r) Kinds of foods my relatives buy	1 ☐	2 ☐	3 ☐
s) Whether I'm hungry or not	1 ☐	2 ☐	3 ☐
t) Religious/cultural reasons	1 ☐	2 ☐	3 ☐
u) Vegetarian/vegan diet	1 ☐	2 ☐	3 ☐
v) Special diet e.g. slimming, diabetes	1 ☐	2 ☐	3 ☐
w) Other, please specify.....	1 ☐	2 ☐	3 ☐

Q22. Do you usually add salt to food during cooking? Please tick **one** box.

- | | | |
|----------------------------|---|--------------------------|
| Yes | 1 | ☐ |
| No | 2 | ☐ |
| Sometimes | 3 | ☐ |
| Other, please specify..... | 4 | ☐ |
| | | |

Q23. At the table, do you add salt to food:

- | | | |
|--------------|---|--------------------------|
| Usually | 1 | ☐ |
| Occasionally | 2 | ☐ |
| Rarely | 3 | ☐ |
| Never? | 4 | ☐ |

Q24. How often do you cook fresh or frozen fish (not tinned fish) at home? Please tick only **one** answer.

(SHOW CARD O)

- | | | | | |
|-----------------------------|---|--------------------------|---|------------|
| Every day | 1 | ☐ | ⇒ | Q26 |
| 4-6 times a week | 2 | ☐ | ⇒ | Q26 |
| 2-3 times a week | 3 | ☐ | ⇒ | Q26 |
| Once a week | 4 | ☐ | ⇒ | Q26 |
| Less often than once a week | 5 | ☐ | ⇒ | Q25 |
| Never | 6 | ☐ | ⇒ | Q25 |

Q25. If the answer to Q24 is 'less often' or 'never', is this because:

(SHOW CARD I)

- | | Yes | No | Don't know |
|--|----------------------------|----------------------------|----------------------------|
| a) Fish is not readily available locally | 1 ☐ | 2 ☐ | 3 ☐ |
| b) Do not know how to prepare or cook fish | 1 ☐ | 2 ☐ | 3 ☐ |
| c) Do not like the taste of fish | 1 ☐ | 2 ☐ | 3 ☐ |
| d) Partner/children do not like fish | 1 ☐ | 2 ☐ | 3 ☐ |
| e) Do not have the equipment to cook fish | 1 ☐ | 2 ☐ | 3 ☐ |
| f) Do not like handling fish | 1 ☐ | 2 ☐ | 3 ☐ |

	Yes	No	Don't know
g) Cost of fish	1 ☐	2 ☐	3 ☐
h) Do not like lingering smell in household	1 ☐	2 ☐	3 ☐
i) Do not like fish because of the bones	1 ☐	2 ☐	3 ☐
j) Vegetarian/vegan	1 ☐	2 ☐	3 ☐
k) Other, please write in	1 ☐	2 ☐	3 ☐
.....			

Q26. How often do you eat fruit? Please tick only **one** answer.

(SHOW CARD D1)

More than 6 times a day	1 ☐	☐	Q28
4-5 times a day	2 ☐	☐	Q28
2-3 times a day	3 ☐	☐	Q28
Once a day	4 ☐	☐	Q28
5-6 times a week	5 ☐	☐	Q28
2-4 times a week	6 ☐	☐	Q28
Once a week	7 ☐	☐	Q28
Less often than once a week	8 ☐	☐	Q27
Never	9 ☐	☐	Q27

Q27. If the answer to Q26 is 'less often than once a week' or 'never', is this because:

(SHOW CARD E1)

	Yes	No	Don't know
a) Fruit is not readily available locally	1 ☐	2 ☐	3 ☐
b) Do not know how to prepare fruit	1 ☐	2 ☐	3 ☐
c) Do not like the taste of fruit	1 ☐	2 ☐	3 ☐
d) Partner/children do not like fruit	1 ☐	2 ☐	3 ☐
e) Fruit is messy to eat	1 ☐	2 ☐	3 ☐
f) Do not like texture of fruit	1 ☐	2 ☐	3 ☐
g) Cost of fruit	1 ☐	2 ☐	3 ☐

	Yes	No	Don't know
h) Fruit does not fill you up	1 ☐	2 ☐	3 ☐
i) Fruit does not stay fresh for long so gets wasted	1 ☐	2 ☐	3 ☐
j) Too difficult to prepare some fruits for eating	1 ☐	2 ☐	3 ☐
k) Other, please write in	1 ☐	2 ☐	3 ☐
.....			

Q28. How often do you eat vegetables? Please tick only **one** answer.

(SHOW CARD D1)

More than 6 times a day	1 ☐	
4-5 times a day	2 ☐	
2-3 times a day	3 ☐	
Once a day	4 ☐	
5-6 times a week	5 ☐	
2-4 times a week	6 ☐	
Once a week	7 ☐	
Less often than once a week	8 ☐	⇒ Q29
Never	9 ☐	⇒ Q29

Q29. If the answer to Q28 is 'less often than once a week' or 'never', is this because:

(SHOW CARD FI)

	Yes	No	Don't know
a) Vegetables are not readily available locally	1 ☐	2 ☐	3 ☐
b) Do not know how to prepare or cook vegetables	1 ☐	2 ☐	3 ☐
c) Do not like the taste of vegetables	1 ☐	2 ☐	3 ☐
d) Partner/children do not like vegetables	1 ☐	2 ☐	3 ☐
e) Do not have the equipment to cook vegetables	1 ☐	2 ☐	3 ☐
f) Do not like preparing vegetables	1 ☐	2 ☐	3 ☐
g) Cost of vegetables	1 ☐	2 ☐	3 ☐
h) Do not like the smell of vegetables cooking	1 ☐	2 ☐	3 ☐
i) Too difficult to prepare vegetables	1 ☐	2 ☐	3 ☐

	Yes	No	Don't know
j) Vegetables do not keep fresh for long so get wasted	1 ☐	2 ☐	3 ☐
k) Do not have time to prepare vegetables	1 ☐	2 ☐	3 ☐
l) Other, please write in	1 ☐	2 ☐	3 ☐
.....			

Thank you for your help in answering this questionnaire.

APPENDIX 8

Food Frequency Questionnaire

ID Code

Measurement time

Date of interview

Community centre

Control (C) or Intervention (I)

ID Code

Name:

Food Frequency Questionnaire

F1. We would now like to ask you about some foods you may eat. Can you tell us how often you have eaten these foods in the PAST WEEK? (Please tick **one** box for each food)

(SHOW CARD M)

	Never	Once	2 to 4 times	5 to 6 times	Once a day	2 to 3 times per day	4 to 5 times per day	6 or more times per day
Breakfast cereals	1	2	3	4	5	6	7	8

	Never	Once	2 to 4 times	5 to 6 times	Once a day	2 to 3 times per day	4 to 5 times per day	6 or more times per day
Breakfast cereals	1	2	3	4	5	6	7	8
Bread or rolls	1	2	3	4	5	6	7	8
Cakes, sweet pies or sweet pastries	1	2	3	4	5	6	7	8
Biscuits	1	2	3	4	5	6	7	8
Chocolate confectionery	1	2	3	4	5	6	7	8
Other sweets	1	2	3	4	5	6	7	8
Ice cream or ice lollies	1	2	3	4	5	6	7	8
Yoghurt or fromage frais	1	2	3	4	5	6	7	8
Crisps or savoury snacks	1	2	3	4	5	6	7	8
Full fat cheese or cheese spread, eg cheddar	1	2	3	4	5	6	7	8
Reduced fat cheese or cheese spread, eg cottage cheese, Edam	1	2	3	4	5	6	7	8
Milk, full cream	1	2	3	4	5	6	7	8
Milk, semi-skimmed	1	2	3	4	5	6	7	8
Milk, skimmed	1	2	3	4	5	6	7	8
Eggs (including in home cooking)	1	2	3	4	5	6	7	8
Soup, canned	1	2	3	4	5	6	7	8
Soup, home-made	1	2	3	4	5	6	7	8
Fruit drinks - diluting or in cartons (not fruit juice)	1	2	3	4	5	6	7	8
Fizzy drinks (not mineral water), any	1	2	3	4	5	6	7	8
Fruit juice (not squash)	1	2	3	4	5	6	7	8
White fish or shellfish, including fish fingers	1	2	3	4	5	6	7	8
Oily fish, fresh or frozen, e.g. mackerel, herring, salmon, kippers	1	2	3	4	5	6	7	8

	Never	Once	2 to 4 times	5 to 6 times	Once a day	2 to 3 times per day	4 to 5 times per day	6 or more times per day
Oily fish, tinned, e.g. mackerel, herring, salmon, kippers	1	2	3	4	5	6	7	8
Tuna, tinned	1	2	3	4	5	6	7	8
Sausages (British type), burgers, hot dog sausages	1	2	3	4	5	6	7	8
Meat pies, bridies	1	2	3	4	5	6	7	8
Meat or poultry, stir-fried	1	2	3	4	5	6	7	8
Liver - not products	1	2	3	4	5	6	7	8
Beef eg. as a roast, steak	1	2	3	4	5	6	7	8
Beef as stew	1	2	3	4	5	6	7	8
Beef as mince	1	2	3	4	5	6	7	8
Lamb, eg as a roast, or chops, in stews etc	1	2	3	4	5	6	7	8
Pork, eg as a roast or chops, in stews etc	1	2	3	4	5	6	7	8
Chicken and poultry, eg as a roast, in casseroles	1	2	3	4	5	6	7	8
Chicken products eg nuggets, burgers	1	2	3	4	5	6	7	8
Chips	1	2	3	4	5	6	7	8
Roast or fried potatoes	1	2	3	4	5	6	7	8
Baked potatoes	1	2	3	4	5	6	7	8
Boiled potatoes	1	2	3	4	5	6	7	8
Rice or rice dishes	1	2	3	4	5	6	7	8
Pasta or pasta dishes	1	2	3	4	5	6	7	8
Pizza	1	2	3	4	5	6	7	8
Fresh or frozen vegetables	1	2	3	4	5	6	7	8
Fresh fruit (any)	1	2	3	4	5	6	7	8

F2. And how often, on average, have you eaten each of these foods in the PAST WEEK?

	Never	Once	2 to 4 times	5 to 6 times	Once a day	2 to 3 times per day	4 to 5 times per day	6 or more times per day
Carrots, raw	1	2	3	4	5	6	7	8
Carrots, cooked, fresh or frozen	1	2	3	4	5	6	7	8
Carrots, tinned	1	2	3	4	5	6	7	8
Other root vegetables (not carrots or potatoes), eg turnips, parsnips	1	2	3	4	5	6	7	8
Mushrooms, fresh or frozen	1	2	3	4	5	6	7	8

	Never	Once	2 to 4 times	5 to 6 times	Once a day	2 to 3 times per day	4 to 5 times per day	6 or more times per day
Mushrooms, canned	1	2	3	4	5	6	7	8
Peas, fresh or frozen	1	2	3	4	5	6	7	8
Peas, tinned	1	2	3	4	5	6	7	8
Onions	1	2	3	4	5	6	7	8
Leafy green vegetables eg spring greens, sprouts, broccoli, cabbage, cauliflower, green beans	1	2	3	4	5	6	7	8
Sweetcorn, any	1	2	3	4	5	6	7	8
Baked beans, canned	1	2	3	4	5	6	7	8
Tomatoes, canned	1	2	3	4	5	6	7	8
Other vegetables	1	2	3	4	5	6	7	8
Vegetables in soup	1	2	3	4	5	6	7	8
Fresh tomatoes	1	2	3	4	5	6	7	8
Cucumber	1	2	3	4	5	6	7	8
Lettuce	1	2	3	4	5	6	7	8
Other salad vegetables	1	2	3	4	5	6	7	8
Beans or pulses such as kidney beans, lentils, dried peas, butter beans	1	2	3	4	5	6	7	8
Apples (fresh)	1	2	3	4	5	6	7	8
Pears (fresh)	1	2	3	4	5	6	7	8
Bananas	1	2	3	4	5	6	7	8
Citrus fruits (fresh), for example, oranges, tangerines, satsumas, mandarins, grapefruit	1	2	3	4	5	6	7	8
Soft fruits (fresh) e.g. peaches, nectarines, grapes, plums	1	2	3	4	5	6	7	8
Summer soft fruits (fresh or frozen) e.g.strawberries, raspberries	1	2	3	4	5	6	7	8
Other fruits (fresh or frozen) e.g.kiwi fruit, pineapple, melon	1	2	3	4	5	6	7	8

FOOD CHOICE

F2. Looking at this list, are there any types of food which you never or rarely eat for any reason? Please tick the appropriate box.

(SHOW CARD U)

If you never or rarely eat a certain food, please tick a box opposite that food to show why you rarely or never eat it. See example below.

Example

	Never or rarely eat	Don't like the taste	Price	Inconvenient or difficult to prepare	Can't buy it in shops	Bad for you	Makes you fat	Religious or cultural reason/ vegetarian	Other	Don't know
Biscuits										
Cakes										

	Never or rarely eat	Don't like the taste	Price	Inconvenient or difficult to prepare	Can't buy it in shops	Bad for you	Makes you fat	Religious or cultural reason/ vegetarian	Other, please write in	Don't know
Red meat (not sausages or burgers)										
Chicken										
Fish (not fried)										
Pulses e.g. beans and lentils										
Pasta/ noodles/ rice										
Potatoes (not chips)										
Bread or rolls										
Vegetables or salads										
Fruit										
Skimmed/ semi-skimmed milk										
Sunflower/ polyunsat margarine										
Low-fat spreads										
Eggs										
Cheese										
None of these										
Don't know										

Appendix 9

ID Code

Measurement Time

CookWell Project

Food Diary



In confidence

All information in this diary will be treated in the strictest confidence. If you have any questions about what you have to do, please do not hesitate to contact Pat at the telephone number below.

Telephone No: 01382 496446

-✂-----

ID Code

Name

Please use this notebook to write down any food or drink both you and other members of the family consume.

Write down:

- the **day** and **date** on each page you use
- the **time** the food or drink was consumed
- the **place** where the food or drink was consumed
- the **amount** of food or drink consumed
- **who** consumed the food or drink

Thank you for taking time to record what you ate or drank.

Weight (kg) -

Height (cm) -

Recipes

Food Diary

Please write down details of all members of your family in the table below.

[illegible]

Food Diary

Please use this **diary** to write down any **food** or **drink** that both **you** and **other members of your family** consume.

Write down:

- the **day** and **date** on each page you use
- the **time** the food or drink was consumed
- the **place** where the food or drink was consumed
- the **amount** of food or drink consumed by **each person** in the family

We would also appreciate it if you could **write down**:

- the **method** of cooking e.g. frying, grilling, baking
- the **brand names** of foods e.g. Tesco, McVities, Bird's Eye
- the **weight** of ready-prepared meals
- any **recipes** you use (write down in blank pages at back of diary)

Note:

The **red** notebook may be used by children to **write down** or **draw** foods eaten away from home. Please copy these foods into this diary each day.

Please **describe** the foods eaten as clearly as possible. For example, a cheese sandwich is really 3 foods.

When **describing foods** please give as much detail as possible:

- type of **bread** or **rolls** e.g white, wholemeal, granary, mighty white
- type of **spread** e.g butter, sunflower spread, low-fat spread or give brand names e.g. Flora light, Tesco sunflower spread, Stork soft margarine
- type of **milk** e.g. full fat, semi-skimmed, skimmed, evaporated, dried
- type of **juice** e.g. diluted blackcurrant, pure orange juice, orange squash, lemonade, Irn Bru

Details of tea and coffee drinking

Please fill in this table with details of the **type** and **amount** of **milk** and **sugar** taken in **tea** or **coffee** for all members of the household who drink tea or coffee. See example shown on the first line of the table.

FC = full cream milk

SSM = semi-skimmed milk

SKM = skimmed milk

Name	Tea			Coffee		
	Milk		Sugar	Milk		Sugar
	Type	Amount	Amount	Type	Amount	Amount

Thank you for taking time to record what you ate or drank.

Sample page

Please start a NEW PAGE FOR EACH DAY even if only some of the page is used. Use as many pages as you need for each day.

[illegible][illegible]

Please start a NEW PAGE FOR EACH DAY even if only some of the page is used. Use as many pages as you need for each day.

[illegible]

Sample Page

[illegible]

Sample Page (continued)

Please start a NEW PAGE FOR EACH DAY even if only some of the page is used. Use as many pages as you need for each day.

[illegible][illegible]

[illegible]

Sample Page (continued)

[illegible]

Please start a NEW PAGE FOR EACH DAY even if only some of the page is used. Use as many pages as you need for each day.

[illegible][illegible]

Please start a NEW PAGE FOR EACH DAY even if only some of the page is used. Use as many pages as you need for each day.

[illegible]

ID Code

Day Date

Amount eaten by each family member

[illegible]

Please start a NEW PAGE FOR EACH DAY even if only some of the page is used. Use as many pages as you need for each day.

[illegible][illegible]

Please start a NEW PAGE FOR EACH DAY even if only some of the page is used. Use as many pages as you need for each day.

[illegible][illegible]

Please start a NEW PAGE FOR EACH DAY even if only some of the page is used. Use as many pages as you need for each day.

[illegible][illegible]

ID Code

Measurement Time

CookWell Project

Diary of Spending

In confidence

All information in this diary will be treated in the strictest confidence. Please do not put your name or address on it.

If you have any questions about this diary, please do not hesitate to contact Pat at the telephone number below.

Telephone No: 01382 348093

How to complete your diary

Write down all the food that you pay for during the same 7 days as you keep your food diary whether you pay by:

cash	credit card	cheque	postal order
debit card	voucher	shop or store card	

- ◆ If you ask someone else to buy things for you but you pay for them, include those purchases in your diary.
- ◆ Write in all items which you have bought as soon as possible to make sure you do not forget anything.
- ◆ Enter each item and its cost, however small, on a separate line.
- ◆ Enter the weight or volume of all food and drink brought home.
- ◆ If the weight is not on the item's packaging or on the till receipt, please weigh it yourself or keep the packaging to give to the interviewer.
- ◆ The interviewer will help you record any items that you are not sure about.

Things you need to know

- ◆ Vouchers or coupons
 - If you use a voucher or coupon to save money on your shopping bill, please mark which item it covered either on the till receipt or the diary page and also write down the value of the coupon/voucher (e.g. 10p off Fairy Liquid).

Please attach till receipts where possible

- ◆ Till receipts
 - Attaching a till receipt is usually the best way for you to record the items you have bought. It saves you from writing out all the information we need. Please look at the example till receipt on the opposite page.
 - But, sometimes till receipts can be difficult to understand.
 - Some of the common problems with till receipts are shown on the opposite page along with what you can do to help us to get the best information possible.

Sample till receipt

is
or not.
What if the till
receipt is too
faint? Then
please write
items by
hand.

State whether
soft drinks are
fizzy or still,
low-calorie or
not and
concentrated
or not.

If you buy MILK
please make
sure it is clear
what kind it is
e.g. whole milk,
semi-skimmed,
UHT etc.

It may not be
clear what
some
abbreviations
mean. Please
write in full
what the item
is.

FATS - butter,
oils, margarine
etc. - please
give a brand
name and full
description.
For butter, give
country of
origin.

If you buy BREAD
please make sure
it is clear what
kind it is e.g.
wholemeal, white
etc. and if it
sliced

Brown's Food Store	
Edenhead	
	£
St. Ivel Gold Light (<i>low fat spread 500g</i>)	0.84
Chk brst x 4 (<i>chicken - uncooked 0.5kg</i>)	3.59
S/W Med 800g (<i>sliced white bread</i>)	0.39
Ribena (<i>carbonated, not low calorie 330ml</i>)	0.48
Vita pint (<i>pasteurised semi-skimmed milk 1 pint</i>)	0.38
Weetabix 12's	0.68
Monster Munch (<i>28g crisps</i>)	0.28
Diet Yogh 4 pck (<i>125g low fat yoghurt</i>)	1.05
Libby's pch (<i>411g tinned peaches in syrup</i>)	0.42
Toilet Tsue 4 pck	1.65
Kerrygold btr (<i>250g butter, fresh</i>)	0.89
Small chicken	
1 kg @ 2.98/kg (<i>frozen</i>)	2.98
Carrots	
0.5kg @ 0.30/kg (<i>fresh</i>)	0.15
Lemons 1 @ 0.19 each (<i>fresh 178g</i>)	0.19
6 eggs	0.30
Foster's 4 pack (<i>lager 4 x 500ml</i>)	3.92
SUBTOTAL	18.19
Voucher 25p (<i>diet yoghurt</i>)	-0.25
TOTAL	17.94

Please make sure the till
receipt records the weight or
volume of any food or drink
brought home. If not, write the
weight/volume down.

If you do not have a till receipt, please write the details in yourself.

Sample page

DAY 1 Mon Tues Wed Thur Fri Sat Sun

1	Food and drink brought home MAKE SURE that all items and amounts are listed individually in the diary DO NOT just enter totals for whole amount spent	Name of shop where bought	Weight/ volume e.g. oz, lbs, kilos, pints, litres	Amount paid	
				£	p
	Brown's Food Store				
	Edenhead				
		£			
	St. Ivel Gold Light (<i>low fat spread 500g</i>)	0.84			
	Chk brst x 4 (<i>chicken - uncooked 0.5kg</i>)	3.59			
	S/W Med 800g (<i>sliced white bread</i>)	0.48			
	Ribena (<i>carbonated, not low calorie 330ml</i>)	0.48			
	Vita pint (<i>pasteurised semi-skimmed milk 1 pint</i>)	0.38			
	Weetabix 12's	0.68			
	Monster Munch(<i>28g crisps</i>)	0.28			
	Diet Yogh 4 pck (<i>125g low fat yoghurt</i>)	1.05			
	Libby's pch (<i>411g tinned peaches in syrup</i>)	0.42			
	Toilet Tsue 4 pck	1.65			
	Kerrygold btr (<i>250g butter, fresh</i>)	0.89			
	Small chicken				
	1.kg @ 2.98kg (<i>frozen</i>)	2.98			
	Carrots				
	0.5kg @ 0.30/kg (<i>fresh</i>)	0.15			
	Lemons 1 @ 0.19 each (<i>fresh 178g</i>)	0.19			
	6 eggs	0.30			
	Foster's 4 pack (<i>lager 4 x 500ml</i>)	3.92			
	SUBTOTAL	18.19			
	Voucher 25p (<i>diet yoghurt</i>)	-0.25			
	TOTAL	17.94			
	<i>New potatoes - fresh</i>	<i>Corner shop</i>	<i>1 lb</i>		<i>30</i>
	<i>Juice - pure unsweetened orange</i>	<i>Corner shop</i>	<i>1 litre</i>		<i>1.20</i>

Sample page

Day 1 continued

Date

2	Takeaway meals and snacks EATEN AT HOME	Please tick		Weight/ volume e.g. oz, lbs, kilos, pints, litres	Amount paid	
		hot	cold		£	p
	DO include meals delivered to home e.g. pizza					
	<i>Fish in batter</i>	√		7 oz	1	25
	<i>Chips</i>	√		6 oz		70
	<i>Chicken chowmein</i>	√		10 oz	2	95
	<i>Fried rice</i>	√		6 oz	1	45

3	Meals, snacks and drinks EATEN AWAY FROM HOME	please tick			Consumed on or off premises? please tick		Please tick		Amount paid	
		Bought for			on	off	hot	cold	£	p
	3A. Bought at: cafe, restaurant, pub etc.	self	someone else	you by someone else						
	<i>Lasagne, green salad, garlic bread</i>			√	√		√		8	95
	<i>2 glasses lager</i>	√			√			√	4	00
	3B. Bought at: shop or other outlet									
	<i>Danish pastry</i>	√						√	1	50
	<i>Coffee</i>	√					√		1	20
	<i>Coffee</i>		√				√		1	20
	3C. Bought at workplace, school etc.									
	<i>Bacon, egg, chips</i>	√							3	50
	<i>Cup of tea</i>	√								40
	<i>Apple crumble and custard</i>	√							1	25

Day 1 continued

Date

2	Takeaway meals and snacks EATEN AT HOME DO include meals delivered to home e.g. pizza	Please tick		Weight/ volume e.g. oz, lbs, kilos, pints, litres	Amount paid	
		hot	cold		£	p

3	Meals, snacks and drinks EATEN AWAY FROM HOME	<i>please tick</i>			Consumed on or off premises? <i>please tick</i>		Please tick		Amount paid	
		Bought for			on	off	hot	cold	£	p
		self	someone else	you by someone else						
	3A. Bought at: cafe, restaurant, pub etc.									
	3B. Bought at: shop or other outlet									
	3C. Bought at workplace, school etc.									

DAY 2 Mon Tues Wed Thur Fri Sat Sun

DAY 2 Mon Tues Wed Thur Fri Sat Sun

DAY 2 Mon Tues Wed Thur Fri Sat Sun

DAY 2 Mon Tues Wed Thur Fri Sat Sun

DAY 2 Mon Tues Wed Thur Fri Sat Sun

DAY 2 Mon Tues Wed Thur Fri Sat Sun

DAY 2 Mon Tues Wed Thur Fri Sat Sun

DAY 2 Mon Tues Wed Thur Fri Sat Sun

[illegible]

Date

2	Takeaway meals and snacks EATEN AT HOME DO include meals delivered to home e.g. pizza	Please tick		Weight/ volume e.g. oz, lbs, kilos, pints, litres	Amount paid	
		hot	cold		£	p

3	Meals, snacks and drinks EATEN AWAY FROM HOME	please tick			Consumed on or off premises? please tick		Please tick		Amount paid	
		Bought for			on	off	hot	cold	£	p
		self	someone else	you by someone else						
	3A. Bought at: cafe, restaurant, pub etc.									
	3B. Bought at: shop or other outlet									
	3C. Bought at workplace, school etc.									

Date

2	Takeaway meals and snacks EATEN AT HOME DO include meals delivered to home e.g. pizza	Please tick		Weight/ volume e.g. oz, lbs, kilos, pints, litres	Amount paid	
		hot	cold		£	p

3	Meals, snacks and drinks EATEN AWAY FROM HOME	please tick			Consumed on or off premises? please tick		Please tick		Amount paid	
		Bought for			on	off	hot	cold	£	p
		self	someone else	you by someone else						
	3A. Bought at: cafe, restaurant, pub etc.									
	3B. Bought at: shop or other outlet									
	3C. Bought at workplace, school etc.									

DAY 4 Mon Tues Wed Thur Fri Sat Sun

DAY 4 **Mon** **Tues** **Wed** **Thur** **Fri** **Sat** **Sun**

DAY 4 Mon Tues Wed Thur Fri Sat Sun

DAY 4 Mon Tues Wed Thur Fri Sat Sun

DAY 4 Mon Tues Wed Thur Fri Sat Sun

DAY 4 **Mon** **Tues** **Wed** **Thur** **Fri** **Sat** **Sun**

DAY 4 Mon Tues Wed Thur Fri Sat Sun

DAY 4 Mon Tues Wed Thur Fri Sat Sun

[illegible]

Date

2	Takeaway meals and snacks EATEN AT HOME DO include meals delivered to home e.g. pizza	Please tick		Weight/ volume e.g. oz, lbs, kilos, pints, litres	Amount paid	
		hot	cold		£	p

3	Meals, snacks and drinks EATEN AWAY FROM HOME	<i>please tick</i> Bought for			Consumed on or off premises? <i>please tick</i>		Please tick		Amount paid	
		self	someone else	you by someone else	on	off	hot	cold	£	p
	3A. Bought at: cafe, restaurant, pub etc.									
	3B. Bought at: shop or other outlet									
	3C. Bought at workplace, school etc.									

DAY 5 Mon Tues Wed Thur Fri Sat Sun

DAY 5 Mon Tues Wed Thur Fri Sat Sun

DAY 5 Mon Tues Wed Thur Fri Sat Sun

DAY 5 Mon Tues Wed Thur Fri Sat Sun

DAY 5 Mon Tues Wed Thur Fri Sat Sun

DAY 5 Mon Tues Wed Thur Fri Sat Sun

DAY 5 Mon Tues Wed Thur Fri Sat Sun

DAY 5 Mon Tues Wed Thur Fri Sat Sun

[illegible]

Date

2	Takeaway meals and snacks EATEN AT HOME DO include meals delivered to home e.g. pizza	Please tick		Weight/ volume e.g. oz, lbs, kilos, pints, litres	Amount paid	
		hot	cold		£	p

3	Meals, snacks and drinks EATEN AWAY FROM HOME	please tick			Consumed on or off premises?		Please tick		Amount paid	
		Bought for			please tick					
		self	someone else	you by someone else	on	off	hot	cold	£	p
	3A. Bought at: cafe, restaurant, pub etc.									
	3B. Bought at: shop or other outlet									
	3C. Bought at workplace, school etc.									

[illegible]

Date

2	Takeaway meals and snacks EATEN AT HOME	Please tick		Weight/ volume e.g. oz, lbs, kilos, pints, litres	Amount paid	
		hot	cold		£	p
	DO include meals delivered to home e.g. pizza					

3	Meals, snacks and drinks EATEN AWAY FROM HOME	<i>please tick</i>			Consumed on or off premises? <i>please tick</i>		Please tick		Amount paid	
		Bought for			on	off	hot	cold	£	p
		self	someone else	you by someone else						
	3A. Bought at: cafe, restaurant, pub etc.									
	3B. Bought at: shop or other outlet									
	3C. Bought at workplace, school etc.									

Date

2	Takeaway meals and snacks EATEN AT HOME	Please tick		Weight/ volume e.g. oz, lbs, kilos, pints, litres	Amount paid	
		hot	cold		£	p
	DO include meals delivered to home e.g. pizza					

3	Meals, snacks and drinks EATEN AWAY FROM HOME	<i>please tick</i>			Consumed on or off premises? <i>please tick</i>		Please tick		Amount paid	
		Bought for			on	off	hot	cold	£	p
		self	someone else	you by someone else						
	3A. Bought at: cafe, restaurant, pub etc.									
	3B. Bought at: shop or other outlet									
	3C. Bought at workplace, school etc.									

1. Were there any special circumstances, such as visitors staying with you or temporary absences of members of your household during the past two weeks? Please tick.

No ☐

Yes ☐ If yes, please make a note below about these circumstances.

2. Did you eat any foods this week that were given to you by someone else and not bought by someone in your household? For example, a pot of soup made by your mother. Please tick.

No ☐

Yes ☐ If yes, please make a note below about this food/these foods.

3. Did you buy any foods this week that were split between you and someone else or other people? For example, a large pack of Coca Cola, a large bag of lentils. Please tick.

No ☐

Yes ☐ If yes, please make a note below about this food/these foods.

4. Was all the food that you bought this week eaten this week or was some kept for eating later? For example, food was bought and put in the freezer. Please tick.

No ☐

Yes ☐ If yes, please make a note below about this food/these foods.

Appendix 11.

Timetable for locations

Week beginning

October	2	Greenock 1			
	9	Greenock 2			
	16	Greenock3	Alloa 1	Tullibody 1	
	23	Greenock4	Alloa 2	Tullibody 2	
	30	Greenock 5	Alloa 3	Tullibody 3	
November	6	Greenock 6	Alloa 4	Tullibody 4	
	13	Greenock 7	Alloa 5	Tullibody 5	
	20	Greenock 8	Alloa 6	Tullibody 6	
	27	Greenock 9	Alloa 7	Tullibody 7	
December	4	Greenock 10	Alloa 8	Tullibody 8	
	11		Alloa 9	Tullibody 9	
	18		Alloa 10	Tullibody 10	
	25				
January	8	Kirkcaldy 1			
	15	Kirkcaldy 2	Ardler 1		
	22	Kirkcaldy 3	Ardler 2		
	29	Kirkcaldy 4	Ardler 3		
February	5	Kirkcaldy 5	Ardler 4		
	12	Kirkcaldy 6	Ardler 5		
	19	Kirkcaldy 7	Ardler 6		
	26	Kirkcaldy 8	Ardler 7		
March	5	Kirkcaldy 9	Ardler 8		
	12	Kirkcaldy 10	Ardler 9		
	19		Ardler 10		
	26				
April	2			Addiewell 1	
	9		Edinburgh 1	Addiewell 2	
	16	Hawick 1	Edinburgh 2	Addiewell 3	
	23	Hawick 2	Edinburgh 3	Addiewell 4	Ferguslie 1
	30	Hawick 3	Edinburgh 4	Addiewell 5	Ferguslie 2
May	7		Edinburgh 5	Addiewell 6	Ferguslie 3
	14	Hawick 4		Addiewell 7	Ferguslie 4
	21	Hawick 5		Addiewell 8	Ferguslie 5
	28	Hawick 6	Edinburgh 6	Addiewell 9	Ferguslie 6
June	4	Hawick 7	Edinburgh 7	Addiewell 10	Ferguslie 7
	11	Hawick 8	Edinburgh 8		Ferguslie 8
	18	Hawick 9	Edinburgh 9		Ferguslie 9
	25	Hawick 10	Edinburgh 10		Ferguslie 10

Appendix 12

Questions for informal evaluation

Objectives

- Investigate the value of the course to participants.
- Investigate the acceptability and the value of the dishes cooked to participants and their families.
- Investigate if consumption has felt to have changed.

Questions

Did you enjoy the course?

1. Were there any aspects of the sessions that you didn't enjoy?
2. What have you taken from the course, what has been of most value?
3. Have you felt that any part of the course has little value or no use to you?
4. Are there any areas which weren't covered which you feel would have been beneficial to cover?

Did you go home any replicate any of the dishes?

1. Which dishes?
2. Did your family enjoy them?
3. If you didn't, what stopped you?
4. Have you continued to make any of the dishes for your family? If you haven't made them, what has stopped you?
5. Did you find the layout of the recipes easy to follow?

What made you want to attend the cookery sessions?

1. Do you feel it has had any effect on the foods you and your family eat?
2. Do you think you eat more of any particular types of food?
3. Do you think that you eat less of any particular types of food?

Appendix 13.

Table 1 Response to assessments at measurement time 1 (T1)

	Greenock (17)				Alloa (17)				Kirkcaldy (15)			
	I	C	W	T	I	C	W	T	I	C	W	T
General questionnaire	10	5	2	17	7	8	2	17	6	6	3	15
Food and cooking skills questionnaire	10	5	1	16	7	8	2	17	6	6	4	16
Food frequency questionnaire	10	5	0	15	7	6	1	14	6	6	0	12
Food diary	10	4	0	14	5	7	0	12	6	6	0	12
Spending diary	9	4	0	13	5	6	0	11	5	5	0	10
Weight measurements	9	5	1	15	4	3	2	9	6	5	3	14

	Ardler (12)				Addiewell (11)				Edinburgh (14)			
	I	C	W	T	I	C	W	T	I	C	W	T
General questionnaire	7	4	1	12	6	2	3	11	3	7	4	14
Food and cooking skills questionnaire	7	4	0	11	6	2	3	11	3	7	4	14
Food frequency questionnaire	7	4	0	11	6	2	0	8	3	7	2	12
Food diary	7	4	0	11	6	2	0	8	3	6	0	9
Spending diary	6	3	0	9	6	2	0	8	2	5	0	7
Weight measurements	6	3	1	10	6	2	3	11	3	7	4	14

	Hawick (15)				Ferguslie (12)				Total (113)			
	I	C	W	T	I	C	W	T	I	C	W	T
General questionnaire	6	8	1	15	6	2	4	12	51	42	20	113
Food and cooking skills questionnaire	6	8	1	15	6	2	3	11	51	42	18	111
Food frequency questionnaire	6	8	0	14	6	1	0	7	51	39	3	93
Food diary	5	8	0	13	6	2	0	8	48	39	0	87
Spending diary	6	6	0	12	4	2	0	6	43	33	0	76
Weight measurements	5	3	1	9	6	2	2	10	45	30	17	92

I = Intervention

C = Control

W = Withdrawals (generally those who completed only interview and/or food and cooking skills questionnaire at T1)

T = Total

Appendix 13 (contd.)

Table 2 Response to assessments at measurement time 2 (T2)

	Greenock (15)			Alloa (13)			Kirkcaldy (10)		
	I	C	T	I	C	T	I	C	T
General questionnaire	10	5	15	6	7	13	5	5	10
Food and cooking skills questionnaire	10	5	15	4	7	11	4	4	8
Food frequency questionnaire	10	5	15	6	7	13	5	5	10
Food diary	10	5	15	4	7	11	5	4	9
Spending diary	10	5	15	4	7	11	4	3	7
Weight measurements	9	4	13	4	6	10	5	4	9

	Ardler (7)			Addiewell (8)			Edinburgh (7)		
	I	C	T	I	C	T	I	C	T
General questionnaire	5	2	7	6	2	8	3	4	7
Food and cooking skills questionnaire	5	2	7	6	2	8	3	4	7
Food frequency questionnaire	5	2	7	6	2	8	3	4	7
Food diary	5	2	7	6	2	8	3	3	6
Spending diary	4	2	6	6	2	8	3	4	6
Weight measurements	3	3	6	6	2	8	3	4	7

	Hawick (13)			Ferguslie (8)			Total (81)		
	I	C	T	I	C	T	I	C	T
General questionnaire	6	7	13	6	2	8	47	34	81
Food and cooking skills questionnaire	6	7	13	6	2	8	44	33	77
Food frequency questionnaire	6	7	13	6	2	8	47	34	81
Food diary	6	7	13	6	2	8	45	32	77
Spending diary	4	5	9	3	2	5	37	30	67
Weight measurements	4	2	6	5	2	7	39	27	66

I = Intervention

C = Control

T = Total

Appendix 13 (contd.)

Table 3 Response to assessments at measurement time 3 (T3)

	Greenock (9)			Alloa (10)			Kirkcaldy (9)		
	I	C	T	I	C	T	I	C	T
General questionnaire	7	2	9	2	8	10	5	4	9
Food and cooking skills questionnaire	7	2	9	2	5	7	5	3	8
Food frequency questionnaire	7	2	9	2	8	10	5	4	9
Food diary	7	2	9	2	6	8	5	3	8
Spending diary	7	2	9	2	6	8	4	3	7
Weight measurements	7	1	8	1	6	7	5	4	9

|

	Ardler (6)			Addiewell (5)			Edinburgh (5)		
	I	C	T	I	C	T	I	C	T
General questionnaire	5	1	6	4	1	5	2	3	5
Food and cooking skills questionnaire	5	1	6	4	1	5	2	2	4
Food frequency questionnaire	3	1	4	4	1	5	2	3	5
Food diary	5	1	6	3	1	4	1	2	3
Spending diary	4	1	5	3	0	3	1	2	2
Weight measurements	4	1	5	3	1	4	2	2	4

	Hawick (12)			Ferguslie (7)			Total (63)		
	I	C	T	I	C	T	I	C	T
General questionnaire	5	7	12	6	1	7	36	27	63
Food and cooking skills questionnaire	5	6	11	6	2	8	36	22	58
Food frequency questionnaire	5	7	12	6	1	7	34	27	61
Food diary	5	7	12	6	2	8	34	24	58
Spending diary	4	6	10	3	1	4	28	21	49
Weight measurements	1	3	4	6	1	7	29	19	48

I = Intervention

C = Control

T = Total

Appendix 13 (contd.)

Table 4 Number of intervention and controls completing interview questionnaires at various measurement times

Group	Interview T1 plus T2	Interview T2 plus T3	Interview T1 plus T3	Interview T1, T2 and T3
Intervention	47	35	36	35
Control	34	24	27	24
Total	81	59	63	59

Table 5 Number of intervention and controls completing food and cooking skills questionnaires at various measurement times

Group	Food and cooking skills T1 plus T2	Food and cooking skills T2 plus T3	Food and cooking skills T1 plus T3	Food and cooking skills T1, T2 and T3
Intervention	44	34	36	34
Control	33	20	22	20
Total	77	54	58	54

Table 6 Number of intervention and controls completing food frequency questionnaires at various measurement times

Group	Food frequency T1 plus T2	Food frequency T2 plus T3	Food frequency T1 plus T3	Food frequency T1, T2 and T3
Intervention	47	34	34	34
Control	32	24	25	23
Total	79	58	59	57

Table 7 Number of intervention and controls completing food diaries at various measurement times

Group	Food diary T1 plus T2	Food diary T2 plus T3	Food diary T1 plus T3	Food diary T1, T2 and T3
Intervention	44	33	33	32
Control	31	21	24	21
Total	75	54	57	53

Appendix 13 (contd.)

Table 8 Number of intervention and controls completing spending diaries at various measurement times

Group	Spending diary T1 plus T2	Spending diary T2 plus T3	Spending diary T1 plus T3	Spending diary T1, T2 and T3
Intervention	35	25	26	24
Control	27	19	20	18
Total	62	44	46	42

Table 9 Number of intervention and controls completing 7 days of food diaries at various measurement times

Group	7-day food diary T1 plus T2	7-day food diary T2 plus T3	7-day food diary T1 plus T3	7-day food diary T1, T2 and T3
Intervention	29	26	24	20
Control	21	14	17	12
Total	50	40	41	32

Table 10 Number of intervention and controls completing 4 days of food diaries (2 week and 2 weekend days) at various measurement times

Group	4-day food diary T1 plus T2	4-day food diary T2 plus T3	4-day food diary T1 plus T3	4-day food diary T1, T2 and T3
Intervention	40	32	31	30
Control	26	16	21	15
Total	66	48	52	45

Appendix 14

Table 1 Socio-economic details at T1 of groups participating in the CookWell project.

Socio-economic details													
General questionnaire		Gender		Mean age	Marital status		Smokers	Income <£150pw	Accommodation**				
	<i>n</i>	<i>n (%)</i>		(SD)	<i>n (%)</i>		<i>n (%)</i>	<i>n (%)</i>	<i>n (%)</i>				
		M	F		Married/ Co-habiting	Single*			OO	Rpbc	Rptc	Rppl	HA
Intervention	51	2 (4)	49 (96)	32.9 (10.0)	28 (55)	22 (43)	21 (41)	23 (45)	9 (18)	8 (16)	18 (35)	7 (14)	8 (16)
Control	42	7 (17)	35 (83)	31.5 (10.5)	26 (62)	16 (38)	16 (38)	21 (50)	2 (5)	6 (14)	27 (64)	2 (5)	5 (11)
Withdrawals	20	4 (20)	16 (80)	32.8 (10.3)	10 (50)	10 (50)	10 (50)	10 (50)	2 (10)	1 (5)	13 (65)	1 (5)	2 (10)
Total	113	13 (12)	100 (88)	32.3 (10.2)	64 (57)	48 (42)	47 (42)	54 (48)	13 (12)	15 (13)	58 (51)	10 (9)	14 (12)

* Single includes widowed/divorced/separated

** Accommodation

OO Owner Occupier

Rpbc Rent paid by council

Rptc Rent paid to council

Rppl Rent paid to private landlord

HA Housing Association

Table 2 Socio-economic details at T1 of groups participating in the CookWell project (contd.).

Socio-economic details																		
HOH* social class					Employment**		Age finished full-time education		Qualifications***			Benefits****						
n (%)					n (%)		n (%)		n (%)			n (%)						
	NM	M	AF	NW	FT	PT	≤ 16	>16	None	SG	OQ	RP	CB	JSA	IS	FC	HB	OSB
Intervention	10	33	1	4	0	6	43	6	19	11	18	3	40	5	24	11	16	12
	(20)	(65)	(2)	(8)	(0)	(12)	(84)	(12)	(37)	(22)	(35)	(6)	(35)	(10)	(47)	(22)	(31)	(24)
Control	6	27	0	5	2	5	30	11	9	13	18	1	33	9	19	7	14	5
	(14)	(64)	(0)	(12)	(5)	(12)	(71)	(26)	(21)	(31)	(43)	(2)	(79)	(21)	(45)	(17)	(33)	(12)
Withdrawals	4	12	1	3	2	5	14	6	8	4	8	1	13	2	9	5	7	2
	(20)	(60)	(5)	(15)	(10)	(25)	(70)	(30)	(40)	(20)	(40)	(5)	(65)	(10)	(45)	(25)	(35)	(10)
Total	20	72	2	12	4	16	87	23	36	28	44	5	86	16	52	23	37	19
	(18)	(64)	(2)	(11)	(4)	(14)	(77)	(20)	(32)	(25)	(39)	(4)	(76)	(14)	(46)	(20)	(33)	(17)

* Head of household social class

NM Non manual

M Manual

AF Armed Forces

NW Never worked

** Employment

FT Full-time

PT Part-time

*** Qualifications

None No qualifications

SG Standard grades

OQ Other qualifications (includes A-levels, FE qualifications and other qualifications such as food hygiene certificates)

***** Benefits (NB Some participants received more than one type of benefit)

RP Retirement Pension (from State or former employer)

CB Child Benefit

JSA Job Seekers' Allowance

IS Income Support

FC Family Credit

HB Housing Benefit

OSB Other state benefits

Appendix 15

Table 1 Mean dietary variety scores (Standard deviation) computed from complete 4-day diaries (2 week days and 2 weekend days) (Sum of number of different varieties eaten over 4 days).

	Intervention Group (n=20)			Control Group		
	T1	T2	T3	T1	T2	T3
Fruit and fruit juice	0.93 (1.44)	1.40 (1.57)	0.63 (1.00)	1.53 (1.41)	1.13(1.36)	1.00 (0.85)
Vegetables	3.70 (1.47)	3.63 (1.83)	3.80 (1.88)	3.47 (1.85)	3.73 (2.09)	3.73 (2.34)
Fruit and vegetables	4.60 (2.16)	4.93 (2.77)	4.43 (2.21)	5.00 (2.54)	4.87(2.26)	4.73 (2.74)

Table 2 Mean differences in dietary variety from baseline T1 to T2 (T2-T1) and T1 to T3 (T3-T1).

Measurement time										
T2-T1						T3-T1				
	Intervention (n=30)		Control (n=15)		P value	Intervention (n=30)		Control (n=15)		P value
	Mean	SD	Mean	SD		Mean	SD	Mean	SD	
Fruit and fruit juice	0.467	1.432	-0.400	1.549	0.07	-0.300	1.343	-0.533	1.356	0.59
Vegetables	-0.067	1.982	0.267	2.187	0.61	0.100	1.668	0.267	1.792	0.76
Fruit and vegetables	0.333	2.482	-0.133	3.159	0.59	-0.167	2.167	-0.267	2.052	0.88

P value for significance of difference in means using Student t-test

Appendix 16

Table 1 Actual daily energy intakes, nutrient intakes and % contributions to energy at measurement times T1, T2 and T3 for those completing 4-day diaries (2 week and 2 weekend days).

Nutrients	Measurement time											
	T1				T2				T3			
	Intervention (n=29)		Control (n=15)		Intervention (n=29)		Control (n=15)		Intervention (n=29)		Control (n=15)	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD
Energy MJ	5.7	1.5	5.9	1.5	5.8	1.3	6.6	2.0	5.5	1.5	6.0	2.1
(kcal)	(1364)	(351)	(1406)	(360)	(1368)	(307)	(1559)	(472)	(1296)	(354)	(1427)	(494)
NSP (g)	7.7	2.2	8.2	2.4	7.7	2.3	8.8	3.8	7.1	2.2	8.2	3.5
Sodium (mg)	2055	571	2131	623	2077	650	2450	944	2001	669	2330	920
Calcium (mg)	584	189	508	220	543	203	593	272	499	165	538	295
Iron (mg)	6.6	1.9	7.1	2.5	6.3	1.6	8.2	4.5	6.7	1.5	7.5	3.1
Folate (µg)	137	44	149	54	134	44	169	72	146	34	151	68
Vitamin C (mg)	29	13	37	24	31	21	39	31	30	24	38	27
<i>% contributions to energy</i>												
Carbohydrate	46.0	7.0	46.9	8.5	45.2	5.8	45.9	6.8	44.8	6.2	46.0	8.4
Starch	28.9	5.5	31.1	6.9	29.1	5.4	29.9	6.7	29.4	5.4	30.4	5.3
Total sugars	46.6	6.9	14.2	8.1	16.1	7.5	15.3	7.4	14.6	6.5	14.6	8.5
Total fats	37.9	6.9	36.7	5.1	38.4	5.2	36.0	5.2	38.4	5.1	36.6	6.2
Saturated fats	13.4	4.0	11.5	2.3	12.9	2.8	12.2	2.2	12.8	3.4	11.0	3.2

Appendix 17

Table 1 Mean weekly differences in frequency of food preparation methods (chips/fried/roast potatoes: boiled/baked potatoes) between measurement times T2 and T1 (T2-T1) and T3 and T1 (T3-T1) for those completing 7-day diaries at T1, T2 and T3.

* *P* value using Students *t*-test

Measurement time										
		T2-T1				T3-T1				
	Intervention (n=21)		Control (n=12)		P value* (2-sided)	Intervention (n=21)		Control (n=12)		P value* (2-sided)
	Mean	SD	Mean	SD		Mean	SD	Mean	SD	
Chips/fried/roast potatoes	0.5	2.6	-0.3	1.8	0.614	-0.4	3.2	-0.01	2.2	0.763
Boiled/baked potatoes	-0.7	1.5	-0.3	1.2	0.452	-0.01	2.1	0.3	1.5	0.166

Table 2 Weekly frequency of food preparation methods (chips/fried/roast potatoes: boiled/baked potatoes) at measurement times T1, T2 and T3 for those completing 7-day diaries at T1, T2 and T3.

Measurement time												
T1					T2				T3			
Chips/fried/roast potatoes Boiled/baked potatoes	Intervention (n=21)		Control (n=12)		Intervention (n=21)		Control (n=12)		Intervention (n=21)		Control (n=12)	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD
	2.5	3.0	2.8	1.7	3.0	2.0	2.5	1.6	2.1	1.6	2.7	2.0
	2.6	1.6	2.1	1.1	1.9	1.5	1.8	1.1	2.5	2.0	2.3	1.6

Table 3 Mean weekly differences in frequency of food preparation methods (chips/fried/roast potatoes: boiled/baked potatoes) between measurement times T2 and T1 (T2-T1) and T3 and T1 (T3-T1) for those completing FFQs at T1, T2 and T3.

* *P* value using Students t-test

Measurement time										
		T2-T1				T3-T1				
	Intervention (n=28)		Control (chips, n=19 Potatoes, n=20)		P value* (2-sided)	Intervention (n=28)		Control (chips, n=19 Potatoes, n=20)		P value* (2-sided)
	Mean	SD	Mean	SD		Mean	SD	Mean	SD	
	Chips/fried/roast potatoes	-0.5	3.3	-0.7	3.9	0.861	-0.8	3.3	1.0	6.3
Boiled/baked potatoes	-0.6	2.7	-2.5	9.2	0.301	-1.1	3.1	-1.6	9.3	0.786

Table 4 Weekly frequency of food preparation methods (chips/fried/roast potatoes: boiled/baked potatoes) at measurement times T1, T2 and T3 for those completing FFQs at T1, T2 and T3.

Measurement time												
T1					T2				T3			
Chips/fried/roast potatoes Boiled/baked potatoes	Intervention (n=28)		Control (chips, n=19 Potatoes, n=20)		Intervention (n=28)		Control (chips, n=19 Potatoes, n=20)		Intervention (n=28)		Control (chips, n=19 Potatoes, n=20)	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD
	0.6	1.5	1.1	2.1	2.7	2.3	2.9	3.2	2.4	2.4	4.6	8.0
	2.9	2.9	5.3	9.6	2.4	1.9	2.9	2.9	1.9	1.8	3.7	3.2

Appendix 18

Table 1 Mean weekly food shopping, takeaway and eating out costs and mean weekly differences in food shopping, takeaway and eating out costs between measurement times T2 and T1 (T2-T1) for those completing those measurements at T1 and T2.

Measurement time													
T1					T2				T2-T1				
	Intervention		Control		Intervention		Control		Intervention		Control		<i>P</i> value*
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	
Food shopping costs (£) (I ¹ , <i>n</i> =31, C ² , <i>n</i> =23)	40.84	20.37	32.02	23.86	29.91	18.28	26.20	20.99	-10.93	21.78	-5.80	21.64	0.396
Takeaway costs (£) (I ¹ , <i>n</i> =10, C ² , <i>n</i> =7)	5.98	3.86	7.34	5.34	6.20	2.85	7.34	5.34	0.23	3.99	0.99	4.20	0.711
Eating out costs (£) (I ¹ , <i>n</i> =9, C ² , <i>n</i> =9)	7.43	5.77	10.10	11.03	5.99	5.54	6.68	5.19	-1.44	6.15	-3.42	12.00	0.666

* P value (2-sided) using Student's t-test

¹I=Intervention

²C=Control

Table 2 Mean weekly food shopping, takeaway and eating out costs and mean weekly differences in food shopping, takeaway and eating out costs between measurement times T3 and T1 (T3-T1) for those completing those measurements at T1 and T3.

Measurement time															
T1					T3				T3-T1						
	Intervention		Control		Intervention		Control		Intervention		Control		P value*		
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD			
	Food shopping costs (£) (I ¹ , n=25, C ² , n=15)	35.93	19.92	29.65	26.48	29.65	26.48	34.29	30.41	-6.28	36.03	-0.1		23.3	0.558
	Takeaway costs (£) (I ¹ , n=6, C ² , n=5)	7.47	4.25	8.61	5.55	9.96	5.71	8.51	5.07	2.49	9.19	-0.10		8.27	0.639
	Eating out costs (£) (I ¹ , n=8, C ² , n=4)	5.91	3.81	6.02	4.89	12.59	10.80	8.85	5.23	6.67	8.27	2.83		1.33	0.372

* P value (2-sided) using Student's t-test

¹I=Intervention

²C=Control

CookWell Project

Results of discussions with cooking groups

Renfrewshire Community Health Initiative, Ferguslie Park, Paisley.

The entire cookery group and the tutor were present for the discussion.

Everyone seemed to have had an enjoyable time and was keen to continue with more cookery sessions.

The venue was praised for the good environment, plentiful equipment and the availability of extra food from the store if there had been a mistake with the shopping.

Recipes

Tuna Pasta Bake - all felt this to be too bland. Not popular with children either.

Lentil and Tomato Soup - needed to thin down, but liked by all.

Cheese Scones - very popular, turned out well.

Mince - Spaghetti Bolognese and Chilli Con Carne both well-liked.

Mince and Pasta Bake - generally felt to be 'disgusting'. All found appearance of bake off-putting. It was suggested that this may have prejudiced them before tasting. Bake was thought to be too white with pasta and mushroom soup - suggested adding a different soup such as tomato for more colour.

Rice - Gammon and Pineapple Risotto - was 'lovely', well liked by all.

Bacon and Tomato Risotto - was not popular as thought to taste too strongly of tomatoes.

Kedgeriee - only 2 members of group liked smoked fish and both were absent that week. Dish disliked by all other participants. Tutor suggested that smoked haddock may be more acceptable than smoked mackerel to those who are not very keen on fish as it is less oily and has a milder flavour. (Good point. Should we try to encourage fish consumption or oily fish consumption?)

Pizza - very successful. Used all different toppings except kidney beans. Cooked tomato sauce before spreading on pizza.

Curry - 'lovely taste', liked creaminess. Very popular with everyone although some preferred a hotter curry and so added more spices.

Potato Wedges - Reasonably popular, but again some thought they were a little bland. Thought wedges tasted better eaten immediately after cooking. Didn't transport and reheat very successfully.

Carrot Cake - 'excellent!' Seemed to be the favourite recipe. Cakes were iced before taking home.

Fruit salad - popular as well, especially with children. Tutor had chosen a selection of seasonal fruits rather than follow recipe and also commented favourably on the large bowl of salad produced from a small amount of fruit.

All participants felt that the recipes were rather bland and needed more salt, stock cubes or spices. It may be worth noting that all participants, except one, and the tutor appeared to be reasonably heavy smokers.

The group felt very strongly that tinned tomatoes were used too often. Tinned tomatoes did not appear to be well liked or used by anyone in the group and they suggested tomato purée would have been a more acceptable substitute in some recipes.

All the dishes appear to have been liked by participants' children (where applicable - this was an older group so several had no children or only older children) except the Tuna Pasta Bake.

Bags of ingredients - some people had made most of the recipes again at home, some had only made a couple. Finding the time to cook from scratch seemed to be the main obstacle to replicating the recipes.

One male participant noted he now felt more confident about following recipes and experimenting.

None of the group felt that the cookery course had changed their eating or shopping habits in any way. The tutor suggested that participants may be more aware of what constitutes a healthy diet, but the group pointed out that they may be aware but actually changing eating habits was a different and more difficult matter!

Burnfoot Family Centre, Hawick.

Only 5 members of cookery group were present for the discussion, which was led by cookery tutor Karen Valentine.

Recipes

The recipes using fish were not liked by the majority of the group. Most disliked all fish, but one found cod or haddock acceptable. Even tinned tuna did not appear to be popular.

One person disliked Chilli con Carne.

Two people would have liked to have made more puddings, but most were happy to concentrate on savoury dishes.

Favourite recipes:

Soup and Scones - One person had made soup several times.

Risotto - children liked this. One participant had made Gammon and Pineapple Risotto for her parents as well.

Fruit Salad - especially popular with children. 'Bairn ate all the fruit salad - I got none!' 'Bairn made fruit salad 3 times herself.'

Pizza - One participant reported making pizza a few times at home as it was not as much fuss as she had initially thought. In class she had thought making pizza base too time-consuming and said she couldn't be bothered doing it again.

Two participants said they were 'sick of seeing' mushrooms and tinned tomatoes. Generally felt a greater variety of vegetables could have been used, especially traditional root vegetables.

Most participants had made all the recipes again at least once. One had tried other recipes from the book that weren't covered in class. Another said 'I quite often pull out the recipe book.'

All participants had young children and their tastes seemed to have a very large influence over which recipes were made again at home.

Changes in eating habits (individual comments):

- Class has made a slight difference. More homemade food now rather than going to the shop.
- Make things more in the winter time. Less bothered in summer - feel less like eating.
- I usually buy everything frozen and shove in oven or microwave - doing this less now.
- Buying stuff for cooking costs more at the time. But you can buy in bulk (e.g. bacon) and freeze the extra. Start cooking in the afternoon for tea time - got to start cooking earlier when cooking from scratch. Unclear if this was resented or not. When asked if she thought she was saving money, participant said there was now food left in the cupboard at the end of the week. L (her daughter) said there's been an improvement in my cooking - don't get takeaway meals now.
- Eating less sausages now. Buying more tinned tomatoes and yeast (for pizzas).
- Make my own macaroni and cheese now - only occasionally buy a frozen portion.

Broomhouse Neighbourhood Centre Community Cafe, Edinburgh.

All three members of cookery group present at discussion. Tutor, Karen Valentine, also leading discussion.

Participants happy cooking in smaller group. Felt it was less crowded and they got on well together.

Most useful aspects:

The bag of ingredients to take home was liked as it enabled participants to try the recipes again while they were still fresh in their minds.

The recipe book was liked and was said to be easy to follow.

Recipes replicated at home:

Raita (served with curry) - One person made this and ate it 3 nights in a row. One person didn't like idea of raita.

Meatballs - this recipe was not part of the class but 1 person had seen it in recipe book and tried it herself at home. Very popular with her and her partner and had made it several times.

Tuna Bake with cheese sauce - One person. One person didn't like hot tuna.

Curry - Two people. This recipe was particularly popular with families.

Pizza - One commented that she liked base as it remained crispy when reheated.

Chilli - One person

Risotto - One person

Scones - One person commented that she was scared in case they didn't rise again.

Changes in behaviour - comments from individuals:

- Buy less convenience food.
- My attitudes changed a bit. More willing to try something new - make an effort to make things like my own cheese sauce.
- Making own cheese or white sauce for pasta.
- Buying more spices. Put them in food but don't tell the family. Bit more adventurous now. Try different things.
- Saved a lot of money. Used to buy 1lb mince to make chilli but now buy less - half lb. 'Got money left on Sunday.' Still got dried and tinned foods from 'goody bags' in the cupboard.

Addiewell Community House.

Five participants were present. The discussion was led by Karen Valentine. The facilitator was present in the room but did not take part. It was quite difficult to have a structured discussion as participants' children were also in the room, so the following is simply a collection of the more relevant comments made by participants.

Participants were always keen to go to the cookery group each week. They felt there was a good atmosphere, they didn't lose interest or get bored and they enjoyed making all the dishes.

The most valuable aspects were felt to be making pizza dough (2 people) and learning new recipes - something different.

Favourite recipe was pizza. This was especially popular with children who helped to make them at home.

'Because I'm making new things the wean wants to try them...more willing to try new things.'

Some participants felt that tinned tomatoes were used too often in the recipes.

One request for less spicy dishes.

One person said she had made chilli, curry, pizza and cheese sauce a few times at home. She adapted the recipes to suit and removed kidney beans that were especially disliked.

It was important to the children that food looked good.

One reminder that those with severe nut allergies may also be allergic to coconut which was included in a few recipes.

Changes to behaviour, comments from individuals:

- Like pizza so now buying ingredients to make them and so saving money (compared to buying ready made pizza). Buying tinned tomatoes now.
- More willing to try more things.
- Don't buy pizzas now - make them and save money.
- Cut pizzas into shape with biscuit cutters.
- Eat less convenience food, tinned sauce and takeaways.
- Going to try cooking my own and not use freezer food.

Chalmers Ardler Child and Family Project, Dundee.

Discussion led by Karen Valentine. Cookery tutor not present.

Participants had enjoyed the cookery sessions, especially cooking from scratch. However, some felt the demonstration was a bit boring, particularly for those who knew what to do. They would like to cook at the same time as the demonstration, i.e. everyone including tutor to work through the recipes together.

Favourite recipes were Mince Pasta Bake, Pizza and Chicken Curry (some a bit unsure but liked it once tasted). Everyone had tried all the recipes again at home except for one participant who had not made the Carrot Cake or Risotto.

Most families had also liked the recipes except two with 'fussy' children.

Participants felt it was interesting to make pizza from scratch and that cooking from scratch was cheaper. One commented that it was dearer to buy all the ingredients to start with but was cheaper in the long run.

When asked what had attracted them to the cookery sessions participants said they had wanted the pack of cookery equipment and they liked the free ingredients to take home as it meant they had foods which they didn't normally buy.

Changes to behaviour, comments from individuals:

- Eat healthier now.
- Eat kiwi fruit and natural yogurt now.
- More incentive to cook things from scratch now.
- Will taste things now rather than judging by appearances.

West Bridge Mill, Kirkcaldy.

The discussion was led by Karen Valentine who was also the facilitator.

Participants thought the cookery sessions were good and had given them something to do. One also commented that 'it saved me making tea'.

One said that she had enjoyed making things she had thought of trying but had never made before, e.g. carrot cake and kedgeree.

Another participant said she never made curry or cheese sauce from scratch before now but would do so now if she had time and the recipe book. She added that it wasn't easy cooking with children to look after.

Favourite recipes were Carrot Cake, Pizza, Potato Wedges and Lentil and Tomato Soup. Participants' children had liked all the dishes except risotto. Dislikes were the appearance of the curry (some curry powders gave a better result than others) and the smell of rice. Boil-in-the-bag rice was preferred. Participants liked the fact that ingredients were easy to find - the sort of stuff they would have in the house.

One participant had made the soup, tuna pasta bake and pizza again at home. Others said they were waiting for the recipe book before they made anything again at home. (Participants were given photocopies of the relevant recipes together with the ingredients to take home. However, this group seemed to find the idea of a proper cookery book more inspiring. The CookWell books were unfortunately not printed at this time.)

When asked if there were any other recipes they would have liked to have covered, one person suggested making and decorating a birthday cake.

Alloa Family Centre.

The discussion was led by Karen Valentine.

Comments on recipes:

Participants now felt more confident about following written recipes.

Lentil and Tomato Soup - enjoyed it and made it again at home.

Risotto - Bacon and Tomato Risotto was felt to be too dry (there was a mistake in the early version of the Cookwell pack used by Alloa and there should have been more liquid in this recipe).

Participants said they had made all the dishes again at home. One participant disliked the kedgeree. Another said her mother wanted a copy of all the recipes!

Participants said they would continue to make the following dishes: Carrot Cake, Tuna Pasta Bake, Pizza, Bacon and Tomato Risotto, Gammon and Pineapple Risotto.

Reasons for attending:

- Like cooking.
- To learn more recipes.
- To get out and socialise.

Changes to behaviour:

- Now buying lentils and tinned tomatoes.
- Eating less chips and Chinese takeaways.
- More variety to meals, eating greater variety of foods.

Interview with Kara-Linn & Tracy, cookery tutors

Food ordering had been complicated as some items were ordered through the Centre kitchen and came in catering packs.

They felt it was important for tutors to read through recipes with participants before starting as they lacked confidence to read recipes themselves. They felt participants liked to be told what to do next. However the cookery sessions had been a confidence booster and everyone was proud of their dishes and keen to take them home and show them to others.

In order to make best use of the time available they had drawn up a dishwashing rota so that participants were not fighting to get to the sink.

Comments on recipes:

They had to adjust some recipes, e.g. Bacon and Tomato Risotto too dry. Tracy said she would not use this recipe again.(There was a mistake in the recipe.)

Scones - everyone's scones had worked well. Recipe given to Centre cook. Important to emphasise adding liquid gradually.

Lentil and Tomato Soup - liked speed, easiness and cheapness of soup. Good quantity compared to tinned soup.

Baked Apple - participants were a bit apprehensive but tasted it.

Potato Wedges - popular recipe. Pleased with how simple it was to make.

Kedgeriee - not keen on this.

Fruit salad - liked simplicity of this recipe, i.e. it used fruit juice instead of making syrup.

Chicken Curry - again participants were a bit apprehensive but tasted it. The curry was not generally liked and was felt to be too salty. (Tutors admitted they had used ordinary spoons instead of the measuring spoons provided so too much curry paste/powder may have been used.)

Felt it was difficult to persuade participants to add new vegetables to their diet.

(No comments on mince recipes as this week was missed due to in-service training.)

Second Chance Learning Centre, Greenock.

Comments on recipes:

Chicken Curry - One person thought it was “disgusting”. However, she didn’t like coconut and also felt her cooker was not working properly. Tutor later explained that no-one had added yogurt to curry as stated in recipe so the finished dish was not thick and creamy as intended.

Chilli Con Carne - felt to be a bit bland. Needed more flavour and spicing up.

Scones – ‘wean is making them constantly’.

Lentil and Tomato Soup - popular. Two people commented, ‘The only way I eat veg is in soup.’

Pizza - popular. Liked bread base.

Risottos - Bacon and Tomato more popular of the two.

Pasta Tuna Bake - popular.

Carrot Cake and Fruit Salad - liked both of these.

Recipes made again at home were: scones, pizza, soup, chilli and pasta bake.

Reasons for not making dishes again at home included:

- recipe too complicated
- too fancy
- family didn’t like it
- prefer simpler recipes

Garlic and spices were reported as being new to some participants.

Reasons for attending:

- Crêche (mentioned by several people).
- Gets you out.
- Learning to cook (This participant had now bought a wok).

When asked if they thought the cookery course had had any effect on their eating or shopping habits participants unanimously said it had had no impact.

Comments were made regarding the importance of having the correct equipment in good working order. Some of the Centre’s Baby Belling cookers were not very reliable and this annoyed participants and seemed to dent their confidence in the recipe they were making.

Appendix 20.

Cookwell Qualitative Follow-up Research

Themes emerging from follow-up interviews and inspection of food diaries

Martine Stead, Martin Caraher

Interviews conducted

Dundee	5 participants + centre manager
Greenock	8 participants
Tullibody	2 participants
Kirkcaldy	5 participants
Alloa	participants
Ferguslie	7 participants + centre manager/community worker
Hawick	3 participants + 4 controls and centre manager/community worker
Broomhouse	2 participants

Context

Potential client groups, recruitment methods and venues for the different courses differed. Some recruited through community education, some through Family Centres, some as one-offs (ie. no pre-existing client group - Kirkcaldy).

These different client groups and contexts had several implications:

- for ease of recruitment (easier where a client group existed and were in regular contact with the centre);
- for motivations to attend (community education participants were motivated by learning for sake of it – subject almost irrelevant; family centre participants felt ‘strongly encouraged’ to do so by their social workers, as part of family assessment);
- for retention of participants (better in community education context???? Don’t know);
- for types of benefits experienced (personal development and community development gains more likely in community education context????).

An analysis of the food diaries shows that the groups were not homogeneous but displayed a wide heterogeneity in eating patterns. There are different family household types which can be summarized as follows:

- Multiple occupation, complicated household arrangements
- Single male young
- Single male older
- Single female older, usually with grandchildren

Single female with children
Nuclear family

The quality of the diaries varies, some go into great detail what is being eaten and how and where, others just sketch out the bare minimum. There is some indication from the diaries that women tended to eat what was in the house, especially if it was perishable, for example one mother on giving bananas to her children then had a banana sandwich for her lunch. Diary entries, supported by the qualitative interviews indicate that parents are concerned with the intake of sugary snacks and are trying to replace them with fruit in the form of 'raizens' and bananas, they themselves were not changing their own habits.

Once men disappear from the home there is less likely to be reporting of their food intake, this was more likely to be so when they were in paid employment and or ate at work. There was minimum reporting of food being prepared to take to work (eg sandwiches).

Single persons, male and female, young and old tended to have monotonous eating patterns, enlivened only by visits to friends, or eating out. Older females with grand children seemed to prepare different food for these occasions.

The courses were thus expected to both appeal to and influence a wide variety of eating and food preparation habits. There was a lot of reporting of snacking and using foods such as 'cornflakes' as snacks between meals and at the end of the day. Many of the diaries indicate a culture of snacking, where food is reported as being consumed hour-to-hour. It may be that 'cooking' per se will have little impact on these habits.

There was what appears to be an area effect. For example the Greenock diaries indicate that there was a tendency for an early evening meal followed by a later snack (supper). There is evidence from the diaries that fruit and vegetables are not part of this snacking culture, the emphasis being given to high sugar, high fat foods.

There is evidence of eating out but usually in connection with shopping trips. So a visit to 'Safeways' was often accompanied by a visit to the café. Also eating out was associated with trips to the cinema, ice rink or shops. In addition there was evidence from the diaries, supported by findings from the qualitative interviews, that snacks were used to placate or bribe children while out shopping eg the buying of a '20p mixture'. The various family centres etc offer an opportunity to influence dietary intake. Often where these were identified as the source of food intake that intake was more varied than the food eaten at home. In addition it offered the opportunity for food to be consumed in a social atmosphere. There is also some evidence of take-aways being eaten in the home, but less of them being eaten in the street, although this may be from under reporting.

Cooking or food preparation can be seen to involve a series of skills beyond the mere application of heat and getting a meal on the table. It involves the skills of buying and planning in advance and anticipating the needs of children and families.

1. Response to intervention

General feedback

Very positive overall response: “*enjoyable*”, “*really loved it*”, “*excellent*”

Soup, mince, pasta and cakes were favourites

Pizza class enjoyable, but seen as impractical

Tips on budget shopping & cooking appreciated by some

Teaching style: enough hands-on experience, easy to follow.

“I found it quite straightforward. It was simplified and easy to follow, it was really good”

(Karen, Broomhouse)

Some reported linking the quizzes and questionnaires

“Most useful was the food tasting and the quiz where we had to guess and oh the handouts were quite good.”

(Jackie, Ferguslie)

The practical nature of the classes and using ingredients that were already in the cupboard at home were also mentioned in a positive light.

“The most useful is trying things, watch them and then watch ‘other folks to see what they did.’”

(Marjorie, Greenock)

This was reiterated by a number of those interviewed.

An additional benefit for the centre managers/community workers in the various locales was the kudos of being associated with the University and the Scottish Community Diet project.

Some criticisms

Minority views, expressed, in an overall positive context, as suggestions for improvement rather than strongly negative comments.

“School-like”

Too little choice (prescribed rather than negotiated course content)

Group dynamics

Crèche arrangements

"I didn't like the part where the weans were in the next room 'cause, no' that I'm picky about anybody, but some of the weans weren't settling. So it wasn't fair on other mothers having the crèche right next to it. It would help if the weans were out of our eyesight"
(Tracey, Addiewell)

Range of recipes: too many tinned tomatoes, oily fish, not responsive to local tastes:

"They did plenty o' dishes. I just didn't seem to be keen on any."
(Vicky, Kirkcaldy)

"In the Borders they eat a lot of Scottish stuff, like stovies and stuff... I thought they could have had more like that down here. Stovies and making sponges and things like that. I think they could have made a fancy tray bake or something. Something more appetising for us down here"
(Susan, Hawick)

Would have liked more on cooking for children:

"I think that would have been a big improvement. Doing it for a couple of weeks for toddlers, rather than just for adults"
(Susan, Hawick)

"Pizza and curry were fine but the using the family sized tin of tomatoes was just too much I gave them away and they were too much"
(Maureen Ferguslie)

Small portions

Too short

In Hawick, long journeys possibly contributed to drop in attendance.

Having to complete diaries was a nuisance factor, which may have contributed to falling off in attendance.

Too much filling in of diaries not enough cooking. I wanted more time on cooking and not form filling you do enough of that with social services.
(Fiona, Hawick)

My least favourite was the food diaries I have seven children and two adults so I had to check what everyone ate on that day. It was interesting to ask the kids but nearly impossible as well and the time it took!
(Jackie, Ferguslie)

"Least useful were the questionnaires that was stressful."
(Linda, Dundee)

The evaluation testing procedure at the end including the qualitative interviews was also criticized as it made the whole experience too much like school for some.

The course structure

*Really good the course not long enough, the demonstrations helped me a lot but would have liked to have more cooking and less time on demonstrations.
(Katherina, Dundee)*

*[She] demonstrated and then you watch and you do it takes a long time and is pretty boring. So do it a bit at a time and then you do and it makes it less boring. Got sense of involvement, new ways to do things and hygiene were good.
(Karen Dundee).*

Some reported dissatisfaction with the facilities available:

*Well, the only thing that I would think would ... it would be improving it, would be if we could maybe have a few more cookers because there is a lot of people like that come to it and more or less if you are doing it, you have got to wait until maybe such and such a person is finished before you can get yours started. There isn't enough time and I would love to see it running a bit longer as well in time wise.
(Jane Greencok)*

There was some reporting of recipes 'going wrong' in the classroom situation and this put people off trying them at home on the basis that if it could be not 'got right' in this situation then there was little hope of doing so in the home.

2. Self-reported benefits and outcomes

(i) Increased confidence and enjoyment around food

Tasting new things:

*Do you think it's made you more adventurous in the things you'll eat?
"Probably, aye. Because if I went to somebody's house, or I went to a restaurant and saw it on the menu, I'd know what it tasted like. 'Cause normally if I do that and I say 'I wonder what that tastes like?' then I'll no' bother getting it because I might get it and no' like it...."
So you've maybe not cooked it since but you might try it?
"Aye."*

(Deborah, Kirkcaldy)

Personal confidence:

You came in saying you were still not very confident?

"I'm not really but I do like chicken curry, I do make that now. And I help the weans make cakes and I didnae do that before.... No, I don't know it does give me ... like I wouldnae have known how to make that soup. You know like, I wouldnae have had the confidence to do it 'cause nobody really knew anyways, I didnae tell anybody."

(Angela, Tullibody)

Most useful was the rice risotto as it tells you what to do with things in your press. You feel more able to do..

(Lorraine, Dundee)

Preparedness to experiment:

"I've got more confidence in cooking now than I did before. I mean I'll try and cook anything now. I'm not very happy when it doesn't go right. But, no I try and cook from recipes and that now. I feel quite confident. And I managed to get the cheese sauce right."

(Kelly, Kirkcaldy)

"I think it made me more aware of what you actually could do with basic ingredients. If you did something with mince, you're doing one thing but in the book it gave you two or three other recipes – so it was variations that you could do with similar ingredients"

(Karen, Broomhouse)

Pride:

"Oh aye, it was good. I was quite proud of myself with all my big dishes, going home. Aye, they liked it too 'cause they didnae know what they were getting for their supper. ... It was brightening their life up too."

(Betty, Greenock)

"It was ken, just the sort of idea of pulling things together, starting from scratch and saying to yourself 'I made that', and you felt good about it, ken, it was good."

(Deborah, Kirkcaldy)

"At the beginning I says 'you've got to make the dough?! Oh no, I'll never make that!' But I managed it no bother. I was quite amazed at myself actually, and then I made it quite a few times at home after that"

(Rhonda, Hawick)

Pleasure:

“I enjoyed starting the chilli, doing all the wee bits and putting everything in and all that. Normally I’d be buying tins of chilli and just putting it in the pot and heating it up.”

(Patsy, Greenock)

Social aspects

Knew a few people to see but not all the [advantage] of the project was the getting together and talking to people you had not talked to.. the crèche facility was also good.

(Kathrina Dundee)

(ii) Specific skills

“They showed you how to cut up a cauliflower, I’d never done it before ‘cause I’d bought frozen stuff.”

“You’ve got to keep stirring it [rice] because it sometime sticks. But if you put a wee bit of oil in it, it stops it from sticking.”

(Shona, Tullibody)

“I’m very good at making white sauce. I’m very good at making that.”

Could you make that before?

“No. So that’s one thing .. Without lumps! ...I’m very proud of my cheese sauce now!”

(Carol, Kirkcaldy)

“Well I’d make pizza now rather than buy it. And I’ve found that you can eat that cold or hot, whereas nine times out of ten the frozen ones, you cannae eat them cold, they taste revolting!”

(Helen, Broomhouse)

“Putting a wee bit of oil in your pasta was another hint. Because I didn’t ken about that either. Oh, there was lots of hints”

(Rhonda, Hawick)

Healthy eating benefits:

“I can cook, so it didn’t bother me [ie. didn’t come along feeling hopeless]. It was just to see like the healthier options that I came along, so – I don’t like the smell of fat cooking, it makes me sick quite a lot of the time, so it was good to do things away from the fat side of it”

(Karen, Broomhouse)

(iii) Wider repertoire of dishes

"I'm more daring now."
(Kelly, Kirkcaldy)

Variety:

"We're no eating as much frozen food all the time now. Trying to eat a mixture o things"
(Tracey, Addiewell)

Fruit and veg:

"It's the only time I've been able to get them to have a lot of vegetables is by putting it in pasta. Before, it would just be like salad cream and tuna with your pasta or tuna sauce with pasta. But now I put veggies in it."
(Tracey, Addiewell)

New dishes:

"I've never made curry before, it's something I've always ... aye, I liked it 'cause I do that myself now. And I make a stir-fry and all that myself, aye."
(Betty, Greenock)

Revival of family traditions (cooking formerly seen as "mum's/gran's dept"):

"And I started making, my Nana used to make tattie soup and like she told me the recipe just before she died, and then when I made it a couple of weeks ago it was great! And I made it again the next week... I was making it for my Dad and he was like, 'this is great!' 'cause it was like his Mum. And he was like, 'oh it's great, it tastes exactly the same'."
(Angela, Tullibody)

(iv) Changes in shopping behaviour

"I'm still shopping in the same places but I'm trying out different things that I didn't used to try like spices and stuff like that. Before I wouldn't even entertain it. Ken, I wouldn't even try it. I just thought, 'no'."
(Tracey, Addiewell)

"I've been buying some value stuff, 'cause I never used to buy that."
(Angela, Tullibody)

"I buy different things now. Aye, I buy more fresh stuff instead of packets and tins... I've more experience now with different vegetables."

(Betty, Greenock)

“You go for more things to actually cook with. Whereas beforehand I was going for the things which were already done. Like I’ve got flour in the house now. Tinned tomatoes, things like that. Yeast, ken. I would never have had yeast beforehand. I’d never have kent what it was for an all that”

(Rhonda, Hawick)

“I think it costs maybe a wee bit more at first. But then you have all that in your cupboards after that. And therefore the next time you go shopping you dinnae need to spend as much ‘cause you’ve got things in the cupboard already”

(Rhonda, Hawick)

(v) Increased awareness of food preparation and production

“You sort of dinnae appreciate, I suppose, the way food’s made. If you think about it, you go to the shop and buy the pizza. Obviously somebody had to do that in the beginning ... But you just don’t think of they things. I mean you stick it in the oven and 20 minutes later it’s ready, and that’s it, you eat it. But obviously doing it from scratch, obviously somebody had to do that in the first sort of attempt to get the pizza that you’re eating.”

(Deborah, Kirkcaldy)

(vi) Personal benefits

Time out:

“Aye, getting involved again. Getting involved in things. Because your day gets pretty routine with kids. It’s the same day in, day out. And to have this wee thing, I think it was every Thursday that we used to come, it was great. This is my break, my thing to get involved with ... So it was good, something to look forward to. A wee bit of time for Mum, aye?”

(Carol S, Kirkcaldy)

Company:

“There’s something different about cooking with friends. In the house you get kind of fed up with it.”

(Kelly, Kirkcaldy)

Change:

“See, I never went outside the door. I didnae go out. I watched the weans and I just didnae mix with people. And then I came up here and there’s a different bit

in my life now.”
(Betty, Greenock)

Re-involvement in learning:

“It was something else to do and to learn.”
(Patsy, Greenock)

“It was a break, plus you could learn stuff. At my school, to tell you the truth, I didnae pick things up awful fast.”
(Tracey, Addiewell)

(vii) Community development benefits

Greenock participants continued cooking after course finished – ongoing process

Facilitator in Addiewell used experience to get a job

Addiewell participants continued meeting to learn new skills: aromatherapy, art, aerobics

“Basically ‘cause we were all a group; we were all getting together; the weans were all getting to be with other weans; and we all got a chat and that; and we got to do different things and that instead of sitting in the house day after day”.
(Tracey, Addiewell)

3. Taking Cookwell home: how did it fit into participants’ lives?

For some, it was enjoyable but had little impact:

“No. I’ve never opened the book again! No, but I did try it once. I tried to make the curry from scratch but it ended up just like it had come out of a jar, for some strange reason.”
(Deborah, Kirkcaldy)

“I’ve not made the pizza. I’ve not made the curry. I wasn’t keen on the soup. I didn’t like the chilli. I never really tried anything again apart from the potato wedges, and the tuna pasta bake.”
(Carol S, Kirkcaldy)

Dishes made most frequently at home since course:

Tuna bake
Soup
Chilli
Curry

Sauce 'from scratch'

Dishes made less frequently:

Oily fish

Pizza

Risotto

"I did quite well. I did most of what they did on the course. I made the pizza and the curry. I like that, I make that very regularly"

(Helen, Broomhouse)

Barriers to incorporation/change:

Time and competing demands:

"I'm never organised, I've never got the time, never got the imagination."

(Mother of 5, part-time job, responsible for all household cooking)

"I'm trying to make home-made soup, now, when I'm in, but I've never got the time."

(Mother of 3, has 3 jobs, long bus journey from semi-rural community to supermarket)

"They don't take too much time, but if you are in a hurry you want something that you're not going to have to stand and chop everything up for half an hour, and then having to stand and do everything"

(Karen, Broomhouse)

Looking after young children:

"My man works in hotels so he's like really weird shifts. And he's hardly ever at home, and just when I'm cooking, the weans are [everywhere] ... 'cause they willnae sit in the living room and do like drawings or anything while I make the tea and plus I dinnae want them in there anyway. But then I don't want them in the kitchen, so ... It's quite hard. You need someone to take your weans while you cook."

(Angela, Tullibody)

"No, I don't think it was difficult but it's just, if you've got three weans running about, it's ... the packets quicker. You just open the packet and throw it in and mix it all with milk. If you're starting from scratch, you need to do it before the weans come in and it's just ..."

And it can get ruined if it's on too long?

"Aye and the weans come in from school and they're starving and wanting their tea, so I just do the quickest."

So that one's, it's not been that easy to copy how to do it?

"I think I tried it once and, I cannae remember how it went. It never went right anyway and I just thought that, 'I won't do this, I'll use my packet again.'"

(Pasty, Greenock)

Staggered mealtimes/demands of lifestyles where 'family meal' rare:

"It depends if I'm cooking for all of us, or myself, or the kids. I try and make the same for everybody but it doesn't always work out that way. We're not always in at the same time. It's a case of I'll come in and they'll go straight out the door" So it sounds like some of the recipes don't really fit into the time you have available?

"Yes. I think if they were – maybe not simpler, but a bit quicker. That doesn't need as much preparation work beforehand"

(Karen, Broomhouse)

Limited access to fresh ingredients:

"Trying to buy the stuff here is difficult, 'cause you just can't get it here. We've not got the right fresh food and stuff like that"

(Tracey, Addiewell)

Stressful mealtimes:

"Teatime was just murder the other night. As soon as they get their plate in their hand they rush through to the living room to find out who's going to sit on the carpet first....If I tell the big one she's not getting on it, she goes about screaming on the floor."

Do you usually eat in the front room?

"Aye. There's no room in our kitchens for tables. I think it would probably be better if there was room in the kitchen for a table. But there's nae room in our kitchens for a table."

So you sit on the settee or wherever, and they fight about who sits where? That sounds a bit stressful?

"It is"

The last thing you want to do is worry about what they're eating as well?

"Aye. It's usually junk"

(Rhonda, Hawick)

Easily dented confidence:

"Not at home, I still cannae do it [rice] at home, 'cause I've still got the same, 'check it now, check it now, fluff it' and ..."

But it doesn't work out at home?

“No.”

(Angela, Tullibody)

“We made cheese sauce but I still cannae get it right! I just keep buying the Coleman’s or whoever in the packet.”

(Patsy, Greenock)

Taste preferences (self and family members):

“I didnae eat the chilli again ‘cause I dinnae like chilli. ... And the bairns dinnae like that either. They dinnae like the kidney beans. They sit and pick all them out first so it’s quite pointless.”

(Vicky, Kirkcaldy)

“He’ll [husband] take the home-made soup. But as for the tuna bake! Frozen food and that he’ll eat, but he won’t eat fruit or veg. He’ll eat tinned veg, but only carrots and peas.”

(Tracey, Addiewell)

“There was something awful we made. I think it was kedgeree. I didnae like it”

(Susan, Hawick)

The problem is that kids don’t like fish except fishfingers and the boil in the bag with the sauce and who would want to spend time when it is so easy. Fish is like second class food only for when you don’t eat or can’t eat meat. It is poor man’s food!

(Kathrina, Dundee)

“Curry didn’t like curry or fish, didn’t like the smell and the .. handling. I tried a few of the recipes and had to have every window I the hosue open ‘cause of the smell”

(Annette, Ferguslie)

Kedgeree fish, in my house nobody likes fish just the thought of it.

(Paula, Ferguslie)

Health and special dietary needs (back trouble, diabetes, arthritis, allergies):

Perceptions that little time or economic advantage to cooking ‘from scratch’ and prepare a proper meal:

“If you buy it from a shop, you’re getting it at a competitive price. To make it yourself, it’s actually going to cost you more than that. ‘Cause you pick up a lasagna, family-sized, for £2. But to make a lasagna yourself, to buy all the vegetables, it’s going to cost you £4 or £5....There’s that much call for the stuff now that it’s a lower price. There’s competition”

(Joseph, Hawick)

“Well, it was showing you like healthy eating, presenting it, preparation an’ all that. You know, it was all about weighing. You know you wouldn’t know how ... well I didn’t know ... to get all the ingredients together into one dish and to make whatever and weights and measures and all that so, all stuff like that. [...] There was a pot of soup and it was celery and stuff in it and I don’t like anything like that but in a soup it was totally amazing and it was like cumin powder and all that, so things like that. I am trying to think of what else. Different ways of making things that I had never tried like steaming things and stuff like that which was lovely and interesting.”

(Jane Greenock)

Appendix 21.

Process Evaluation

Details of community groups

Second Chance Learning Project, Greenock

Setting

Greenock is an industrial town on the River Clyde, west of Glasgow. Second Chance, which is set within a council estate, is a community centre with many adult education activities. History of informal cookery groups at centre.

Facilities

Designated room for regular crèche. Poorly equipped kitchen corner set in larger room, equipped with tables and chairs.

Recruitment

Project leader used normal recruitment channels e.g. open day to advertise all classes/learning opportunities and word of mouth. Seventeen participants at T1, 15 at T2 and 9 at T3.

Tutor

Local woman, known to participants, with no formal experience or qualifications, but had led informal cookery group. Initial help from Karen Valentine and Linzie Porteous, CPHNR.

Shopping

Carried out on morning of Cookwell class by tutor and participants. Taxi back from shops.

Costs

Kept within budget. Estimate for cost of control group cookery sessions as receipts were not kept.

Comments

Very enthusiastic and helpful project leader who appeared to have good relationship with centre users. Her personal touch seemed to ensure that recruitment went well.

Tutor experienced difficulties calculating weekly food requirements and required help from project leader. Occasionally appeared to have difficulty in completing all cooking activities in given time. Seemed to be unsure of her role (participant or tutor?).

Alloa Area

Due to the small numbers that could be accommodated at the following two locations they were regarded as a joint intervention.

Alloa Child and Family Centre

Setting

The Family Centre is set within a council estate. Alloa itself is suffering from the closure of its main traditional industries, brewing and mining. Cookery groups are regularly held at the Centre.

Facilities

Small kitchen with larger adjoining room for food preparation. Reasonably well equipped. Children cared for within nursery area of Centre.

Recruitment

Staff recruited from clients already using centre. Numbers limited due to size of kitchen, 11 at T1, 10 at T2, 5 at T3.

Tutor

Classes led by member of staff with experience of cookery groups.

Shopping

Food ordered through centre kitchen, which provided meals for children and staff.

Costs

Food costs slightly over budget, probably because some foods ordered through Family Centre kitchen came in catering size packs.

Comments

All the staff were very helpful and enthusiastic. Could probably have recruited more if kitchen had been larger. Staff found food ordering could be complicated as many items came in catering size packs.

Tullibody NCH Project**Setting**

Tullibody is a large village close to Alloa and suffers from the same decline in local employment opportunities. The project was based in a council flat and worked with local, vulnerable families, running drop-in sessions, a crèche and other activities, including occasional cookery sessions.

Facilities

The flat had a small, domestic kitchen where all the cooking took place. The crèche was located in the adjoining living room.

Recruitment

Project staff recruited participants from those already using the NCH project. 6 at T1, 4 at T2, 5 at T3.

Tutor

Linzie Porteous, former CPHNR staff member.

Shopping

By Linzie Porteous.

Costs

Although there were only 2 participants in cookery group, this was an expensive project. Food costs were £6 per person per week, probably because there were no economies of scale and a lot of wastage when cooking for only two. Childcare was expensive as qualified social care or social work staff were used rather than childminders.

Comments

Project staff indicated that their clients were very vulnerable and led unstable lives and could find regular attendance over a 10-week period difficult to maintain. Unfortunately this proved to be true and the intervention group dwindled to only two, very enthusiastic, participants. Staff changes at the project also led to difficulties with recruitment and setting up the intervention.

Chalmers Ardler Child and Family Project, Dundee

Setting

Ardler is a large council housing estate on the outskirts of Dundee. The project is a church organisation, based within Chalmers Ardler church hall. The centre ran a toddler group and other activities for adults.

Facilities

There was a medium-sized, basically equipped kitchen with a commercial range. Children were looked after as part of the toddler group.

Recruitment

The project leader recruited from amongst mothers using the toddler group.

Tutor

Linzie Porteous assisted by a student based at the CPHNR and also a community education student on placement in Ardler.

Shopping

Linzie Porteous or one of the students.

Costs

Stayed within budget. Control group cookery sessions cost not known as yet to take place.

Comments

The intervention group seemed mixed with some quite experienced cooks. Initial enthusiasm from project leader seemed to dim and little help was given with pursuing missing diaries or questionnaires.

Edinburgh

Broomhouse Neighbourhood Centre Community Café (Intervention Group)

Setting

Broomhouse is a council estate in Western Edinburgh. The Community Café, which is open for lunch and snacks five days a week, is also a training kitchen for the unemployed and adults with learning difficulties. The Community Centre also runs several activities such as an after-school club and youth group.

Facilities

A small, but very well-equipped commercial kitchen. The adjoining café area could be used for food preparation if extra space was required and was also used for tasting the finished dishes. A separate room was available for the crèche but this was not required.

Recruitment

The café manager recruited through posters and handouts in the café plus advertisements in the local community newspaper.

Tutor

Karen Valentine, CPHNR.

Shopping

A weekly list was given to the café manager who bought the food while purchasing the café supplies.

Costs

Food costs were over budget at roughly £5 per person per week. This was due to two factors: initially anticipating a larger number of participants; café staff, who did the shopping on our behalf, occasionally purchased greater quantities or more expensive food than was required. The charity that runs the Neighbourhood Centre has a policy of charging for hire of the kitchen and lounge area and, as crèche costs were low, this extra charge did not add significantly to overall costs.

Comments

Although group members did not know each other they bonded well and there was a friendly atmosphere. This may have been due to the small size of the group or because there was time and suitable facilities to sit and enjoy the food together afterwards. Recruitment was difficult as, unlike other projects, this one did not have close contact with a suitable client base. Rather than targeting a specific group or individuals, recruitment materials were aimed at the local Broomhouse community in general. With hindsight, this is probably not very productive as those who most lack skills and confidence in their cooking probably also lack the confidence to approach a project of which they have little or no previous experience. Seven participants turned up at Week 1, although the organiser had anticipated more. By Week 3 there were only 4 participants and, as numbers were so small, it was decided that all participants would be part of the intervention group and a control group would be recruited elsewhere in Edinburgh.

Wester Hailes Health Project (Control Group)

Setting

Wester Hailes is a very large council estate on the south-west side of Edinburgh. The project runs numerous activities and groups and employs a community dietician who organises cookery groups.

Facilities

A small, reasonably well-equipped kitchen with a large hatch/counter opening on to a much larger room with tables and chairs, which could be used for eating together afterwards or extra food preparation space. As no crèche was required we did not enquire about facilities.

Recruitment

The community dietician recruited from clients attending the centre. Most had alcohol, drug or mental health problems. There were 7 participants at T1, 3 at T2 and only 1 completed all the data at T3.

Tutor

Karen Valentine, CPHNR.

Shopping

Karen Valentine

Costs

Food costs kept within budget despite the small numbers, possibly because this project benefited from unused dry goods leftover from previous interventions. As this was the last cookery group a quantity of leftover dry goods, worth approximately £12, was gifted to the Project.

Comments

The high drop-out rate may be due to the severe personal difficulties the clients seemed to have. Only one member of the control group participated in the cookery group, but this was augmented by another client with an interest in cooking and a member of the group from Wester Hailes who had been unable to complete the cookery sessions due to work commitments. Although numbers were very small, the cookery group was felt to have been worthwhile as it appeared to make a big impact on the lives of the participants who were generally very enthusiastic.

Renfrewshire Community Health Initiative, Ferguslie Park, Paisley

Setting

Ferguslie Park, a large council estate, was at one time one of the most deprived areas in Britain. Now it provides a mix of council, housing association and private housing. The Health Initiative co-ordinates many local health projects such as a fruit barrow, child safety equipment scheme and cookery courses. It is based within the Tannahill Centre, a large community centre housing a health centre, library, café, community hall and offices.

Facilities

The cookery sessions were held at the nearby Reid Kerr College in a fully equipped training kitchen. Catering students helped with some of the basic food preparation. A crèche was not required by the participants.

Recruitment

The Health Initiative recruited amongst those already known to them and also used fliers and posters to attract interest from the local area. There were 12 participants at T1, 8 at T2 and 7 at T3.

Tutor

A local experienced cookery tutor, already known to some participants through other cookery groups.

Shopping

All food was purchased through the College.

Costs

Money set aside by the Health Initiative to run a cookery course was used to pay the tutor's fees and to bus participants to Reid Kerr College. The College were keen to collaborate with the University of Dundee and kindly gave free use of their kitchen.

Comments

This group were very forthright in their opinions, and felt too much use was made of tinned tomatoes, and that the recipes were too bland. This was the only group to make this comment and the fact that all participants and the tutor smoked may have some influence on their sense of taste. However, everyone generally seemed to have enjoyed the course. Comments on the venue were very favourable and the tutor appeared to be very competent and popular.

Burnfoot Family Centre, Hawick

Setting

Burnfoot is a large council estate in the Borders town of Hawick. There are many problems in Hawick due to the decline of the local textile industry. The Family Centre works with families experiencing difficulties and provides activities for parents and children and childcare.

Facilities

The majority of the cookery sessions were held in the very well equipped training kitchen at Burnfoot Community School. Due to closures because of school holidays, two sessions were held in the Family Centre that has a domestic-sized kitchen with adjoining dining area that was used for food preparation. Childcare was provided at the Family Centre.

Recruitment

Family Centre workers recruited from clients using the Centre. The CookWell course was also used as a means of enticing vulnerable families in the area, particularly the men, to use the Family Centre. There were 15 participants at T1, 13 at T2 and 12 at T3.

Tutor

Karen Valentine, CPHNR.

Shopping

By Family Centre staff.

Costs

Food costs were kept within budget, although crèche costs were slightly higher than anticipated. However, Family Centre staff did transport participants to and from the cookery group at no cost to us and use of the training kitchen was free of charge.

Comments

This was a particularly successful intervention, with a high retention rate amongst the participants, due mainly to the enthusiasm and hard work of the Family Centre manager, who knocked on doors and phoned people to encourage them to attend. Participants were also picked up and transported to the cookery sessions, which may have helped. An interesting group to work with as many had food intolerances/allergies, one had cerebral palsy and one had problems following written recipes due to learning difficulties.

Kirkcaldy

West Bridge Mill, Linktown (Intervention Group)

Setting

Linktown is one of the most deprived areas of Kirkcaldy with a mix of different types of housing. The housing association within the mill provides flats for young single people, learning support and job search services, offices and meeting rooms.

Facilities

The cookery sessions were held within the large commercial kitchen in the mill. This was originally intended to be a café for tenants but has never been used as such. Crèche workers were provided by Linktown Community Centre and the crèche was held initially within the mill, but later at the community centre.

Recruitment

Through posters and fliers in the mill and surrounding shops and also the community education worker at Linktown Action Centre, who targeted young mums attending the toddler group. A local health visitor also tried to recruit from amongst her clients. Although 10 people attended Week 1, half had withdrawn by the following week and so it was decided, due to the small numbers, that these 5 would form the intervention group and a control group would be recruited elsewhere in Kirkcaldy. The 5 remaining participants were retained for T2 and T3.

Tutor

Karen Valentine, CPHNR.

Shopping

Karen Valentine

Costs

As participants had a 10-minute walk between the crèche location and the mill, crèche staff had to be employed for longer which raised costs slightly.

Comments

There were severe recruitment problems with this intervention. Despite initial enthusiasm, our contact at the Mill seemed to lose interest very quickly and delegated responsibility for recruitment to the secretary. As recruitment was not progressing well we contacted the local Linktown Action Centre and the community education worker there helped organise crèche workers and, by Christmas, had recruited a large number of participants. However, by the New Year, the worker had been suspended from his post, was not replaced and we lost touch with approximately half the possible participants. We may not have targeted those in greatest need as the free bag of ingredients was occasionally turned down by some participants.

Home Start, Kirkcaldy (Control Group)**Setting**

Homestart is a national charity which provides friendship and support for parents who are experiencing difficulties. The Kirkcaldy branch provides a meeting room for parents and a crèche.

Facilities

Data collection took place in the meeting room at Homestart. The cookery course was also held in the kitchen at West Bridge Mill. Children were looked after in the crèche and participants were transported to and from the Mill by bus.

Recruitment

Homestart workers recruited by word of mouth amongst young mothers attending a weekly group. There were 6 participants at T1, 5 at T2 and 4 at T3.

Tutor

Karen Valentine, CPHNR.

Shopping

Karen Valentine.

Costs

As Homestart normally provided a crèche for this group they kindly did not charge us for this service, or for transporting participants to and from the cookery sessions.

Comments

Many of the participants seemed to find regular attendance at the cookery sessions difficult, but all seemed to thoroughly enjoy the sessions and the finished dishes were often eaten on the bus back to Homestart. Most seemed to be quite inexperienced but the classes built up their confidence and they took pride in showing finished results to families and partners. Unfortunately, because a lot of time was taken up transporting participants from their homes to Homestart and then again to the Mill, there was only one hour for cooking, so a shortened version of the CookWell course was used.

Addiewell Community House, Addiewell, West Lothian

Setting

Addiewell is former mining village that suffers from a lack of employment opportunities, poor shopping facilities and limited public transport. The Community House operates as a drop-in centre with the local councillor, health visitor and housing office all holding weekly clinics. In addition there are also youth groups and other occasional activities.

Facilities

The Community House is a “4 in a block” type council flat. It has a small domestic kitchen with limited work space. The adjoining lounge area or another room were used to accommodate the crèche.

Recruitment

Initial contact was with the Health Development Officer for West Lothian who enlisted a local health visitor to recruit from her clients. Posters were also sent to the Community House. There were 11 participants at T1, 8 at T2 and 5 at T3.

Tutor

Christine Hamilton, a local lay health worker, paid for by West Lothian council. Had considerable experience working voluntarily with local food co-op and fruit tuck shops, but no experience of tutoring a cookery group.

Shopping

By Christine Hamilton at supermarkets and local food co-op. Purchasing from co-op enabled it to stock new lines.

Costs

The costs for the control group cookery sessions and crèche are an estimate as we had not received an invoice at the time of writing this report.

Comments

Using the local health visitor seemed to be a good way of promoting the intervention. Tutor was very enthusiastic and appeared to relate well to participants. Also produced excellent evaluation notes on her own initiative. Participants were also very enthusiastic and many informally reported positive changes to cooking and eating habits in their families. There was also a positive response from local health workers and a desire from local community to see cookery and/or other activities continue. Group preferred to take £30 IKEA voucher each instead cooking gift pack and a trip by mini bus to IKEA was arranged.

CookWell Cookery Group Costs

Location	N =	Food Costs	Creche	Room Hire	Equipment	KV Travel	LP Travel	KV Wages	LP Wages	Cookery Books	
Greenock 1	10	240	200								
Greenock2	9	256									
Alloa 1	5	155.93									
Alloa 2	4	142.62									
Tullibody 1	2	84.64	564								
Ardler 1	7	156.57									
Ardler 2	7	157									
Kirkcaldy 1	6	163.52	275								
Kirkcaldy 2	7	112.47									
Hawick 1	10	252.18	300								
Hawick 2	6	169.51	306								
Broomhouse	3	104.22	42.56	260							
Wester Hailes	3	84.28									
Addiewell 1	6	154.78	200								
Addiewell 2	6	155	200								
Ferguslie 1	8	224									
Ferguslie 2	8	224									
Total	107	2836.72	2087.56	260	2335.92	1452.25	712.95	4176	1392	1847.67	
Grand Total											<u>17,101.07</u>

Appendix 23.

Table 1 Comparison of the cost of CookWell recipes (2 portions) with raw ingredients from Tesco and Asda and with ready-meals from both these supermarkets.

	£ for 2 portions			
Recipe	Cost to make - Tesco	Cost to make - Asda	Ready-meal equivalent - Tesco	Ready-meal equivalent - Asda
Tuna Pasta Bake	£1.25	£1.31	£2.58	£2.58
Cauliflower Cheese	£0.67	£0.66	£1.98	£2.76
Tomato and Lentil Soup	£0.42	£0.42	£0.41	£0.41
Scones	£0.04	£0.06	£0.38	£0.30
Mince and Tomato Sauce	£0.62	£0.59	£1.49	£0.42
Mince Pasta Bake	£0.62	£0.63	£1.50	£1.99
Meatballs and Tomato Sauce	£0.80	£0.75	£0.24	£0.24
Chilli con Carne	£0.90	£0.83	£1.99	£1.99
Tomato Sauce	£0.40	£0.31	£0.44	£0.44
Bacon and Tomato Risotto	£2.22	£1.45	£1.99	N/A
Gammon and Pineapple Risotto	£2.66	£2.34	N/A	N/A
Smoked Mackerel Kedgeree	£2.31	£1.83	N/A	N/A
Chinese Style Egg Rice	£1.00	£0.91	N/A	N/A
Pizzas	£0.41	£0.36	£0.49	£0.49
Coleslaw	£0.34	£0.33	£0.32	£0.22
Scone-based Pizza	£0.78	£0.72	N/A	N/A
Chickpea and Pineapple Curry	£0.44	£0.66	£1.99	£1.96
Chicken Curry	£2.02	£2.12	£1.99	£1.96
Chicken Casserole	£1.41	£1.31	£1.33	£1.33
Rice and Peas	£0.25	£0.32	N/A	N/A
Potato Wedges	£0.36	£0.16	£0.36	£0.32