

## **Experiences of the food environment and the role of the 'routine' in producing food practices: an ethnography of Sandwell residents**

Thompson, Claire Pilar

The copyright of this thesis rests with the author and no quotation from it or information derived from it may be published without the prior written consent of the author

For additional information about this publication click this link.

<http://qmro.qmul.ac.uk/jspui/handle/123456789/3178>

Information about this research object was correct at the time of download; we occasionally make corrections to records, please therefore check the published record when citing. For more information contact [scholarlycommunications@qmul.ac.uk](mailto:scholarlycommunications@qmul.ac.uk)

**Experiences of the food environment and  
the role of the ‘routine’ in producing  
food practices: an ethnography of  
Sandwell residents**

**Claire Pilar Thompson**

**Doctor of Philosophy**

**School of Geography**

**Queen Mary, University of London**

**2012**

# Abstract

Despite a sustained academic interest in food environments and their impact upon dietary practices, relatively little is known about the ways in which individuals interact with the food environment. The multiple and complex factors that influence food choices are difficult to investigate, especially in the family setting where individual and collective practices intersect. This thesis investigates how people perform food practices and unpacks how specific contexts shape, promote and constrain food behaviours. The case study through which this is examined is that of the food practices of 26 residents of Sandwell, a uniformly deprived metropolitan borough in the West Midlands. Through ethnographically collecting accounts and observations of how residents performed food practices, both in the home and while shopping for food, highly routinized behaviours were revealed. The notion of routinized decision making, as it appears in social science research, is developed and adapted to incorporate descriptions of general approaches to routine food behaviours. The novel concept of routines-of-practice is employed to characterise these routines in terms of agency, attitudes towards individualism, and reliance on environmental and contextual cues.

Food shopping practices are positioned, to an extent, as acts of consumerism performed in the pervasive consumption environment of the supermarket. The home, by contrast, was depicted as a site of both privacy and responsibility. The ways in which responsibility was interpreted and enacted dictated how family meals and routine home food behaviours were structured. By looking at food practices in terms of repetitive, context specific and often uncritical behaviours, this thesis highlights the importance of place in moulding food practices. Understanding how people interact and interpret their environment has been underestimated in diet-related health policy and promotion. This thesis specifically examines the way food practices are influenced by environment and context at the micro level.

# Acknowledgements

Thank you, most of all, to my supervisors: Steve Cummins, Tim Brown and Rosemary Kyle. They took a massive chance on me at the beginning of this PhD and have consistently been helpful, supportive and more understanding than I could have hoped for. I would also like to thank Angela Blair for giving me a home in Bearwood and for helping me so much with my fieldwork. Sandwell food team were very accommodating and should be mentioned for all the advice, contacts and help they gave me.

I would also like to declare my appreciation to all the friends I have made at Queen Mary for their encouragement. My thanks to (in alphabetical order): Camille Aznar, Claire Boston, Amanda Fahy, Amanda Ferguson, Mara Ferreri, Steffan Fischer, Ellen Flint, Denise Goodwin, Michael Grayer, Beth Greenhough, Kate Hardy, Marcus Hatch, Tim Heinemann, Rashed Khandker, Dan Lewis (especially for the map), Fiona Mapp, Jenny Murray, Evelyn Owen, Eilidh Reid, Elena Sautkina, Natalie Savona, James Scott, Olivia Sheringham, Lucy Shuker, Dianna Smith, Neil Smith, Mark Tarplee and Vanathi Tharmaratnam.

My parents, John and Sheila Salter, have been indiscriminately proud and supportive, whatever I have been doing, thank you. Thank you also to Daniel Rowan, for your patience and the endless cups of tea. And, finally, to my friends: Linda Glass, Louise Fritz, Sarah O'Connell, Adam Murphy and Esther McKnight, for nodding in all the right places.

# Contents

<b>Chapter 1: Introduction</b>	13
1.1 Background	13
1.2 ESRC CASE partner: Sandwell PCT	14
1.3 Chapters and coverage	15
<b>Chapter 2: Literature Review: Situating food practices: the physical environment and socio-cultural contexts</b>	18
2.1 Overview	18
2.2 Health, place and food	20
2.2.1 Environmental determinants of diet	22
2.2.2 Defining and measuring the food environment	24
2.2.3 Health Geography, the cultural turn and rethinking place	25
2.2.3.1 The challenges of defining and measuring ‘place’	27
2.2.3.2 Re-working the composition / context debate	28
2.2.3.3 Methodological developments	31
2.2.3.4 Summary	33
2.3 Food shopping: the food environment as a consumption space	33
2.3.1 Geographies of retail and consumption	34
2.3.2 Shopping as a social practice	36
2.3.3 Theorising mundane consumption activities	39
2.3.3.1 Summary	40
2.4 Home and family eating practices	40
2.4.1 Families and mealtimes	42
2.4.2 Food, identity and belonging	46
2.4.2.1 Summary	48
	4

2.5 Summary and research aims	49
<b>Chapter 3: Methodology: Symbolic Interactionist Ethnography: exploring food practices in context</b>	<b>52</b>
3.1 Overview	52
3.2 Symbolic interactionist ethnography: theoretical background	54
3.3 The research site: Sandwell – population and health profile	56
3.3.1 Context	57
3.3.2 Sampling sites	59
3.3.2.1 West Bromwich	61
3.3.2.2 Smethwick	61
3.3.2.3 Rationale	62
3.4 Sampling	63
3.4.1 Sampling approach	63
3.4.2 Recruitment	64
3.4.3 The sample	71
3.4.4 Reflexivity and positionality	76
3.5 Data Collection	79
3.5.1 Photovoice	79
3.5.2 Narrative photovoice interviews	84
3.5.3 Go-along interviews	87
3.5.4 Piloting and development	92
3.6 Data Analysis	96
3.6.1 Applying a thematic analysis	96
3.6.2 Stages of data organisation and analysis	100
3.6.2.1 Transcription	100
3.6.2.2 Themes	105
3.6.2.3 Patterns and coding	106
3.6.2.4 CAQDAS: NVivo9	109

3.7 Ethics and informed consent	112
3.7.1 Confidentiality and data storage	114
3.7.2 Exploitation and vulnerable individuals	116
3.8 Summary	117
<b>Chapter 4: Collecting data in Sandwell</b>	<b>118</b>
4.1 Overview	118
4.2 An economic and retail overview of Sandwell	119
4.2.1 The West Midlands	119
4.2.2 Sandwell	121
4.3 Sandwell food environment	122
4.4 Interactions with the Sandwell food environment	127
4.4.1 ‘Eat in’ and ‘take away’ spaces	129
4.4.1.1 Eat-in spaces as social spaces	131
4.4.1.2 Breaking dietary restrictions in social spaces	135
4.4.1.3 Context specific eating practices	139
4.4.2 ‘Local’ shops	140
4.4.3 Supermarkets	143
4.4.4 Discount Stores	145
4.5 Summary	148
<b>Chapter 5: Shopping for food: perceptions of supermarkets and routines-of -practice therein</b>	<b>150</b>
5.1 Overview	150
5.2 The context-specific norms of supermarkets	152
5.2.1 Expectations of an extended range of choice	152
5.2.2 Price promotions	155

5.3 Understanding behaviour in the supermarket: routines-of-practice for food shopping	159
5.3.1 ‘Chaotic and reactive’	164
5.3.2 ‘Price promotion’	171
5.3.3 ‘Working around the store’	180
5.3.4 ‘Item by item’	184
5.3.5 ‘Restricted and budgeted’	187
5.4 Summary	194

**Chapter 6: Routines-of-practice in the home and food related identities** 196

6.1 Overview	196
6.2 Home and privacy	198
6.3 Understanding behaviour in the home: routines-of-practice for cooking and eating	206
6.3.1 ‘Erratic’	208
6.3.2 ‘What we fancy’	216
6.3.3 ‘Regulated meals’	224
6.4 Identity and eating practices	233
6.4.1 ‘Fussy Eaters’	235
6.4.2 ‘Healthy Eaters’	242
6.5 Summary	250

**Chapter 7: The contextual pressures of consumption and home spaces** 252

7.1 Overview	252
7.2 Summary of food related routines-of-practice and identities	254



7.3 Consumption spaces	256
7.3.1 Shopping for leisure and pleasure	257
7.3.2 Identity and the consumption space	261
7.4 Home	264
7.4.1 Responsibility and regulation	265
7.4.2 Responsibility and individuality	270
7.5 Comparing behaviour across the contexts of home and the supermarket	274
7.6 Summary	287
<b>Chapter 8: Conclusion</b>	<b>289</b>
8.1 How do people perceive and interact with the food environment?	290
8.2 How are routine food behaviours performed in, and shaped by, specific contexts?	292
8.3 How do food related practices and identities interrelate across home and food shopping spaces?	298
8.4 Summary of key findings	300
8.5 Study limitations	301
8.6 Implications for policy and research	303
<b>Bibliography</b>	<b>307</b>

# Appendices

3.1 Recruitment materials	337
a) Poster for display	337
b) Information sheet with return-slip for study participation	338
3.2 Participant pack	339
3.3 Photovoice interview schedule	346
3.4 Photo sheet	348
3.5 Go-along procedure and interview schedule	349
3.6 Ethical approval	351
3.7 Informed consent form	352
3.8 Photovoice consent form	353
3.9 Risk assessment	355

# List of figures

Figure 3.1 UK and West Midlands map	57
Figure 3.2 Sandwell Metropolitan Borough map – by town and ward	60
Figure 3.3 Praktica DC Slim 315 (digital camera)	80
Figure 3.4 Vivitar ViviCam 5018 (digital camera)	80
Figure 3.5 Coding and sub codes for the ‘built environment’	107
Figure 3.6 Reproduction of extract from research diary	108
Figure 3.7 ‘Shopping Strategies’ code and sub codes	109
Figure 3.8 Screen-shot from NVivo illustrating its ‘code and retrieve’ capabilities	111
Figure 4.1 Access by walking to locations selling healthy food in Sandwell Metropolitan Borough Council (map)	124
Figure 5.1 Routines-of-practice adopted when shopping for food in supermarkets	163
Figure 6.1 Routines-of-practice adopted for home cooking and eating behaviours	208

## List of tables

Table 3.1 Participant pseudonyms and social characteristics	72
Table 4.1 Types, names, locations and frequencies of sites visited for go-along interviews	128
Table 4.2 Names, locations and number of visits to eat-in spaces in which photovoice interviews were conducted	130
Table 7.1 Summary of food related routines-of-practice and identities	254

## List of plates

Plate 3.1 Photograph by Lawrence from his food photo-diary	83
Plate 3.2 Photograph by Collete from her food photo-diary	104
Plate 4.1 Photograph of Great Bridge Asda (by CT)	126
Plate 4.2 Photograph of Oldbury SavaCentre (by CT)	127
Plate 4.3 Photograph by Janet from her food photo-diary	135
Plate 4.4 Photograph by Pat from her food photo-diary	135
Plates 5.1 and 5.2 Photographs of special offer displays in Great Bridge Asda (by CT)	157
Plate 5.3 Photograph of special offer display in Cape Hill Asda (by CT)	157
Plate 5.4 Photograph of 'Roll Back' promotion in Cape Hill Asda (by CT).	158
Plate 5.5 Photograph of Dairylea Dunkers display (by CT)	176
Plate 5.6 Photograph of Super Noodles display (by CT)	178
Plate 5.7 Photograph of Activia yoghurt (by CT)	189
Plates 5.8 and 5.9 Photographs of Simon with his mobile phone and Hollie with a pack of onions (by CT)	192

Plates 6.1 and 6.2 Photographs by Sue from her food photo-diary	200
Plate 6.3 Photograph by Jayanti from her food photo-diary	201
Plate 6.4 Photograph by Lauren from her food photo-diary	202
Plates 6.5, 6.6 and 6.7 Photographs by Adam from his food photo-diary	204
Plate 6.8 Photograph by Lauren from her food photo-diary	209
Plate 6.9 Photograph by Pamela from her food photo-diary	212
Plate 6.10 Photograph by Pamela from her food photo-diary	213
Plate 6.11 Photograph by Adam from his food photo-diary	214
Plate 6.12 Photograph by Adam from his food photo-diary	215
Plate 6.13 Photograph by Collete from her food photo-diary	222
Plate 6.14 Photograph by June from her food photo-diary	230
Plate 6.15 Photograph by Clifton from his food photo-diary	231
Plates 6.16, 6.17 and 6.18 Photographs by Dave from his food photo-diary	233
Plate 6.19 Photograph of Diane's unfinished meal (by CT)	237
Plates 7.1 and 7.2 Photographs by Adam from his food photo-diary	260
Plates 7.3 and 7.4 Photographs of soya milk displays (by CT)	263
Plate 7.5 Photograph of 'free-from' aisle (by CT)	283

# Acronyms

CAQDAS	Computer Assisted Qualitative Data Analysis Software
CT	Claire Thompson (Author)
CCRI	Countryside and Community Research Institute
DoH	Department of Health
EFILWC	European Foundation for the Improvement of Living and Working Conditions
GIS	Geographic Information Systems
IDeA	Improvement and Development Agency
JSNA	Joint Strategic Needs Assessment
MBC	Metropolitan Borough Council
NHS	National Health Service
PCT	Primary Care Trust
QMREC	Queen Mary Research Ethics Committee
RUHBC	Research Unit in Health Behaviour and Change
UK	United Kingdom
US	United States
USA	United States of America
WHO	World Health Organisation
WMRO	West Midlands Regional Observatory
WMPHO	West Midlands Public Health Observatory

# Chapter 1: Introduction

## 1.1 Background

Bell and Valentine (1997) define food consumption practices as the commonplace domestic activities of food shopping, cooking and eating (Bell and Valentine 1997). These activities have been studied in a variety of ways across a range of disciplines, but in public health and the social sciences, food practices are both health behaviours and cultural practices

‘Unhealthy’ food choices are not simply the product of prejudice or ignorance, they are structured and sustained by a complex array of influences that are mostly social in nature (Gustafsson and Draper 2009). Public health promotion policies in this area have tended to concentrate almost exclusively on educating people about both the benefits of healthy eating and the links between poor diet and health problems. This approach adheres to the dominant individually focused models of behaviour that operate within public health studies (Sallis and Glanz 2009). To a degree these policies have been successful, in that public understanding of health-promoting messages is high (Donnelly et al. 1996, Zehle et al. 2007). However, the prevalence of diet-related conditions such as obesity and cardiovascular disease continues to rise. UK adult obesity rates have almost quadrupled in the last 25 years, and childhood obesity has tripled in the last 20 years (NHS 16.01.08). Simplistic policy solutions that only address the problem in the short term, and at the individual level, fail to consider people’s lives and behaviours in the contexts in which they are situated (Banwell et al. 2005). Investigating how specific contexts shape shopping, cooking and eating behaviours is fundamental to understanding how food practices are formed and deployed. Further, this could help highlight contextual influences that run counter to and undermine diet interventions and education programmes.

Facilitating changes to ingrained food behaviours requires more than education and advice. The food environment has been identified as a powerful and independent determinant of food behaviour (Mikkelsen 2011). Equally, the home and family food environment has long been recognised as instrumental in shaping life-long dietary values and habits (Birch and Davidson 2001). This thesis will examine food practices in the neighbourhood food environment and the home in order to better understand the situated nature of these practices and the contextual factors that influence them.

This study takes a wholly qualitative approach. A symbolic interactionist ethnography was carried out in order to explore and describe the food practices of a diverse range of participants. Photovoice, semi-structured interviews, and go-along interviews were conducted and the data analysed thematically to uncover the values, interactions and identities that underpin context specific food practices.

## **1.2 ESRC CASE partner: Sandwell PCT**

This research has been funded by the Economic and Social Research Council (ESRC) under the ESRC PhD CASE Studentship scheme. ‘CASE’ stands for Collaborative Awards in Science and Engineering. These schemes provide the student and host university (Queen Mary, University of London) with a link to a non-academic collaborating organisation from the public, private or voluntary sector, in this instance Sandwell Primary Care Trust (PCT). The aim is to make the PhD research of applied relevance (CCRI 2011). An ‘industrial supervisor’ representing the collaborating organisation sits on the PhD supervision team.

Sandwell PCT, the CASE partner, administers to the metropolitan borough of Sandwell, which covers a geographical area of 85.58 km<sup>2</sup> and has a population of approximately 292,800 (Sandwell PCT 2010b). Sandwell is the

12<sup>th</sup> most deprived local authority in England (Sandwell PCT 2010b, Black Country Consortium 2011b). Sandwell PCT faces a variety of health challenges commonly associated with deprived areas such as higher levels of smoking, teenage pregnancy, physical inactivity and obesity. The PCT is responsible for commissioning primary, community and secondary care from providers. It is also responsible for commissioning hospital and mental health services and, until 31<sup>st</sup> May 2011, provided community services directly. As a result of legislation brought in after the 2010 election, most significantly the Health and Social Care Bill (2011), the delivery and funding of local health services was fundamentally restructured (DoH 2011). The four PCTs in the Black Country area (Sandwell, Dudley, Walsall and Wolverhampton) were brought together under a single management structure: the Black Country Cluster. The Health and Social Care Bill gained Royal Assent in March 2012 to become the Health and Social Care Act (2012).

All fieldwork was carried out in Sandwell, West Midlands, from January to July 2010 and all participants were Sandwell residents. Sandwell PCT community workers and Food Team provided introductions and contacts in the local community to help recruit participants. PCT staff were also instrumental in helping to access a variety of gatekeepers and a diverse research sample in a relatively short space of time.

### **1.3 Chapters and coverage**

This thesis opens with a critical review of literature relevant to food practices. Chapter two traces the development of research on food environments and argues, in section 2.3, that shopping for food is an act of material consumption and that the food environment is also a consumption environment. The chapter



moves on to look at food practices in the home, with an emphasis on family meals and identity.

Chapter three explains the theoretical and technical aspects of the methodology. This qualitative study is underpinned by a symbolic interactionist approach, a theoretical stance that assumes the social world to be performed by the active intelligence and agency of its participants (Rock 2001, Charmaz 2006). An overview of Sandwell and its population is provided. The core methods of photovoice and go-along interviews are then described in detail. Lastly, an outline of my analytical approach and treatment of ethical issues is given.

Chapter four gives a detailed description of the Sandwell food environment and provides empirical data on how participants of this study perceived, used and experienced it.

Chapter five deals explicitly with perceptions of supermarkets, as micro food environments, and with the behaviours that participants deployed when shopping for food. Observational and interview data are used to depict food shopping as a practice. The notion of routines-of-practice is also introduced in this chapter, referring to the habitual and often tacit ways in which individuals interact with their environment and perform social practices, in this case food shopping.

Chapter six focuses specifically on perceptions of the home and with the food practices performed within it. Using the notion of routines-of-practice, introduced in chapter five, approaches to cooking and eating at the household level are characterised and differentiated according to levels of individual agency, choice and responsibility. Lastly, the ways in which food practices were intertwined with food related identities are addressed.

Chapter seven is the last of the empirical chapters. It brings the contexts of the consumption space and the home into focus. The chapter begins with a summary

and comparison of participants' food routines-of-practice across these contexts. The specific influences that these two environments have on food behaviours is then explored and contrasted.

Chapter eight concludes the thesis. It summarises the main findings in terms of food shopping spaces, food behaviours in the home, the importance of context and, lastly, the application of routines-of-practice to theorising food behaviours.

## **Chapter 2: Literature Review**

### **Situating food practices: the physical environment and socio-cultural contexts**

#### **2.1 Overview**

Food practices and decision making about food do not occur in a vacuum, they are situated physically, economically and socially. The factors that shape and influence food and diet-related practices have been investigated and theorised across a range of disciplines. This review draws upon diverse bodies of literature that, in a variety of ways, address food practices and the environments and contexts in which they are performed, with an explicit focus on food shopping and on food practices in the home. Food environments research chiefly examines the built environment in which individuals use food resources and consume food. Within this literature there is a growing interest in understanding the role of the neighbourhood food environment in determining dietary practices (Wang et al. 2006). Epidemiological research has investigated place effects on health in relation to diet and diet related disorders. In fact, there is a shared concern across health related disciplines with studying the nature and influence of the food environment, and in doing so to understand how people, place and food interact to shape food behaviours (Mikkelsen 2011). This literature has been both challenged and enhanced by a more culturally informed and critical theorising of place that has begun to incorporate non-physical and social aspects of the food environment. It will be argued that these studies, despite achieving a more nuanced interpretation of place, still reveal very little about actual behaviours within food environments.

In order to address the lack of public health research on how individuals interact with the food environment, the review will consider insights from the

social science literature on consumption by theorising the practice of food shopping as an act of consumption. By implication, the food environment must also be considered as a consumption environment. Since the mid-1980s there has been rapid growth in the study of consumption practice (Jackson and Holbrook 1995). This research shows that in-store decision making around food purchasing is a complex activity and that theorising it as a linear and rational process is unhelpful in understanding consumption behaviours (Gram 2010). Food shopping is more than a routine mundane domestic task; it is a complex, multi-layered and situated activity and, as such, individuals cannot be expected to behave in uniform ways within similar food environments. Food shopping can therefore be viewed as a social practice, and not an impersonal and rational activity (Jackson and Holbrook 1995, Jackson et al. 2006). While there is a wealth of marketing and consumer studies research on shopping, there is little observational and ethnographic research and even less so on food shopping in supermarkets (Gram 2010).

Lastly, the review will move away from literature on food shopping and food environments to consider food practices in the home. Food behaviours in the domestic environment have been the subject of a significant body of work within sociology and anthropology (Valentine 1999b). Although people are now eating more meals away from home and convenience foods are becoming increasingly popular, the home remains the site where most communal meals are consumed, and has significant cultural and symbolic meaning (Devine et al. 2009). As with food environments research, it is the more culturally informed and critical studies that offer insights into the complex and often contradictory array of negotiations and compromises that are enacted in family settings. Within social settings, and especially within families, individuals take up and develop food related identities. These identities have implications for the way food practices are perceived and performed across contexts. The study of food related identities and practices has developed beyond essentialised or static notions based on social differences, such as class and gender, and onto more

fluid and context specific explanations (Warin et al. 2008). Rather than examining food related behaviours in isolation, this literature situates them in the context of daily routines, constraints, and competing demands.

Overall, this review identifies food stores (especially supermarkets) and the home as the two most fundamental contexts in which food practices are performed. Specifically, shopping for food in the supermarket and preparing and consuming food in the home. The lack of epidemiological studies that investigate the act of food shopping, as a key pathway, is highlighted and addressed with reference to social science literature that deals explicitly with the situated practice of shopping. Food practices in the home are examined in relation to how family meals are enacted and the role of food related identities in shaping and interpreting practice.

## **2.2 Health, place and food**

The relationship between health and place is an extensively studied topic in health inequalities research. Epidemiological research generates most of this literature, with an emphasis on how environmental factors influence health risks in populations (Von Korff et al. 1992). The rise in obesity prevalence in recent decades has heightened academic and health policy interest in food environments as a contributing factor, especially given their potential impact on food related behaviours and resulting health outcomes (McKinnon et al. 2009). Health problems associated with this condition are multiple, debilitating and expensive to treat. These include hypertension, high blood cholesterol, type 2 diabetes, congestive heart failure, heart disease, stroke, osteoarthritis, some types of cancer, poor female reproductive health and psychological disorders such as depression and low self-esteem. This research is informed by two related

theoretical models: the deprivation amplification model and the context / composition model.

The deprivation amplification model rests on the assumption that individual or household deprivation is amplified by area level deprivation (Macintyre 2007). Accessibility to services and facilities and, in particular, to healthy food, is an important social equity issue (Charreire et al. 2010). People who live in poor areas are trapped in a cycle that reproduces the health inequalities they suffer. For example, health promotion advice is differentially taken up by different socioeconomic groups; those with higher income and/or education levels are more likely to have healthy lifestyles and follow health advice than lower income and/or less educated people (Macintyre 2000). Poorer people have access to relatively poorer quality resources, which amplifies risk at the level of the individual. Since the 1990s, a growing body of literature has supported and utilised this conceptual model; in which lack of community resources amplifies individual health inequalities (Macintyre 2007).

The context / composition model is a way of explaining geographical inequalities in health. A compositional explanation assumes that areas are unhealthy as they contain a higher percentage of individuals who are at risk of ill health than those in healthy areas. By contrast, a contextual explanation for health inequality assumes that it is the characteristics and features of the *physical setting*, rather than the demographic characteristics of its inhabitants, that raise the risk of ill health (Shaw et al. 2002). Most empirical research shows that who you are (composition) is the main predictor of health, but also that where you live is important (Shaw et al. 2002). Looking to the food environment to help explain dietary practices and outcomes is, by definition, adopting a contextual approach to understand health inequalities.

### **2.2.1 Environmental determinants of diet**

Food and dietary practices and the environments in which they occur have been examined in relation to diet-related health outcomes, particularly obesity and cardiovascular disease. Research investigating the role of the neighbourhood social and physical environment in determining diet quality has become progressively important in recent years (McKinnon et al. 2009, Charreire et al. 2010). Neighbourhood-level characteristics investigated in relation to diet include food availability, access and price; area socio-economic status; racial composition; physical activity resources; housing, and safety and convenience (Black and Macinko 2008). The term 'food environment', although open to some interpretation, is broadly taken to mean the local built environment in which individuals consume food. This includes food resources such as food stores, restaurants, take aways, schools, work places, and cafeterias (McKinnon et al. 2009).

The neighbourhood food environment has often been operationally defined by density of, and accessibility to, these various types of food outlets, which are used to indicate the types of food related structural resources that are readily available within a neighbourhood. The idea that these food environments can be a determinant of food behaviour has been introduced and perpetuated through a rising number of health-behaviour theories. Most explicitly, this is apparent in the concept of obesogenic environments (Mikkelsen 2011). The concept positions obesity as a normal response to a pathological environment, specifically one that promotes obesity in individuals or populations (Swinburn and Egger 2002)

Much of this work has been undertaken in the USA and has demonstrated that neighbourhood availability of components of a healthy diet may be an important mediating factor between neighbourhood deprivation and diet quality (Morland et al. 2002a, Zenk et al. 2005, Zenk et al. 2006). The most consistent

US findings come from those studies that investigate race / ethnicity as an axis of spatial difference (Abercrombie et al. 2008, Borrell et al. 2006, Do et al. 2008, Echeverria et al. 2008, Franco et al. 2008, Henderson et al. 2005, Moore et al. 2008b, Moore and Diez Roux 2006, Morland et al. 2002b, Cooper et al. 2001). In the UK context, by contrast, findings on the food environment are less clear-cut and consistent. Nevertheless, some studies have shown that food consumption varies between UK neighbourhoods and that living in a disadvantaged neighbourhood may be independently associated with poor diet (Anderson and Hunt 1992, Forsyth et al. 1994, Shohaimi et al. 2004).

The health and dietary inequalities reported in these studies broadly conform to the deprivation amplification model. Accessibility and availability to food resources can be partly determined by the socio-economic status of the area. For example, Cummins and colleagues (2005d) examined the association between neighbourhood deprivation and the density of McDonald's restaurants in small areas of the UK. They found statistically significant positive associations between neighbourhood deprivation and the density (per capita) of McDonald's restaurants (Cummins et al. 2005d). However, a similar UK study undertaken in the same year examined non-chain eating outlets and found no association between area deprivation and food outlet density (Macintyre et al. 2005). Evidently, there is a difference, in the UK context, in the distribution and density of chain and non-chain outlets in deprived areas, thus demonstrating the complexities of theorising and investigating the food environment.

In addition to these studies there is another body of literature that examines specific, smaller-scale and non-residential contexts as contained food environments. By way of illustration, French and colleagues investigated 20 Minnesota secondary schools as food environments. They analysed school food availability and school policies on food. This included the nutritional content of foods both served at the schools and those available from the vending machines (French et al. 2003). School-study findings indicate that school environments



are not conducive to healthy food choices, with less healthy options dominating food sales (Carter and Swinburn 2004). Suggested interventions include healthy eating education, free provision of fruit, price reductions on healthy foods, mandatory restrictions on unhealthy foods, restrictions on students leaving school for lunch and banning the sale of soft drinks (Wilson et al. 2007, French et al. 2003). These proposed interventions do not aim primarily to increase healthy and informed choices. Instead, they aim to modify behaviour by eliminating unhealthy choices and increasing control and regulation of the school environment. It is interesting to see that potentially draconian policies to reduce choice are presented as suitable for children, but would likely face strong opposition if proposed for adults.

Although work places have been investigated as food environments (Wanjenk 2005, Balfour et al. 1996, Roos et al. 2004) and, to a lesser extent, shopping mall food courts and restaurants (Wansink 2004), schools remain by far the most popular sites for these studies. Schools are depicted as almost quasi eco-systems with food availability and behaviours of more concern than physical activity factors. Although these studies identify potential ecological influences on eating behaviour they do not tackle topics of culture and identity that help govern children's food behaviours in the context of school.

### **2.2.2 Defining and measuring the food environment**

The food environment, as it appears in larger-scale area level studies, is typically presented in geometric terms as a geographically convenient physical setting or area. By far the most common are studies of neighbourhoods as geographically discrete and administratively convenient locations. Although these geometric divisions may be pragmatically, geographically or methodologically convenient, the boundaries of these 'places' are by no means agreed. Macintyre and colleagues (2002) argue that there is a lack of adequate theorisation of place

effects on health. There is certainly a lack of consistency in the way that place has been conceptualised, operationalised and even labelled. Earlier studies, in this vein, describe 'areas' (Mitchell et al. 2000, Shouls et al. 1996, Stafford et al. 2001), and discuss these 'areas' in almost exclusively geometric terms. Later research uses the terms 'neighbourhood' and 'place' (Auchincloss et al. 2007, Batty et al. 2007, Diez Roux et al. 2004, Ellaway et al. 2007), to refer to a geographically convenient area such as an administrative, electoral or post code region (Cutchin 2007).

These definitions are often used interchangeably. However, there are subtle differences in meaning. The adoption of 'neighbourhood' and 'place' accompanies a gradual inclusion of some socio-cultural considerations in theorising place. A 'neighbourhood' implies more than a geometric area; it may also be a community. These studies are increasingly considering social capital features of neighbourhoods, alongside their geometric boundaries and physical characteristics (Araya et al. 2006, Ellaway et al. 2001, Fone et al. 2007). Despite these developments, Cutchin (2007) argues that much epidemiological research still does not conceptualise place with sufficient rigour and continues to lack nuanced and complex theories of place.

### **2.2.3 Health Geography, the cultural turn and rethinking place**

The challenges of defining, conceptualising and measuring 'place' in relation to the food environment have been further complicated by the rising influence of post-structuralist theory. Broadly, post-structuralism represents a rejection of structuralist social theories and a challenge to the dominant regime of meaning (Hebdige 1988). It is important to note that post-structuralism does not represent one unified theoretical approach, there are a variety of discipline-specific interpretations and divides. However, these strands are united by a conviction

that human experience and knowledge are socially constructed and that meanings can never be entirely fixed or essentialised. Meaning is created by individuals as they experience and interpret the world. There is no ultimate 'reality' or 'truth' to discover, only constructions and interpretations that are multiple and fluid (Hebdige 1988). The social sciences have been profoundly affected by post-structuralist theories. Most notably, these theories have served to destabilise taken-for granted meanings and generalisations (Murdoch 2005). Place and identity, for example, are socially constructed, which means they can be destabilised, challenged and deconstructed.

One of the most apparent and influential ways in which post-structuralism has permeated social theory in the last 30 years is through the cultural turn; the epistemological revolution that changed the focus of social theory from macro-economic and political trends to meaning and culture. This has led to an emphasis on social practices as signifying practices (Evans and Hall 1999). Research on food environments has been progressively influenced by appeals, advanced by cultural health geography in particular, for more complex and contextual understandings of place.

The emergence of health geography (as opposed to medical geography or disease ecology) as a discrete sub-discipline can be traced back to a 1993 article by Kearns in *The Professional Geographer*<sup>1</sup>. The arguments presented in this paper sparked a debate within the discipline and, effectively, set the tone of health geography for the following decade. Kearns argued for a reformed medical geography that should consist of two streams of research. One that would continue to focus on the quantitative social epidemiological traditions of disease ecology and service delivery, and another that qualitatively investigated cultural and contextual understandings of place and health (Brown and Duncan 2002, Andrews and Evans 2008, Cutchin 2007, Kearns 1993).

---

<sup>1</sup> KEARNS, R. (1993) Place and health: towards a reformed medical geography. *The Professional Geographer*, 46, 111-15.

The cumulative influence of the cultural turn, specific to medical and subsequently health geography, has been characterised as a distancing from concerns with disease and the interests of the medical world. In its place, an increased interest in well-being and broader social models of health has taken root (Kearns and Moon 2002). Disease was no longer seen as a straight-forward biological phenomenon. The difference between medical geography and the new health, or post-medical, geography can be summarised as consisting of three major distinctions. First is the emergence of ‘place’ as a primary framework for understanding health patterns and health inequalities. Second is the gradual adoption of socio-cultural theories. Last of all, a tendency towards critical analysis and the problematising of previously taken-for-granted concepts and assumptions has served to distance the discipline from medical models (Kearns and Moon 2002, Cutchin 2007).

A theoretical and methodological emphasis on ‘place’ rather than ‘space’ is now a central theme of health geography. Place can be thought of in terms of location in physical space; position relative to other places; as a specific context containing distinctive idiosyncratic attributes; and as imbued with social significance and values (Curtis 2004). This is in marked contrast to the traditional medical geographical treatment of ‘places’ as unproblematic and generalisable geometric units – like that traditionally utilised in epidemiological research (Cutchin 2007). Health geography is predicated on place processes and does not necessarily focus on generalisability.

### **2.2.3.1 The challenges of defining and measuring ‘place’**

While social epidemiology has increasingly highlighted and investigated the role of place on health, it does not typically conceptualize place with consistency. Cutchin (2007) argues that health geography can and does inform epidemiology

in this instance. The scale and attributes researchers assign to food environment models determines the scope and rationale of the interventions they recommend. Lack of agreement over what comprises a food environment, along with an absence of validated environmental measures, has led to a varied and sometimes contradictory body of results and proposals (Story et al. 2008). This disparity has been well documented. Moore and colleagues (2008a) investigated the extent of agreement between GIS-derived densities of food stores and perception-based measures in a one-mile radius from respondents' homes. They concluded that perception-based and GIS measures are associated but not identical (Moore et al. 2008a). It cannot be assumed that self-reported detail is the same as, or a valid proxy for, observer-measured detail (Macintyre et al. 2008b). What individuals regard as their 'neighbourhood', and the subjective ways in which they perceive and use its facilities and characteristics, has implications for the nature and validity of the data that can be generated.

In addition to the challenges of defining and investigating food environments as 'places', few studies provide a clear conceptualisation of *how* environmental factors influence food behaviours (Giskes et al. 2007). There remains a distinct lack of consistent findings across localities and nations on which particular characteristics of the environment have the most significant impact on dietary intake. Health geography can offer epidemiology a nuanced theory of place that can, potentially, help inform appropriate context-dependent interventions (Cummins et al. 2007, Cutchin 2007). The concept of place-specific findings provides health geography with a detailed approach to context that is lacking in traditional medical models.

### **2.2.3.2 Re-working the composition / context debate**

One particular outcome of the challenges to concepts of 'place' put forward by health geographers has been a re-working of the composition / context model (see section 2.2). The division between context and composition can be viewed

as false, and the two treated as interrelated. A relational approach to place proposes to un-fix taken for granted understandings of place and identity (Cattell 2001, Frohlich et al. 2001, Cummins et al. 2007, Castro and Lindbladh 2004). Deconstruction of the composition / context divide is justified on the grounds that the two categories are continually treated as unproblematic and mutually exclusive (Macintyre et al. 2002). Place is more than a set of fixed physical boundaries. Instead, it must be treated as relative, dynamic and fluid (Cummins et al. 2007). In this model individuals and groups are allocated a voice and their descriptions of place are incorporated.

In qualitative work this reconceptualization of place has resulted in an increased interest in exploring perceptions and experiences of place. For example, Castro and Lindbladh (2004) conducted a qualitative study of young adults residing in a relatively deprived urban area of Sweden, with the aim of exploring how young people conceptualise their neighbourhood and its mechanisms. They identified four distinct neighbourhood discourses that entailed different ways of coping with the challenges of living in a deprived and stigmatised environment. These discourses function as mechanisms through which context can be linked to health (Castro and Lindbladh 2004). The authors contend that the distinction between people and place is artificial. Composition and contextual effects are mutually reinforcing and symbolic. The authors treat identity and place as fluid and relational. Context is more than the physical environment, it is also constituted by collective lifestyles and the relationships between people (Frohlich et al. 2001).

In quantitative work the cultural turn has destabilised and problematised the uncritical theorising of place effects on health. For example, 'food deserts' theory is based on the claim that the ecological characteristics of an area have uniform effects over and above individual-level factors. The term 'food desert' describes inner city areas where cheap and nutritious food is practically unobtainable (Macintyre et al. 2008a). It is suggestive of a simple and

straightforward relationship between place and health. Those in deprived areas have poor diets due to unavailability of healthy food. Resulting interventions should be a simple matter of increasing availability. This approach has been extensively criticised in re-workings of the composition / context divide for unproblematically equating proximity with usage. The phenomenon of food deserts has been allocated the label of ‘factoid’ (Cummins and Macintyre 2002a) by more critical commentators, due to the lack of empirical evidence to support the model and an oversimplification of theory (Cummins and Macintyre 2002a, Apparicio et al. 2007, Pearson et al. 2005, Macintyre et al. 2008a). Many current policy initiatives that focus on the physical environment determinants of diet, such as the 2007 Foresight Report ‘Tackling Obesity’ (IDeA 2011) and Michelle Obama’s recent ‘Let’s Move’ campaign (Task Force on Childhood Obesity 2010), seek to tackle ‘food deserts’ in order to combat diet-related disorders, such as overweight. These schemes are focused on structural interventions that increase physical access to food in low-income communities.

Increasingly, however, quantitative research does acknowledge that place effects health in a myriad of interweaving ways, with some outcomes being immediately apparent and others cumulative. Innovative ecological area-level data are difficult to collect and analyse (Cummins et al. 2005a). Direct causality can only be identified through longitudinal or experimental studies. Cummins and colleagues (2005c) evaluated the diet and health effects of a naturally occurring intervention; the opening of a food hypermarket in a deprived area of Glasgow. A before-and-after postal survey of residents was conducted. The results indicated that the new hypermarket had no (population) impact on fruit and vegetable consumption, and self-reported and psychological health (Cummins et al. 2005c). However, a similar study in Leeds concluded that access to food improved after the opening of a new food store, and a rise in the consumption of fruit and vegetables was reported (Cummins et al. 2005b). This disparity indicates that place effects on health are multiple, nuanced and complex.

### 2.2.3.3 Methodological developments

The task of operationalising a more intricate understanding of place effects, in quantitative work, has been addressed by multilevel analysis. Multilevel analysis is a significant methodological tool for unpicking the complex interrelation of place, individual and health. This method seeks to explain relations involving both individual-level and aggregate-level variables, whilst avoiding ecologic fallacy (Von Korff et al. 1992). It allows the researcher to simultaneously examine the effects of group-level and individual-level variables on individual-level health outcomes (Diez-Roux 2000). To an extent, it overcomes the problem of multiple scales and variables because groups (or contexts) are not treated as unrelated. Rather, they are seen as coming from a larger population of groups. Unlike earlier models, it avoids collapsing all variables into one level (Diez-Roux 2000, Diez Roux 2002).

For example, Diez-Roux and colleagues (1999) investigated whether neighbourhood characteristics are related to dietary patterns. Data were drawn from base-line interviews, questionnaires, and US Census records on household incomes. Because of the hierarchical and multiple scale sources of these data, multilevel modelling was appropriate (Diez-Roux et al. 1999). The study concluded that living in a low income area is associated with, relatively, unhealthier dietary habits. Further, individual income was a more consistent predictor of dietary behaviours (Diez-Roux et al. 1999), confirming the deprivation amplification model. Multivariate analysis facilitated the combination of a large, representative population sample with detailed and standardised data on income and diet.

However, despite their methodological complexity, these studies do not tend to uncover how people experience and respond to their neighbourhood food environment, and how the nature of this interaction shapes decision-making at the 'point-of-purchase' or 'point-of-consumption'. Multilevel analysis has its



limitations and challenges. In order to be of value it must be informed by theory; a hypothesis that integrates micro and macro-level variables (Diez-Roux 1998). Without this, the endeavour is methodologically, rather than theoretically, motivated, thereby reducing its usefulness for policy or intervention. Policies aimed at changing the food environment are likely to have varying effects depending on the characteristics of individuals interacting with those environments. Individuals have differing responses to, and perceptions of, the food environment. Environmental influences on diet can thus be understood as relational and dynamic, and, partly constructed by discourse and practice (Cummins et al. 2007, Pred 1984, Jackson et al. 2006, Curtis 2004).

Recent qualitative research, relevant to food environments, by contrast, is very much concerned with experiences and perception. Participants are invited to discuss aspects of their environment and behaviour that they classify as significant. This body of work most frequently uses focus group cohorts of parents, especially mothers, living in poorer areas (Chang et al. 2008, Dwyer et al. 2008, Greves et al. 2007). Parents cite lack of time, inaccessibility of healthy foods, media influence, safety concerns, and lack or inaccessibility of resources as barriers to healthy dietary behaviours (Dwyer et al. 2008, Davis et al. 2008, Greves et al. 2007). These studies are valuable in that they provide insight on perceptions and social constructions of the food environment and allow participants to frame their environments in terms of their own experiences. However, there is an absence of observational and ethnographic work on food environments and, as such, the embedded practices, routines, subject positions and situated interactions that produce dietary behaviours remain under-researched.

#### **2.2.3.4 Summary**

Much intervention and epidemiological research relies on a simple conceptual model that suggests that access to better neighbourhood food environments is associated with improved diet. Public health research does not tend to explore whether individual responses to the same neighbourhood food environment vary and what shape these varying responses may take. The emergence of health geography has resulted in more complex interpretations of place and an acceptance that environmental influences on diet can be better understood as relational and dynamic (Cummins et al. 2007, Pred 1984, Jackson et al. 2006, Curtis 2004). Within this context, shopping for food is a key link in the causal pathway between the food environment and food practices as it acts as the main vehicle of interaction with the food environment. However, supermarkets and food shopping practices have yet to be investigated within this proposed relational paradigm (Cummins et al. 2007). The food environment has been characterised in terms of classifications, counts, density and accessibility, but there remains little research on how people actually *use* these environments.

### **2.3 Food shopping:**

#### **The food environment as a consumption space**

Marketing, retail and consumer studies are very much concerned with the factors that influence decision-making in retail environments. More recent and anthropological work, especially, has examined the practice of shopping in relation to identities, relationships and leisure (Miller 1998, Miller et al. 1998). Social science work on consumption can inform an investigation of food shopping practices by highlighting the dynamic nature of purchasing decisions, and by examining the context in which these are made. The purchase of food for domestic use is an act of consumption. Consumption is a process of

objectification: a use of goods and services in which the object or activity becomes simultaneously a practice and a form in which we construct our understandings of ourselves in the world (Miller 1995). In the act of food shopping, food is a consumer good like any other and approached as such by individual consumers. By implication, the food environment can therefore be regarded as a consumption environment. Studies of consumption therefore provide an additional way of evaluating the food environment. Shopping for food is more than a health behaviour, it is also an act of material consumption. This section will outline the development of geographies of retail and consumption and their intersection with anthropological and sociological work on consumption culture, sites and practices.

### **2.3.1 Geographies of retail and consumption**

Since the mid-1980s there has been rapid growth in the study of consumption in general (Jackson and Holbrook 1995). These strands of research combine to offer a very diverse literature, drawing on marketing, consumer studies, semiotics, sociology, psychology and geography. Geographies of consumption and retail have developed substantially from the 1970s onwards and have since sub-divided into a variety of specialisms. Traditionally this sub-discipline concentrated on the location of economic activity and analysing the means of production (Jackson and Thrift 1995, Bell and Valentine 1997). The 1990s saw a shift of perspective in the literature, resulting in an increased engagement with both cultural and economic theories of retail (Wrigley and Marston 2002, Lowe 2002). The discipline has progressed from descriptive accounts and mapping of retail locations to more critical accounts of how retail sites are symbolic and metaphoric territories as well being sites of material commodity exchange (Clarke 1996). Economic studies have examined topics such as the regulatory environment (Wrigley 1992, Marsden and Wrigley 1995), retail capital (Wrigley 1997) and the subjects of competition and choice (Clarke 2000). Retail

geographers and market researchers have categorised and examined key retail formats and economic developments (Crewe 2000), including the continued rise of discounter stores in North America and Europe (McGoldrick et al. 1999, Grewal et al. 1998, Blattberg and Scott 1990, Cleeren et al. 2010)

Cultural theories of consumption have prompted a greater interest in everyday practices and experiences of consumption, including how people use and experience sites such as malls, stores and high streets (Lowe 2002). The sites where goods can be purchased, such as restaurants, stores and shopping malls, are often described in this literature as 'consumption sites' or 'consumption spaces' (Crewe 2000). Recent qualitative work has emphasised the importance of perceptions and meanings associated with these spaces. Jackson and Holbrook (1995) argue that it is the very mundanity and taken-for-grantedness of consumption spaces that holds the key to their interpretation. Shops and stores are part of the common place culture of social practices and norms. Further, that although these spaces may be unremarkable in architectural terms they are significant symbolically as part of a highly textured symbolic world, resonant with multiple and contested meanings (Jackson and Holbrook 1995).

Consumption sites have long been an area of academic enquiry in cultural studies, which traces the advent and development of consumption culture from the end of the nineteenth century and the availability of relatively cheap mass-produced consumer goods. This new 'culture of consumption' was urban, secular and served to blur the boundaries between work and leisure. Spectacle, colour and shopping as a form of entertainment characterised the rise of department stores as the principle sites of consumption (Leach 1984). Department stores were the embodiment of visual, aesthetic and ritualised consumerism. They were at the heart of the new and emerging culture of consumption, both physically and symbolically. Bowlby (1997) explains that where the department store was the dominant site and format of the nineteenth

century shopping-experience, the *supermarket* dominated the twentieth century. Both are large scale retailing institutions selling a vast range of products in one site and both use the modern marketing principles of cost effectiveness, high turnover and low profit margins. Further, both institutions encourage the customer to look and sometimes handle the goods (which are meticulously lighted and displayed) with no obligation to buy (Bowlby 1997). In fact, the visual spectacle and the act of 'looking around' is part of their allure. Supermarkets appeal to a broad range of people because they offer such a vast array of goods, from the exotic to the everyday, and are made appealing to customers by their promotions, environmental manipulations (such as lighting, aromas and muzak) and customer comforts (Bell and Valentine 1997). It is no surprise then that as well as being the dominant site of the late-modern shopping experience (Bowlby 1997), supermarkets are also the dominant format of food and grocery retailing in the UK (Wrigley et al. 2009, Degeratu et al. 2000, Miller 1997a).

### **2.3.2 Shopping as a social practice**

The mundane activity of shopping can be seen to offer a range of insights into how our identities are constructed and negotiated in place through complex social relations of class, ethnicity, gender and generation (Jackson and Holbrook 1995). Accounts of in-store decision making and individual shopping practices have traditionally been based upon the demographic and socio-economic characteristics of shoppers. Because the characteristics of consumers are important to retailing, considerable attention has been given to developing and investigating classifications which may be useful to marketers (Williams 1985). Consumers are categorised into types according to factors such as social class, household size, gender, education level, age, ethnicity, and area of residence (McGoldrick et al. 1999, Wesley et al. 2006, Li et al. 1999, Inman et al. 2009). In this scholarship, relations of social difference and identity are treated as fixed,

rather than as actively negotiated and performed (Miller 1995, Jackson and Thrift 1995).

Theorising of in-store consumer choice tends to rely heavily on rational-actor assumptions about human behaviour, theorising decision-making as a linear and consistent process (Gram 2010). These studies are overwhelmingly quantitative and utilise self-report data or behavioural experiments (Whan Park et al. 1989, Rao and Sieben 1992, Chandon et al. 2009, Degeratu et al. 2000, Dhar et al. 1999, Grewal et al. 1998). What are less common, in this literature, are qualitative and observational studies of shopping practices.

Since the 1990s geographers have addressed this with ethnographic and naturalistic studies of shopping behaviour. For example, Jackson and Holbrook's (1995) study compared North London shopping centres. The researchers used a mixture of focus groups, social surveys and ethnographic techniques with the aim of articulating practices and areas that may previously have been taken for granted or overlooked in quantitative analysis. They concluded that shopping is a highly significant activity in the moulding of people's identities and sense of self. Further, shopping is a social practice, not an undifferentiated and impersonal activity (Jackson and Holbrook 1995). Similarly, Miller's anthropological project on the shopping practices of the residents of a North London street has generated a wealth of theories and empirical work on the socially, physically and culturally situated practices of shopping (Miller 1998, Miller 2001, Miller 1997b, Miller et al. 1998). He concluded that the act of shopping offers insights into contemporary social relations and that shopping for family members can be understood as an expression of love, devotion and responsibility. Shopping references both our relationship to those we shop for and the values to which individuals dedicate themselves (Miller 1998). Mass produced consumer objects, like shop-bought food products for example, are encountered and used by individuals who incorporate them into their personal behaviour repertoires (Woodward 2007).

At present, there is little observational and ethnographic research on shopping practices (Jackson and Holbrook 1995, Miller 2001, Gram 2010) and even less so on shopping specifically for food in supermarkets (Gram 2010). The little qualitative work there is tends not to be naturalistic. For example, Voordouw and colleagues conducted a qualitative food shopping experiment in which 40 individuals, who either suffered from food allergies themselves or were the parents of children with allergies, were asked to purchase 15 potentially problematic food items. The participants were observed and interviewed about their choices and experiences. The main finding was that participants reported experiencing significant problems with food labels (Voordouw et al. 2009). Although the data collected were qualitative the approach used remained that of an 'experiment', as participants were assigned both stores and shopping lists by the researchers. This was not a study of everyday practices and performances of the type advocated in geographical and cultural literature (Miller 1995, Jackson and Holbrook 1995).

In a more ethnographic vein, a recent Danish study attempted to observe naturally occurring interactions between parents and their small children in supermarkets. A non-participant observation approach was taken. Researchers did not formally recruit for the study but instead observed parents when shopping, at a discrete distance, for periods of no more than five minutes at a time. The aim was to unobtrusively observe behaviours, interactions and decision making when food shopping. The findings suggest that both parents and children manage a number of roles and apply a range of negotiation strategies when food shopping (Gram 2010). While much more in-keeping with a qualitative and interpretivist paradigm, this approach did not allow for an in-depth examination of food shopping practices or the scope to talk to individuals about their behaviours. As yet, there is little of health-relevant ethnographic investigation of how individuals approach food shopping in large, highly designed and marketing spaces like supermarkets and larger food stores.

### **2.3.3 Theorising mundane consumption activities**

Shopping for food is a routine and repetitive domestic task. Ilmonen (2001) argues that these types of consumption are better understood as largely unreflective behaviours rather than expressions of agency and individualism. He highlights the distinction between action and behaviour. Action is the enactment of agency. Behaviour is conduct, non-action and reacting to things and events in a mostly repetitive and unreflective way (Ilmonen 2001). From this standpoint, shopping in a supermarket consumption space on a very regular basis for domestic food products is best described as a 'behaviour', rather than a performance of identity or agency. People form habits around objects and sites, like food-stuffs and supermarkets, that are uncritical and difficult to change, regardless of agency (Ilmonen 2004). Ilmonen refers to these habits as consumption routines. Routines reduce the complexity of decision making, create a safe habitable environment, and make our behaviour predictable and trustworthy. They become part of the character and identity of the individual. People are not very aware of their routines of consumption, as they are almost second-nature. Routine consumption behaviours reflect social categories and affective attitudes; they are a way of giving comfort to ourselves and a feeling of normality. However, as Ilmonen points out, normality comes at a cost and our routines are also impeding structures that narrow-down our choices and alternatives for action (Ilmonen 2001).

This depiction of consumption is quite different from that presented by geographies of consumption (Jackson and Holbrook, 1995, Jackson et al., 2006) in the sections above. While Jackson positions consumers as active and knowing agents, Ilmonen argues that a great deal of repetitive consumption practices lack agency and rely instead on habit. He draws on Weberian action theory to explain the difference, reiterating that human action is always a mixture of behaviour and action, of agency and uncritical reaction (Ilmonen 2001). The agency,



reflectivity and reactivity of consumption practices are dependent upon the type and context of consumption being undertaken and the individual undertaking it.

### **2.3.3.1 Summary**

The practice of consumption is presented in the literature as a mundane domestic activity, a means through which individuals can express love and identity, an expression of agency and identity, and as a set of practices that are highly routinized and predictable. Despite the variety of ways in which shopping is theorised, there is still very little observational research exploring how it is actually performed and experienced. Ethnographic research could further reveal how shopping for food is influenced by factors such as the consumption (food) environment, agency, identity and family food practices.

## **2.4 Home and family eating practices**

When shopping for food, individuals bring with them a range of concerns, motivations, needs and demands that are both reproduced and addressed through the act of shopping. This is because shopping for food is not an isolated activity; it is situated within the regular routines and pressures of everyday life. For example, the food bought in supermarkets is, for the most part, taken to other spaces to be consumed, it is taken *home*. Home spaces, like consumption spaces, are context-specific sites in which food practices are enacted. Sociological work on domestic food consumption has tended to depict the home in isolation, as divorced from the locality and disconnected from other scales and sites (Valentine 1999b). This study aims to look at food practices in consumption spaces *and* home spaces in order to understand how food behaviours are connected, enacted and shaped across contexts.

If the supermarket is the main physical site in which people shop for food, then the home is the principal symbolic space in which eating practices are formed and negotiated. For example, the family home is the primary context in which the dietary practices and eating habits of children and young people are instilled and developed (Hearn et al. 1998, Kratt et al. 2000, Birch 1999). Also, sharing a home with a partner or spouse has a profound effect on the couple's eating practices, as they gradually negotiate and construct their own shared food practices (Marshall and Anderson 2002)

Work relevant to home and family food practices is drawn from a wide body of literature that encompasses a range of social groupings and scalar ontologies. The family is a common area of investigation throughout food and culture literature (Murcott 1997). Adolescence, social class, ethnicity and gender are also recurrent units, or social differences, of interest (Caplan 1997). The scale of study ranges from the global to the individual, via national practices, community practices, and media representations. The topic of 'food' can include the norms and values associated with food, food practices, structural associations, and even social histories of particular food types and products (Mintz 1985, Charsley 1997).

This section will review the literature on family eating practices, with a focus on research that examines the construction and co-construction of meaning that food-related performances achieve (Blake et al. 2008, Carrigan et al. 2006, Kristensen 2000, Kristensen et al. 2002, Crouch and O'Neill 2000, Farrales and Chapman 1999). The section will then outline and discuss work on food and identities, offering a critique of essentialised food (and health) related identities.

### **2.4.1 Families and mealtimes**

Eating is a socially constructed practice, one that is imbued with the socio-cultural contexts in which it is performed. Social scientists have examined the ways in which food and eating reflect and help to construct and reproduce family dynamics (Wills et al. 2011). Given the importance of the family as the primary socialising institution in society, it is unsurprising that the family is typically and consistently depicted as the central agent in forming dietary practices and instilling life-long food behaviours (Hunt et al. 2011). Family environments are the key contexts for the development of food preferences, patterns of food intake, values and eating styles (Birch and Davidson 2001).

A distinct political trend is evident within much of this literature. Food discourse as a moral discourse has permeated research (O'Doherty Jensen and Holm 1999). A 'morality of food' is especially evident in research concerned with the family, and the subjects of this moralising discourse are lower socio-economic status households. The underpinning policy consensus of family-centred research is that interventions should be primarily targeted at the family level (Golan et al. 2006, Dietz 2001). Parents are positioned as facilitators of their children's negotiation through various food environments. The more traditional (nuclear) family unit is frequently cited as the most positive environment in which to instil healthy food behaviours (Elfhag and Rasmussen 2008, Franko et al. 2008, Yannakoulia et al. 2008). There is also a heavily gendered aspect to much of this research. McIntosh and colleagues point out that there has been a great deal of scrutiny on the amount of time that mothers spend performing household chores (including cooking) and how much time working mothers spend with their children compared with non-employed mothers (McIntosh et al. 2010).

The quintessential expression of a positive home and family food environment, culturally, is the family meal. Shared meals have long been

considered essential for the unity of the family and symbolise family interaction. The family meal can also be viewed in the context of a family ritual, as a symbolic form of communication and interaction continued over time (Story 2005). Sociologists, anthropologists and journalists have long argued, at length, that the 'traditional' family meal is in decline (Hunt et al. 2011). This is partly attributable to the fact that in the last 50 years there has also been a food revolution in Britain. New methods of growing, processing, distributing and cooking food have developed, meaning that eating practices have been transformed (Murcott 1997). We snack on high energy foods in between meals, eat on-the-go, and the nature of the family meal has changed. People eat away from home a great deal more (McIntosh et al. 2010) and there is an ever increasing range of food types and sources to choose from (Murcott 1997). Much has been made of the time pressures and constraints faced by families and the rise in consumption of convenience foods (McIntosh et al. 2010).

However, family meals continue to occupy a central part of family life and are positively perceived by both parents and adolescents (Fulkerson et al. 2006a, Hunt et al. 2011). Regular, shared family meals have also been linked to positive psycho-social development (Fulkerson et al. 2006b). Franko and colleagues (2008) found that high family cohesion is significantly associated with healthy eating behaviours. Further, Elfhag and Rasmussen (2008) compared the eating behaviours and self-esteem levels of single mothers and their children with those of married (or cohabiting) mothers and their children. Daughters of single mothers were heavier, demonstrated higher levels of restrained eating behaviours and had lower self-worth (Elfhag and Rasmussen 2008).

Family psycho-social dynamics are an established line of research in this area (Woodruff and Hanning 2008, Franko et al. 2008, Dallos and Denford 2008), although once again the findings and recommendations do tend to conform to a somewhat traditional ideal of a nuclear family sharing home-

cooked shared meals. That aside, they *do* acknowledge that the pressures of modern life and more diverse family structures make this increasingly difficult. Recommendations from such studies typically call for more education and promotion about the importance of healthy family meal times (Birch and Davidson 2001, Fulkerson et al. 2006a, Fulkerson et al. 2006b).

There is also a growing body of research that examines the pressures of modern family life more explicitly by investigating the evermore dynamic nature of family food practices and how these are being altered by broader socio-cultural changes. For example, Jastran and colleagues (2009) use the concept of ‘eating routines’ to characterise and explain family food behaviours. Routines are explained as strategies for conserving physical and cognitive resources that simplify daily activities, such as feeding the family. They reflect the way that people deal with the tensions between the demands they face and the resources that they have in the multiple settings in which they live. People deviate from traditional ‘proper meals’ in terms of timing, foods and social settings as a result of perceived work and lifestyle demands and time scarcity (Jastran et al. 2009). Their study of 42 participants used a series of 24-hour-recall interviews with each individual to gain an in-depth understanding of food behaviours. They found that while most participants used breakfast, lunch and dinner ‘labels’ to describe their eating routines they varied these practices according to factors such as time recurrence, social setting, mental process (goals), food consumed, activity, physical conditions and locations. Further, that these routines of eating were embedded in work and family schedules, reflected personal food choice values and were highly adaptable. People were reflective about these routines and even derived identities from them. Most participants reported that their overall goal was to construct family meals that have routine behaviours associated with them, such as watching television together (Jastran et al. 2009).

Despite the ever increasing individualisation of food consumption practices, meal rituals continue to be a fundamental part of eating, as they reflect

shared values and cultural ideas about eating ‘properly’ (Marshall 2005). Blake and colleagues (2008), for example, explored how people cognitively construct evening meals. They found that individuals construct categories of identities that they can assume when ‘doing’ evening meals and ‘scripts’ (procedural knowledge) that guide behaviour for different identities and contexts. People have personal food systems and develop intricate mental processes that involve value negotiation and the formation of strategies and routines of behaviour (Blake et al. 2008). Similarly, Carrigan and colleagues (2006) investigated the meaning and construction of ‘convenience’ foods in the family context and found that ‘convenience’ had multiple meanings and hierarchical categories within family food practices (Carrigan et al. 2006). It would appear that the notion and practices of family mealtimes are certainly changing, but are not necessarily in decline. Despite the ‘moral panic’ that surrounds the topic, the symbolic status of the family meal is intact and the practices that underpin it have remained relatively stable in the face of changes to the distribution, availability and marketing of food over the last half-century (Jackson et al. 2009)

The unproblematic and wholly positive positioning of the family meal that this moral panic perpetuates has been challenged by researchers (Hunt et al. 2011). Family mealtimes can reflect and even contribute to family problems, tensions and conflicts. Family food practices are a constant source of child-resistance, negotiation and difficulty for many parents. Mealtime rituals can be the site of power-struggles and serve as techniques of discipline (Grieshaber 1997). For adolescents, being required to participate in family meals can be very unwelcome. Gallegos and colleagues (2011) reported that, in an online survey of adolescent food attitudes, half of the respondents regarded mealtimes negatively or, at best, as unimportant (Gallegos et al. 2011). In a similar vein, Wills and colleagues (2008a) conducted in-depth interviews with teenagers from low socio-economic backgrounds about their perceptions of food in the family home. They highlighted the perpetual negotiation and renegotiation of eating practices between immediate family, extended family, household residents and

non-residents (Wills et al. 2008b). Family eating practices are fraught with conflicts of interest and need because home is a site of both individual and collective food practices (Valentine 1999b). Individual food practices are shaped and reproduced by the identities of social actors.

## **2.4.2 Food, identity and belonging**

Eating behaviour is part of the identity of each society and engaging in certain food practices is a way of referring to a society's culture (Aree et al. 2004, Shatenstein and Ghadirian 1998). Rejecting or accepting certain foods can be a means of expressing roles and identities. The study of identity in relation to food practices had its beginnings in anthropological studies in which food came to be understood as a cultural system (Caplan 1997). This well-established analytical position within the social sciences treats food as an expression of 'something' social, such as status, harmony or, indeed, identity (Murcott 1996). In fact, as social beings food is central to our sense of identity (Fischler 1988).

Food practices are part of wider social practices and belief structures. They are imbued with meaning and can signify belonging. For example, Willets (1997) explains that for an environmental group in South London eating meat became a tangible expression of one-ness with nature. The meat had to be sustainably and ethically produced based on 'permaculture' farming principles. Meat produced in any other way was deemed, by participants, as barbaric and unsuitable for consumption (Willets 1997). Aree and colleagues (2004) conducted an ethnographic study into the eating behaviours of elderly people with hyperlipidaemia. They found a variety of meanings attached to specific foods. Some products were viewed and used as medicines, whilst other foods were believed to cause illness. Studies such as these demonstrate that diet is a cultural construct which is influenced by multiple and interrelated factors (Shatenstein and Ghadirian 1998).

In recent anthropological and sociological work on food and feeding in western societies there is a preoccupation with food as a marker of difference, especially around classic variables such as gender, age, class and ethnicity (Caplan 1997). Medical sociology, especially, translates reported food behaviours into cultural variables that can be identified as 'high risk' or 'dangerous'. There is a large body of research that looks at specific ethnic groups to identify cultural 'barriers' to healthy eating and recommends 'culturally specific' interventions to overcome these barriers (Horodyski and Arndt 2005, Green et al. 2003, Hyman et al. 2002, Anderson et al. 2005). Murcott (2002) takes issue with the identification and targeting of sociocultural barriers to address inequalities in nutrition. The very vocabulary used is problematic. She maintains that declaring the need to demolish 'barriers' invokes overwhelmingly negative connotations. It implicitly suggests hierarchical distinctions between cultures that may, unintentionally, prompt rejection or promote resistance (Murcott 2002).

These studies tend to essentialise food-related behaviours and identities as fixed and static. More culturally informed research accepts that food practices are dynamic and fluid processes that are formed and reformed within specific and overlapping contexts. An illustration of this can be found in the work of Gill Valentine (Bell and Valentine 1997, Valentine 1999a, Valentine 1999b), which addresses the relationship between food and identity in a literal and explicit way, through the notion of embodiment. Valentine's (1999a) corporeal geography of consumption examined competing discourses around food. Bodies are constituted by particular constellations of wider social relations and consumption spaces. They are a product of the complex interaction of discourses and practices (Valentine 1999a). These discourses operate through bodies, dictating idealised body shapes, patterns of consumption and identities. Body size and eating conveys a particular embodied identity for the overweight (Bell and Valentine 1997). 'Fat' bodies are judged to take up too much space and are



sanctioned and delimited accordingly (Bell and Valentine 1997, McDowell 1999, Colls 2006, Colls 2002). Eating practices are seen to dictate the spatiality of our bodies (weight and size) and our positioning in social space (status, sexual attractiveness, strong or weak willed) (Valentine 1999a).

Identities, in relation to food, are expressions of the way people conceptualise their own distinguishing characteristics and self-image. These identities exist in conjunction with many other identities, any of which may override each other in influencing specific food choices depending on context (Devine et al. 1999). The concept of identity can help understand food choice processes and recognise multiple meanings that people bring to and derive from eating (Bisogni et al. 2002). Devine and colleagues, in their investigation of ethnicity and eating practices, reported that the influence of ethnic identity on food choice was characterised by multiple ethnic affiliations and the differential salience of ethnic identity in changing food environments and eating situations (Devine et al. 1999). Bisogni and colleagues argue that increasingly complex and psychosocial approaches are required to achieve a detailed understanding of inter and intra-individual variability in food behaviours

#### **2.4.2.1 Summary**

The symbolic and cultural significance of the home and family in relation to food practices have made them the core site and institution for policy and intervention aimed at changing food behaviours. Home and family are also sites of complex and often fraught food practices. Recent studies have moved away from the overwhelmingly moral discourse, in which family-food research is embedded, to examine how individuals try to balance competing pressures and time constraints when feeding themselves and their families. By examining the meanings and performances attached to food behaviours these practices can be situated within the broader contexts and narratives of everyday lived experiences. Further

research, in this vein, could broaden the scope of such studies across contexts and activities to include both family food practices and food shopping practices

## **2.5 Summary and research aims**

Food stores and home spaces are two of the main sites in which food practices are both shaped and performed. Buying food in the local food environment and storing, preparing and eating food in the home comprise some of the most routine and significant acts of food practice that individuals engage in.

There is empirical evidence to suggest that the structure and organisation of the neighbourhood food environment may influence food purchasing and dietary practices at the individual level (Cheadle et al. 1991, Morland et al. 2006, Diez-Roux et al. 1999, Franco et al. 2008, Morland et al. 2002a). Yet, there is an absence of studies that examine behaviours within the food environment through observations and at the individual level. Such data could develop understanding of the factors that shape decision-making about diet at the ‘point-of-purchase’, and may help improve the conceptual models underpinning epidemiological research (JMP Consultants 2009b). In order to examine food purchases in this way the food environment must also be understood as a consumption environment, and decisions made within it as those of consumers.

The notion of consumption routines (Ilmonen 2001) can be used to explain routinized and repetitive consumption practices. Rather than being active agents, consumers can come to rely on reactive and routine approaches to decision making when faced with repetitive and mundane purchases (such as food shopping). Similarly, the concept of ‘routines’ has also been employed in theories of family food behaviours (see section 2.4.1) to characterise strategies for conserving physical and cognitive resources and simplifying the daily task of

feeding the family (Jastran et al. 2009, Blake et al. 2008). The notion of ‘routines’ as a way of simplifying and ordering social practice is a useful conceptual tool, and one that will be further developed in sections 5.3 and 6.3. This concept is especially helpful when describing and theorising how individuals strive to balance the tensions of modern life whilst effectively and healthily feeding themselves and their families.

Overall, this thesis aims to address the gaps in the literature around how people interact with the food environment and make decisions about which foods to purchase. Rather than relying solely on self-report data this study draws upon ethnographic and observational methods to explore food shopping behaviours in context. The concept of routinized behaviour will be developed and adapted to help understand how individuals approach the complex and repetitive tasks of shopping for food and feeding their families. A great deal of attention has been focused on the importance of family meals in socialising children, instilling positive health related behaviours and maintaining family cohesion (Hunt et al. 2011). However, few studies interrogate the food-related routines and context specific roles that people employ to cope with the competing demands of work, family, economic and time pressures (Blake et al. 2009, Blake et al. 2008). This caveat will be addressed by examining how participants enact family food practices and how they routinely resolve conflicts between individual and collective eating practices. This thesis explores food related practices, routines and identities across food shopping sites and home spaces by investigating the following research aims:

- To explore and describe how people perceive and interact with the micro food environment
- To investigate how routine food behaviours are performed in, and shaped by, home and food shopping contexts.

- To examine how food related practices and identities interrelate across home and food shopping spaces

The next chapter describes the methodological approach undertaken to research these aims. In order to illuminate the complex and fluid nature of food practices across social and physical contexts the methodologies applied had to be sensitive to the situated, contradictory and sometimes non-verbal ways in which people perform, negotiate and account for food-related behaviours. A wholly qualitative approach was taken by carrying out a symbolic interactionist ethnography.

## **Chapter 3: Methodology**

### **Symbolic Interactionist Ethnography:**

#### **exploring food practices in context**

##### **3.1 Overview**

As discussed in chapter two, the mechanisms that underlie food behaviours are difficult to investigate and explain. Food practices are shaped by individual, social and environmental factors (Williams et al. 2010). How and why these factors interact to produce individual and family or household food practices continues to be debated. Health related behaviours, such as shopping for and preparing food, are explained as much by contextual influences and routine practices as they are by rational decision-making and informed choice. Cultural approaches in health geography have helped to move the debate beyond uncritical and essentialist understandings of health behaviours and towards a more reflexive and critical position (Brown and Duncan 2000). More culturally informed studies may provide explanations of health behaviours and outcomes that incorporate complex socio-cultural influences.

A wholly qualitative geographical approach to the topic, as adopted in this study, entails a strong cultural component and draws heavily on post-structuralism (Cutchin 2007). The importance of 'space' and 'place' as at least partly socially constructed is now a central feature of critical health research in geography. 'Place' can be thought of in terms of location in physical space; its position relative to other places; as a specific context containing distinctive attributes; and as imbued with social significance and values (Curtis 2004). The particular combination of methods deployed in this study were intended to

highlight the specific nuances of place and context, and how they shape every day, routine food practices.

A qualitative approach was used to explore the nuances of social performance, identity and perception that influenced interactions with the built environment and governed food-related behaviours in the home. A symbolic interactionist ethnography was carried out in a small area of Sandwell, West Midlands. Photovoice and semi-structured interviews were used to capture an in-depth picture of individual and household food practices over a four-day period. Participants were issued with digital cameras and supporting materials in order to undertake this activity. In addition, Go-along interviews, in the form of accompanied food-shopping trips, were conducted to observe and probe the spatial practices of participants when interacting with the built environment and to contextualise food related behaviours. A total of 26 participants were recruited, which yielded 25 food photo-diaries, 26 semi-structured interviews and 23 go-along interviews. Participant-led methodologies, such as photovoice and go-along interviews have been epistemologically aligned to emancipating participants through the research process by giving voice and visibility to individuals (OliFFE et al. 2008). Both photovoice and go-alongs facilitate the participant in deciding what is relevant to be brought to interview, both in terms of which places should be visited and which practices and objects should be photographed. This emphasis on construction and performance is congruent with a cultural-geographic focus on places and processes that occur within them, rather than on generalisability.

This chapter will explain the theoretical framework of the methodology employed within this thesis, symbolic interactionist ethnography, and go on to describe the fieldwork site and the study sample. The stages of data collection and then data analysis, including details of transcription, a discussion of thematic analysis and the use of Computer Assisted Qualitative Data Analysis Software (CAQDAS) will be addressed in some detail. A discussion of ethics and

informed consent will detail the processes and issues encountered during data collection

### **3.2 Symbolic interactionist ethnography: theoretical background**

Ethnographies are in-depth studies of practice and culture in which researchers seek to understand how people make sense of the world in everyday life (Hammersley and Atkinson 1995). An ethnography treats participants as interpretative beings, they are viewed as acting on the basis of the meanings that they give to actions and events. The social world is performed by the active intelligence of its participants. Ethnographers attach great importance to the practical knowledge that social actors employ to guide their actions.

Symbolic interactionism seeks to understand social action from within (Rock 2001). It is a theoretical perspective which assumes that people construct selves, society and reality through interaction. A point of focus is the dynamic relationships between meanings and actions, and the active processes through which people create and mediate meanings (Charmaz 2006). Food practices, for example, can be viewed as social actions that create meanings and identities and, equally, are influenced by these identities and meanings.

Interactionism assumes that people interact socially and adjust their behaviour in response to the actions of others. It is in the process of interpreting the actions of others that people adjust their own actions (Smit and Fritz 2008). Selves and behaviours are understood inferentially and contextually because people make sense of the world by interpreting themselves and others as they are revealed through situated social performances (Rock 2001). Interactionist approaches, therefore, are sensitive to issues of social context, as the actions and identities of other social actors are what shape individual perceptions and

behaviours. Social reality and human behaviour are conceptualised as symbolic, communicated and subjective (Smit and Fritz 2008). Symbolic interactionism can be regarded as a postmodernist 'take' on interactionism in that it incorporates and recognises that social realities are relativistic and linguistically mediated (Prus 1996). Rather than pursuing the 'true' nature of phenomena through scientifically produced knowledge, this paradigm focuses instead on the interpretive and experiential nature of human behaviour as individuals actively construct their social world and, thereby, their own social reality (Rock 2001, Smit and Fritz 2008). An interactionist epistemology dictates that research can be neither passive nor neutral. It is interactive, selective and interpretive. Activities, interactions and relations cannot be reduced to textuality or narrative (Prus 1996, Rock 2001). Individuals are active agents that construct their social realities through action and interaction. Situations, contexts and identities are defined, understood and made-sense-of through the actions or performances that the social actors assign to them and engage in (Rock 2001)

Symbolic interactionist ethnography, therefore, assumes that human group life is intersubjective, activity-based, negotiable and relational (Tan et al. 2008). This approach explores the interpretations that social actors attach to themselves, other people and other objects. It highlights the bonds that individuals have to each other; the ways in which actors do things (in this case food practices) on an individual and interactive basis; and the attempts actors make to influence others (Tan et al. 2008). Adopting this position means attempting to reconstruct the world-view and perceptions of participants, to explain their everyday lives in their own words (Rock 2001). Such a position is particularly pertinent to a study of food practices, which are highly performative and social in nature. The go-along interviews provided direct observational data of practices and interactions when people were actively engaged in shopping for food. Photovoice, as a method, invites the researcher to look at the world through the same lens as the photographer (the participant) and to share the story the picture evokes for that participant (Booth and Booth 2003).



The social world cannot be understood in reductionist terms of cause and effect. Human actions are based upon and infused by social meanings; by intentions, motives, beliefs, rules and values. Adopting this position must entail a challenge to the stimulus-response model of human behaviour implicitly and explicitly expressed in positivist methodology (Hammersley and Atkinson 1995). As discussed in chapter two, such approaches treat decision-making about food as a rational and linear process. Whereas this study looks at the ways in which individuals approach food practices and routines, the social ‘work’ that food practices and talk do, and how these are shaped by social and physical context.

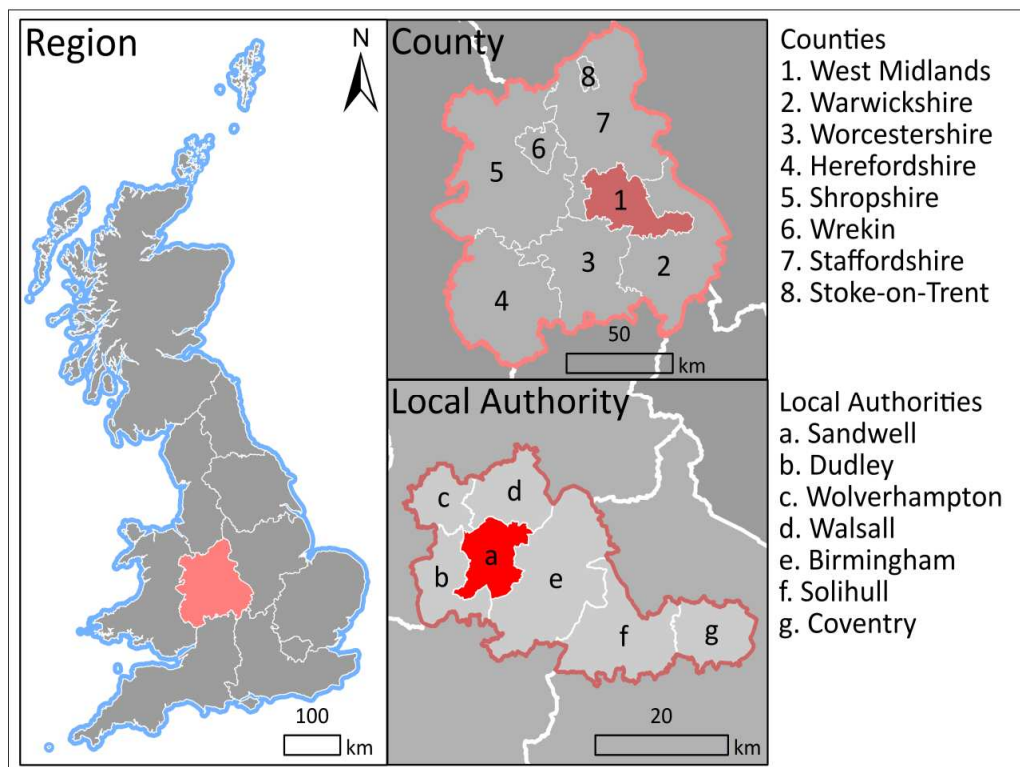
### **3.3 The Research Site:**

#### **Sandwell - population and health profile**

All data collection for this study was carried out in the local authority of Sandwell, West Midlands (see figure 3.1 below). Recruitment for the study was a rolling process and overlapped subsequent stages of data collection, as is the nature of qualitative research. I recruited new participants right up until the final month of fieldwork (July 2010). Participation in the study required individuals to invest a great deal of time and effort in the research, which made recruitment quite challenging. Participants were sampled for diversity and individual residents were recruited from two relatively small geographical areas, with a view to capturing and comparing interactions with the built environment in two of the busiest shopping areas in Sandwell (Cape Hill and West Bromwich). Sandwell is the 12<sup>th</sup> most deprived local authority in England. It has an ethnically diverse population and a comparatively high level of proportion of people claiming benefits of some kind (Sandwell PCT 2010b, Black Country Consortium 2011b). Given the health challenges that economic deprivation entails, it is to be expected that Sandwell PCT has a solid record of research and

intervention into health, and especially diet, related disorders and behaviours. The CASE partnership (see section 1.2), under which this study was partly funded and supervised, was another means of furthering and diversifying this research agenda. This section will give an overview of the area with descriptions of the specific sampling sites.

**Figure 3.1: UK, West Midlands and Sandwell map (Lewis 2012)**



### 3.3.1 Context

Sandwell Council was created in 1974 from six towns, each of which had formerly been a borough in its own right (Sandwell Council 2012). Sandwell is now a metropolitan borough covering a geographical area of 85.58 km<sup>2</sup>, with a population of approximately 292,800. Sandwell has a growing minority ethnic population, currently 20.3% of the total, and is expected to rise to 30% by 2025 (Sandwell PCT 2010b, Sandwell PCT 2008a). This reflects post war period

immigration of, firstly, African-Caribbeans and then, later, Indian Sikh immigrants who settled mostly in Smethwick (Sandwell MBC 2010). In recent years the number of new migrants from Poland and Slovakia who come to settle in the area has overtaken those from India (WMRO 2008).

The borough is made up of six towns (Wednesbury, West Bromwich, Smethwick, Oldbury, Tipton and Rowley Regis – as shown in figure 3.2) divided into 24 wards. Fifteen of these wards fall into the most deprived 25% nationally (Sandwell PCT 2008a). Sandwell is the 12<sup>th</sup> most deprived local authority in England (Sandwell PCT 2010b). Jobseeker Allowance claimants went up 73% in the year to May 2009, from 4.2% of the working age population to 7.3% (Black Country Consortium 2011a) This has been further exacerbated by both the on-going decline in the manufacturing sector, in which 25% of the workforce are employed (Sandwell PCT 2008b) and the recent spate of public sector restructuring and redundancies.

More than 30% of adults in Sandwell are on benefits of some kind and rates of adult economic activity are lower than the national average (Black Country Consortium 2011b). In 2006-7 Sandwell PCT spent almost £140,000 more per 100,000 members of the population than the rest of the country due to economic inactivity (Black Country Consortium 2011a). Sandwell has a high level of worklessness, poor skills levels of residents and a high propensity to employ residents of other boroughs in higher level occupations (Sandwell MBC 2010). In common with other forms of deprivation, high levels of worklessness, as measured by benefit claimants, are widespread across the borough (WMRO 2008). Sandwell is one of the most uniformly deprived boroughs in the country. Rather than pockets of deprivation and affluence across the area, Sandwell's economic and social problems are relatively evenly distributed across the Borough (WMRO 2008).

Sandwell faces a variety of health challenges commonly associated with deprived areas. Smoking and teenage pregnancy rates are significantly higher than the national average. Life expectancies for both males and females are significantly lower than the national figures and the West Midlands region average (Sandwell MBC 2010). Additionally, deaths from heart disease and stroke, cancers, smoking and infant deaths are all significantly higher than average (DoH 2006). Sandwell has a higher proportion of all people with limiting long-term illness; all people not in good health; and all people not in good health and with limiting long-term illness compared to the West Midlands region, England and Wales (Sandwell MBC 2010). In 2007-8 Sandwell was ranked 351<sup>st</sup> worst out of 354 local authorities for levels of physical activity (Sandwell-PCT 2008a). Fruit and vegetable daily consumption is significantly lower than the national average and both child and adult obesity rates are significantly higher, with 25.9% of year 6 children classified as obese (NHS 2011, Sandwell PCT 2008a). Levels of adult and child participation in sport are lower than the national average (Black Country Consortium 2011a).

At the outset of this project and for the duration of the data collection (January to July 2010) this area was administered by Sandwell Primary Care Trust (PCT). In April 2011 it became part of the newly created Black Country Cluster, which brought together the now streamlined PCTs of Sandwell, Dudley, Walsall and Wolverhampton City under a single management structure and unified budget (see section 1.2 for full details)

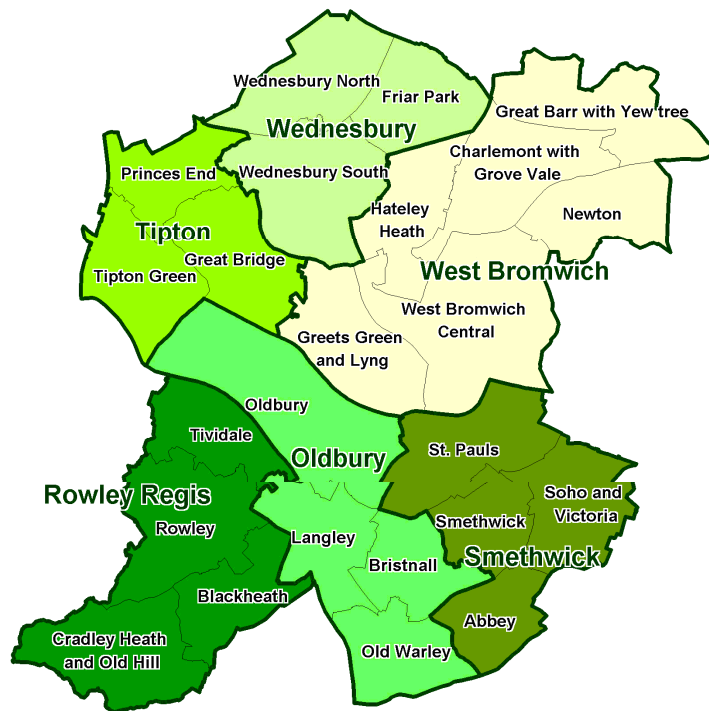
### **3.3.2 Sampling sites**

As mentioned at the start of section 3.3, participants were recruited from households located within two Sandwell towns:

- West Bromwich
- Smethwick

(See section 3.3.2.3, to follow, for an explanation of why these two particular towns were selected). The map below (figure 3.2) shows the towns and wards of the Metropolitan Borough of Sandwell.

**Figure 3.2: Sandwell Metropolitan Borough – by town and ward.<sup>2</sup>**



<sup>2</sup> Image taken from JSNA 2008 Sandwell PCT (2008a) 'Review of health needs across Sandwell', *Joint Strategic Needs Assessment*, available: [www.webwell.org.uk/JSNA](http://www.webwell.org.uk/JSNA) [accessed October 2010]. Ordnance Survey 100044535, Sandwell PCT 2008

### **3.3.2.1 West Bromwich**

West Bromwich town is made up of six wards: Great Barr with Yew Tree, Charlemont with Grove Vale, Hatley Heath, West Bromwich Central, and Greets Green and Lyng. West Bromwich has an older population than the borough as a whole, with 18% of its residents aged 65 and over compared to 16.5% for Sandwell (Black Country Consortium 2011a). Life expectancy in the town is 80 years for women and 75 years for men (Sandwell PCT 2008a). In terms of ethnicity, 76.3% of West Bromwich residents are white, 16.5% are Asian, 4.6% are black, 2.1% are mixed race and 0.4% are Chinese (Black Country Consortium 2011b). With regard to employment, 69.1% of the West Bromwich population is classified as economically active, compared with 72.9% for the entire borough. As with the rest of the borough unemployment is much higher amongst males in West Bromwich than amongst women. In total, 6.4% of West Bromwich working age residents were claiming benefits in September 2010 compared to a borough average of 6.7% and a national rate of 3.5% (Black Country Consortium 2011b).

Recruitment focused on selecting individuals that lived close to and / or reported regularly using the main town shopping area in West Bromwich Central ward. As well as the shops on the High Street there is a shopping mall, indoor market, outdoor market, and a selection of supermarkets.

### **3.3.2.2 Smethwick**

Smethwick town is made up of four wards, Abbey, Smethwick, St Pauls, and Soho and Victoria. The population of Smethwick is younger than the rest of the borough, with 44.5% of residents aged under 30, compared to 39.1% for the whole of Sandwell (Black Country Consortium 2011a). Life expectancy in the town is 79.8 years for women and 74 years for men (Sandwell PCT 2008a). In

terms of ethnicity the population of Smethwick is particularly diverse and is one of the most multi-cultural towns in Sandwell. White residents comprise 57.9% of the population, 30.3% are Asian, 7.7% are black, 3.5% are mixed race and 0.2% are Chinese (Black Country Consortium 2011a). With regard to employment, 69.1% of the Smethwick population is classified as economically active, compared to 72.9% for the entire borough. As with the rest of the borough unemployment is higher amongst men than women. Unemployment is at 7.6% (Black Country Consortium 2011a).

Recruitment focused on selecting individuals that lived close to Smethwick's busiest shopping area, Cape Hill. In addition to the High Street shops there is an Asda supermarket in the retail park, an indoor market and a wide variety of small businesses and speciality Asian food shops.

### **3.3.2.3 Rationale**

These areas were selected on pragmatic, opportunistic and methodological grounds, with the aims of maximising recruitment and achieving as diverse a sample as possible. The towns are next to each other and contain some of the busiest shopping areas in the borough (West Bromwich town centre, Cape Hill and Bearwood). The Great Bridge retail park is also located on the border of West Bromwich and Tipton. Smethwick town contains the Cape Hill retail park and parts of the Bearwood area (covering some of Smethwick and Abbey wards) make-up one of the most affluent areas in Sandwell. Both towns comprise a mixture of the most and least deprived wards in the borough and both have an ethnically diverse population.

The offices of Sandwell PCT are located on West Bromwich High Street and many of the community schemes and meetings that I recruited from met close by and operated in that area. Added to which, I had accommodation in

Bearwood for the duration of the field work, made a number of contacts there and came to know the area quite well.

## **3.4 Sampling**

### **3.4.1 Sampling approach**

As discussed in section 3.1, a total of 26 participants were recruited, from which 25 food photo-diaries, 26 semi-structured interviews and 23 go-along interviews were collected. An appropriate sample size, for a qualitative study, is one that adequately answers the research questions (Marshall 1996). In qualitative research it is almost impossible at the outset to state exactly how many groups and individuals will be sampled. My original target for recruitment was 24. Qualitative studies on food behaviours that use semi-structured interviews (collected by only one or two researchers), rarely conducted more than 70 interviews (Scarpello et al. 2009, Krall and Lohse 2009, RUHBC 2008, Wills et al. 2009, Zehle et al. 2007, Aree et al. 2004, Parker and Keim 2004, Waqa and Mavoia 2006). In practice, the number of required participants usually becomes obvious as the study progresses, as new categories and explanations stop emerging from the data. This requires a flexible research design and a cyclical approach to sampling, data collection and analysis (Marshall 1996).

A representative sample was not sought as it is not conducive with the qualitative paradigm. While qualitative sampling is not representative it can be typical. This was achieved by sampling for diversity and selecting information-rich respondents. The sample was as diverse as possible in terms of gender, age and ethnicity (see table 3.1 below). Excluding or limiting potential participants on criteria other than area of residence could potentially have obscured the effects of overlapping vulnerabilities on health (Cattell 2001). Qualitative



research design, especially for studies exploring emergent themes and topics, often requires an iterative and theory driven sampling technique (Marshall 1996). The analyst cannot know in advance precisely what to sample for and where it will lead (Coyne 1997, Glaser and Strauss 2007).

### **3.4.2 Recruitment**

In terms of recruiting my sample, Sandwell PCT, the CASE partner (see section 1.2), provided a range of initial recruitment opportunities. Initially, I began recruiting in West Bromwich. I accompanied a community health worker on visits to group meetings and Cookwell classes. The social groups were held in community centres and catered for specific groups such as the unemployed or retired people. Cookwell is a scheme run by Sandwell PCT which provides free-of-charge group cookery lessons to local people. The PCT provided all the ingredients and utensils and people were only required to bring a container with them to take their food away in. We went to local community centres and libraries, where I was introduced to key staff and managers. Community workers can help develop strategies for recruiting participants, introduce the researcher to potential informants and overcome problems of access (Savage et al. 2006). These gatekeepers allowed me to meet, recruit and even interview members of the public at group meetings.

I also produced recruitment materials (see appendix 3.1) that I asked to display on notice boards and in foyers. As can be seen the poster (item a) has a simple layout and provides all my contact details. I used the image of supermarket trolleys to emphasise the focus on shopping behaviours. In practice, participants who noticed the poster all asked the community centre managers for more details and were subsequently put in touch with me, rather than contacting me directly or returning the slip on the information sheet (appendix 3.1 item b).

The information sheet was intended as a resource for the community centre managers. If they received enquiries about the posters (appendix 3.1 item a) they could give potential participants the information sheet (appendix 3.1 item b) which provided further details and a return slip to contact me with.

Although the recruitment materials were designed to facilitate direct contact with participants, in practice contact was mediated by the community centre managers, further illustrating the key role that gatekeepers hold in the recruitment process. It was relatively easy to successfully recruit in such settings, especially since the social nature of these contexts and the relationships between potential participants meant that once one person expressed an interest, several of their friends would typically do so as well. However, the individuals that attended these groups were overwhelmingly white, female and over 40. In the interests of sampling for diversity I started to recruit from other sites including various fitness classes at the YMCA, Parent and Toddler groups and walking groups in Bearwood. In each instance I was initially introduced to potential gatekeepers and participants by a PCT community health worker.

After a few months of this approach I had become known to many of the health and community workers in the area. This made it possible for me to start approaching public sector gatekeepers, such as head teachers, on my own and without prior introduction from a community health worker. By this point in my field work I had progressed from having permission and access granted by gatekeepers to gaining their assistance, cooperation and support (Wanat 2008). This gradual shift and improvement in status made the final stages of recruitment much easier and quicker compared with my initial recruitment efforts. The difference between securing *cooperation*, as opposed to merely *access*, means that the researcher is able to draw upon the support and assistance of gatekeepers and community figures whilst in the field (Hammersley and Atkinson 1995). I was able to ask existing gatekeepers to recommend and introduce me to new ones and to new pools of potential participants.

Once I had negotiated access with gatekeepers I would usually arrange to talk to one, or even a series, of their groups or staff at a specific time. After being introduced I would make a short presentation of about five to ten minutes outlining the aims of my study and exactly what participation would involve. At this point I distributed further copies of recruitment materials (see appendix 3.1). I told these groups that I would return at the end of the class or session to talk to anyone that wanted to know more about the study or was thinking of participating. Sometimes, after talking to me at one of these sessions and providing their personal details and informed consent, the participants would want to start the study straight away and I would brief them and issue them with a participant pack (see appendix 3.2) and a camera. Other individuals preferred instead to arrange a specific meeting, a few days later, at which they could be fully briefed and given the study materials

In addition, I was also able to recruit more people through the existing sample by asking them if they knew and would introduce me to anyone else that they thought might be interested. I recruited three participants in this way, all men. Lastly, I leafleted houses in four streets near where I was staying in Bearwood. I only recruited one participant in this way, but he proved to be one of the most engaged and informative of the people who took part in the study.

A significant aid to recruiting and retaining participants, for this study, was the use of digital cameras as an incentive. Participants were issued with a digital camera at the beginning of the photovoice exercise (a full description and discussion of this will be given below in section 3.5.1). Participants were informed that, at the end of the study, they would be given the camera to keep, while I would retain the memory card used for the activity. This proved to be an effective way of engaging people with the study and getting their attention when trying to recruit. The purpose of providing participants with incentives is to maximise participation and minimize attrition over the life of the study (Rice and

Broome 2004). Offering participants a camera that they could keep at the end of the study was a way of ensuring that they agreed to a go-along interview after their photovoice interview.

The participant packs (see appendix 3.2) were given to participants at the briefing sessions. The packs were designed as a set of resources for participants for the duration of the study and as a point of reference. They consisted of a title sheet (with my contact details restated); a reproduction of the information sheet (appendix 3.1, item b) that was used as a recruitment aid; illustrated instructions for the photovoice exercise; illustrated instructions for using the digital camera; a smaller contract information card to pass on to other potential participants; and a note sheet on which participants could manually record their food and drink (if they so wished). The pack materials focus on the photovoice, rather than the go-along stage of data collection. Participants were left alone to carry out the photovoice exercise for a four-day period and so a clear set of illustrated instructions and examples was a way of supporting the most participant-led stage of data collection. By contrast, very little information is given about the go-along interviews (they are referred to only in the 'information for participants' sheet). I wanted to avoid predefining them and, thereby, influencing the food shopping behaviours performed during interview. A description of the piloting and development of these packs will be given in section 3.5.4.

At the briefing sessions I explained the duration and requirements of the study. A full description of how the briefings were developed and piloted is also given in section 3.5.4. The briefing sessions varied between participants. In some cases I briefed participants in pairs, as they felt more comfortable this way and had encouraged each other to participate. It was at this point that I obtained informed consent and asked the participants to sign the two informed consent forms for the study (appendix 3.7 and 3.8) and provide me with their contact details. A full description of the consent process will be given in section 3.7. It was at the briefing that I explained the gift, or incentive, of the camera as a

‘thank you’ gesture in return for the time and effort they were agreeing to invest, which is a common practice amongst qualitative researchers when offering and explaining incentives (Head 2009). One of the more common ethical concerns with offering participants incentives is that it can disproportionately influence vulnerable people and cause them to place themselves at greater risk than usual because they need the goods or services being offered (Rice and Broome 2004). Since the digital cameras are consumer goods, rather than essential goods or services, participants typically viewed them as a ‘bonus’ paid for by the PCT rather than a payment. One participant, a middle aged fitness instructor, was very direct about her expectations at the close of our interview:

*CT: Just to finish off ... is there anything you want to ask me?*

*Melissa: Yeah ... where’s my camera? (laughs)*

**(Melissa, aged 47. Extract from photovoice interview)**

Another concern is that payments to participants could be described as degrading the idea of a ‘common good’ (p.343) that research contributes to, and instead transform it into a commodified exchange (Head 2009). For some participants the deciding factor in whether or not to take part was indeed the offer of a digital camera, it was an effective incentive. However, the monetary value of the cameras offered was relatively low. Added to which, an exchange of goods does not necessarily mean a loss of concern for the ‘common good’. One particular participant, a part time charity worker, explained to me during a telephone conversation, that he would be happy to participate because the digital camera on offer could later be used to photograph events run by the charity for their posters and website. I agreed to pay for some of these photographs to be printed (those that he had recorded during the same week as the food photo-diary) and gave them to him at the start of our photovoice interview.

Whether paid or not, individuals agree to participate in research for a variety of reasons. For some of my participants the camera was a powerful incentive. For others, such as a civil servant living in Bearwood, health concerns motivated their choices. Lawrence had recently completed an extended period on a meal-replacement diet and lost a great deal of weight. He was still keeping a food diary at the time he participated, as he explains below:

*CT: You keep a food diary?*

***Lawrence: At the moment I do, yes only because it's rough and ready but I need to because I finished doing that diet I was on about a month ago and initially, first week you had to eat really like carbs this, that and the other. Then I went on holiday to Switzerland and Italy for a week and I just ... I think I'm just paranoid cos having not eaten anything for 3 months I thought 'If I start eating pizza and beer, drinking beer and it all goes wrong', and it made me very consciously control what I'm doing ... ..but I just thought if I had a week where it all goes horribly wrong it'll tell me why. But I will stop doing this ... in time, once I know what I'm doing and I know what I'm safe having.***

**(Lawrence, aged 43. Extract from photovoice interview)**

For him, participating in the study was, arguably, a way to further explore and establish his new eating habits. The motivations and expectations held by participants of ethnographic studies are by no means uniform or simple to deconstruct. Although sometimes problematic, this diversity can add depth and variety to the data. In my research I was able to reflect a range of 'world views' and narratives around food practice from a diverse range of individuals.

Although some participants frequently described their food practices in terms of health, the recruitment materials (see appendix 3.1) and briefing were not framed in terms of health. The study was presented as an investigation of food choices both in the home and when shopping for food. I explained to

participants that I was interested in finding out how they made decisions about which foods to buy and eat. My study is a health geography project and I am interested in the way food practices and broader socio-cultural influences shape diet, and thereby health. Yet, I did not explain the study to participants in these terms. Instead, I focused on the more narrow topic of investigating food choice, without contextualising it in the wider body of health research and literature. As can be seen in appendix 3.2, the participant pack title is ‘food and food shopping in your local neighbourhood’, and the stated aim of the study is to investigate ‘factors that affect food choices and behaviours.’ This is in keeping with the aims of this thesis outlined in section 2.5

I did not deceive participants about what I was investigating, as the project was about trying to understand their food choices. However, I did omit to explain the broader context of the study. Hammersley and Atkinson (1995) explain that rather than a straight forward matter of whether or not to deceive participants, ethnographers face the more nuanced task of deciding how much to tell to whom on what occasion. In my case, full disclosure of the research aims, in relation to health, could have lessened the validity of the data collected. Hammersley and Atkinson further argue that an element of not telling the whole truth may be justifiable so long as it is not designed to harm the people researched, and so long as there seems little chance that it will do so (Hammersley and Atkinson 1995). Indeed, my omitting to explain the health elements of my study was not intended to harm participants and, to the best of my knowledge, no harm was caused.

The purpose of not telling participants about the health aspects of my research was to limit the extent to which they may have felt inclined to present, justify or reinterpret their practices in relation to health concerns. Ethnographers describe how people actually behave, not how they *ought* to behave (Blomberg et al. 1993). Influential and moralising discourses of healthy eating operate throughout Public Health, education and media channels and I aimed to avoid an

uncritical reproduction of these in my data collection. Rather, I wanted to interrogate actual performed practices and the meanings attached to, and created by, them.

### **3.4.3 The sample**

In the interests of anonymity each participant is referred to by a pseudonym. The use of pseudonyms is a standard technique for maintaining anonymity in qualitative research (May 1997, Hill 1993). All quotes and references to participants in this thesis will be made using their pseudonyms. The social characteristics and household composition of the participants are listed in the table below (table 3.1)

The sample was mostly white (n=20) and aged over 30, with some Asian and African Caribbean participants (n=6). The people in the sample had a relatively low-income, with one third of participants not in paid employment (n=12). Twenty-five photo-diaries were collected depicting the diets of the 26 participants described below (one photo-diary was joint between a cohabiting couple, Hollie and Simon). The participants of this study were drawn from a variety of household structures. Nine (one male and eight females) of the participants had children living at home. Two of the participants were expecting a baby (a couple, Hollie and Simon). Five participants lived with their parent(s) and one had his mother living with him. Six participants lived alone. Of those households in which parent and offspring lived together, 14 in total, 10 reported that the mother did most of the cooking for the household.

The age range for the sample was 18-70 years and comprised ten men and 16 women. Children and adolescents were not of interest as respondents themselves but were discussed in terms of the influence and consideration ascribed to them by the adults in the household. Children were often present for



photovoice and go-along interviews and their comments, behaviours and interactions were included in the field notes where appropriate. Adults have greater purchasing power than minors and, generally, it is the adults in a household who have the responsibility for the food shopping. Existing studies that deal with food shopping for households typically recruit adults only (Scarpello et al. 2009, Krall and Lohse 2009). Adolescent food practices are a well-researched topic in their own right. These studies investigate physical and social contexts such as schools and address the constraints and compulsions imposed by a variety of institutions and authority figures (Backett-Milburn et al. 2006, Wills et al. 2005, Wills et al. 2008b, Bell and Cooper 2005, Green et al. 2003).

**Table 3.1: Participant pseudonyms and social characteristics**

<b>Participant characteristics and household composition</b>			
Participant	Social characteristics	Reported household composition	Data collection stages participated in
Dave*	Male, White, 45 years old Not in paid employment	Lived alone in temporary accommodation at the YMCA.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Melissa*	Female, African-Caribbean 47 years old Employed	Lived with her secondary school-age daughter. Her adult son and his family visited several times a week and regularly cooked at her house.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Lauren*	Female White 23 years old Employed	Lived with brother and her parents. Her father was not in paid employment and her mother worked	- Food photo-diary - Narrative photovoice interview - Go-along interview
Sue*	Female White 49 years old Not in paid employment	Lived with her twin secondary school age daughters. Her partner stayed with them regularly and his son also visited at weekends	- Food photo-diary - Narrative photovoice interview - Go-along interview

Collette*	Female White 44 years old Not in paid employed	Lived with her 5 children; 2 of whom were at school, 2 in college and 1 at work.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Pamela*	Female African-Caribbean 42 years old Not in paid employment and had daily voluntary work commitments	Lived with her mother (retired). Their extended family visited the house on a daily basis and often cooked and ate there.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Janet*	Female White 63 years old Retired	Lived with her partner, also retired.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Pat*	Female White 69 years old Retired	Lived alone and had her youngest son (aged 31) to stay every other weekend	- Food photo-diary - Narrative photovoice interview - Go-along interview
Adam*	Male White 18 years old Not in paid employment	Lived alone in temporary accommodation at the YMCA.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Jayanti*	Female Asian (Indian) 45 years old Employed	Lived with her husband, who worked full time, and 2 of their children. Her eldest (daughter) was away at university and sometimes came home at weekends.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Hasan*	Male Asian (Bangladeshi) 34 years old Employed	Lived with his wife, who was not in paid employment, and their 5 children, all under the age of 7. His mother (retired) also lived with them.	- Food photo-diary - Narrative photovoice interview
Clifton*	Male African-Caribbean 43 years old Employed	Lived with his lodgers, a young married couple from Lithuania.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Brian*	Male White 57 years old Employed	Lived with his wife, who worked full time.	- Food photo-diary - Narrative photovoice interview - Go-along interview

June^	Female White 69 years old Retired	Lived alone	- Food photo-diary - Narrative photovoice interview - Go-along interview
James^	Male White 18 years old Student	Lived with his parents and brother, who all worked. He had another brother on active service in the army.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Lawrence^	Male White 43 years old Employed	Lived alone during the week and with his partner, who worked abroad Monday to Friday, at the weekends.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Alan^	Male White 51 years old Retired (and voluntary work commitments)	Lived alone	- Food photo-diary - Narrative photovoice interview - Go-along interview
Diane^	Female White 48 years old Employed	Lived with her mother, who was retired.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Lisa^	Female White 38 years old Employed	Lived with her husband, who worked full time, and their 3 children. 1 child was of nursery age and 2 were at school.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Catherine^	Female White 37 years old Employed	Lived with her husband, who worked full time, and their nursery age daughter.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Poppy^	Female White 43 years old Not in paid employment	Lived with her husband, who worked full time, and their nursery-age daughter.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Tracy^	Female White 33 years old Employed	Lived with her parents. Her mother was retired and her father worked full time. Her sister and her secondary school-aged niece also lived with them.	- Food photo-diary - Narrative photovoice interview - Go-along interview
Caroline^	Female White 52 years old Employed	Lived with her husband and their 2 sons, 1 of which worked with the husband and the other was still at school.	- Food photo-diary - Narrative photovoice interview - Go-along interview

Jaspreet <sup>^</sup>	Male Asian (Indian) 60 years old Not in paid employment	Lived with his wife, who was also not in paid employment	- Food photo-diary - Narrative photovoice interview
Hollie <sup>^</sup>	Female White 21 years old Not in paid employment	Hollie was pregnant and lived with her partner, Simon.	- Joint Food photo-diary and go-along interview with Simon - Individual narrative photovoice interview
Simon <sup>^</sup>	Male White 27 years old Not in paid employment and had voluntary work commitments 3 days a week.		- Joint Food photo-diary with Hollie - Individual narrative photovoice interview - Joint go-along interview with Hollie

\* indicates West Bromwich residents

<sup>^</sup> indicates Smethwick residents

All of the participants in this study are quoted in the thesis, although some feature more heavily than others. In particular the data from Jaspreet was challenging to code and present as I had to ask a third party (community gatekeeper) to act as translator for the interview and was restricted on the amount of time available. Jaspreet spoke some limited English, but he did not feel comfortable being interviewed in English. The participant and the translator knew each other quite well. During the course of the interview the translator joined in with discussions and it was often unclear to me whose opinions were being expressed. The data, therefore, were problematic to analyse. Additionally, there were no go-along interviews conducted with Jaspreet and Hasan as they both felt it would be ‘inappropriate’, for ‘cultural reasons’, for me to go shopping with them as an unaccompanied female. In this instance, the impact of my social identity (specifically my gender) upon the data collection process is very clear.

### **3.4.4 Reflexivity and positionality**

Thinking critically about the context and act of research is to engage in reflexivity (O'Reilly 2009). The researcher must look both inwards at their own identity and outwards to their relation to the research and the wider social world (Rose 1997). My social characteristics certainly had an effect on both the composition of the sample and my subsequent interactions with them. I had considerable difficulty recruiting men, especially if I approached them directly. Despite sampling for diversity, 11 of the participants (nearly half of the sample) are, like me, female, white and aged over 30. This was further compounded by the fact that most of the community gatekeepers and PCT staff that introduced me to potential participants were also female. Most of the attendees at the community-run groups I attended were women. In this sense my social characteristics made it easier for me to approach and build a rapport with potential participants, as my presence in Parent and Toddler groups and in schools appeared relatively unthreatening and common place. However, it also somewhat inhibited my pursuit of a diverse sample. To address this gender imbalance I purposely sampled for male participants in the latter stages of field work.

Throughout the fieldwork process I made field notes in which I kept a self- reflexive account of the interviews. However, complete reflexivity is not possible. Recognising and endeavouring to tackle issues of positionality still cannot ensure complete transparency (Rose, 1997). Nevertheless, a reflexive approach must still be pursued. An unwillingness or inability to locate the 'self' in the field will invalidate research (O'Reilly 2009). I am likely unaware of many other aspects of my positionality that may have impacted on recruitment and selection. Researchers cannot know everything and cannot reflexively survey power as they cannot fully understand, control or redistribute it (Rose 1997). Positionality, specifically in terms of gender, can also influence the nature of data collected and, consequently, the information that becomes coded

as knowledge (Rose 1997). There was a tacit assumption in many of the interviews I conducted with women of shared experiences and concerns with shopping and cooking for others.

For many of the interviews the children and / or partners of participants were also present. An interview is a social interaction (Mason 1996) that requires a social performance from both the interviewer and interviewee. This was especially pertinent to go-along interviews when small children were often present. Participants were, therefore, mediating responses and behaviours according to their relationship and responsibilities with any third party present. The performativity of the participants was dependent not only on which members of their household were present, but also on the demands and positionality of the researcher.

My positionality influenced the process of ‘managing impressions’ that participants undertook in the interviews (Prasad 2005). Being affiliated with, funded and introduced by Sandwell PCT affected the ways in which participants viewed and related to me. In many instances, potential participants assumed that I was a community health worker and that I wanted to find out how ‘healthy’ they were, or give them advice and education. This is unsurprising given that the PCT ran a considerable range of community health and outreach programmes. The most noticeable result of this interpretation is that I was frequently asked by individuals, at least in our initial meetings, to comment on their diets or give them guidance. As discussed in section 3.4.2, the study was not presented to participants in terms of health or health outcomes. It was framed as a study about food choices. It often took some time and effort to explain that I was interested in what they thought and did about food, not in changing or judging their behaviour. Although I was careful to try and thoroughly dispel any assumptions of this nature, they still permeated the research process and the data collection. For example, in the extract below a participant explains what her

husband and daughter were doing while she was working and eating alone in their home:

*Catherine: That probably er ... would have been a snack for ... no that was me, that was mine. What was I doing? I think I was ... That's it. My husband took K--- (daughter) out. He took her to MacDonald's, that's really bad ... in, er ... a study like this (laughs)*

(Catherine, aged 37. Extract from photovoice interview)

Despite the fact that 'choice', rather than 'health', was explicitly referenced in study literature, participant packs and briefings, the participant implicitly suggested that her choices would be judged in '*a study like this.*'

Working closely with, and being funded by, the PCT also had implications for the development and direction of my research. My initial literature review and, thereby, some of my research questions were concerned specifically with obesogenic environments research. As discussed in section 3.3., Sandwell's adult and child obesity rates are significantly above the national average, a cause of considerable concern and expense for the PCT. At the start of my studies I intended to frame my research in terms of taking a qualitative approach to the study of obesogenic environments. Although my research interests and questions developed as the study progressed to focus on interactions with the food environment, and away from obesity literature, my overview and approach to the topic, arguably, remains grounded in public health literature and theories. Biographical, funding and institutional influences can interweave to determine both the process and outcome of ethnographic projects in the before, during and after stages of research (Roberts and Sanders 2005). In this case, my gender, affiliation with the PCT, and the institutional influences of studying public health literature as a health geography student are just some of the factors that have shaped the course of the data collection and analysis.

## 3.5 Data Collection

The data were collected in three broad stages:

- 1) **Photovoice.** Participants were given a digital camera and asked to photograph what they ate, where they ate it and (if applicable / appropriate) with whom. This formed a food photo-diary that they were subsequently interviewed about.
- 2) **Narrative photovoice interviews.** These semi-structured interviews provided a narrative account of food photo-diaries using the photographs as a prompt and reflexive tool. They also included more general questions about food practice.
- 3) **Go-along interviews.** These were carried out in the participants' local areas and took the form of accompanied food-shopping trips. This served as a means of exploring interactions with, and perceptions of, the built environment.

### 3.5.1 Photovoice

Participants, once recruited, were asked to provide personal and contact details. I then issued them with a digital camera, memory card and participant pack (see appendix 3.2). Participants received either a Praktica DC Slim 315 camera (see figure 3.3) or, when this model was no longer available, a Vivitar ViviCam 5018 camera (see figure 3.4).



**Figure 3.3: Praktica DC Slim 315<sup>3</sup>**



**Figure 3.4: Vivitar ViviCam 5018<sup>4</sup>**



Over a four-day period participants photographed everything they ate and drank, where and with whom. Included in the ‘participant pack’ was a four-day photo-log note sheet that they could fill in in addition to taking photographs (see photo-log note sheets in the participant pack - appendix 3.2). This proved especially useful for when it was not appropriate to take photographs. For example, when one participant attended a funeral during the photo-diary period and, rather than taking photographs, she recorded what she ate on the log-sheet. The overall aim of this exercise was to compile a very detailed ‘what, where and who with’ snap-shot of individual eating habits. The photo-diaries generated served as a form of visual diary that was then used to prompt and inform later interviews (Corti 1993, Dennis et al. 2009).

This type of methodology is known as ‘photovoice’, and refers to approaches that require participants to take photographs that are subsequently discussed at interview (Olliffe et al. 2008, Harper 2002). A photovoice methodology was recently used by Haque and Rosas (2010), in their study of

---

<sup>3</sup> 3.1 Mega pixel Digital Camera with 1.5" preview screen, 4x digital zoom, SD card up to 1 GB usable Pracktica (2007) 'DC Slim 315', [online], available: <http://www.praktica-uk.com/pdf/DC%20Slim%20315.pdf> [accessed 15/06/07].

<sup>4</sup> 5.1 Mega pixel Digital Camera, with 2.4" preview screen, 8x digital zoom, SD card up to 1 GB usable Vivitar (2010) 'ViviCam 5018', [online], available: <http://www.vivitar.com/products/1/digital-cameras/19/vivicam-5018> [accessed 15/06/07].

immigrant health in Toronto. They asked immigrant residents to take photographs of their neighbourhood. These photographs were used to help explain and share their perceptions and thoughts about their neighbourhood through photographs and stories, thereby capturing neighbourhood characteristics that influenced their health and wellbeing (Haque and Rosas 2010).

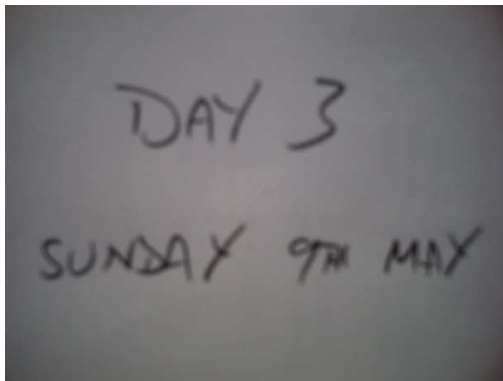
By keeping a visual record of what they ate, participants were prompted into examining less obvious aspects of their food practices. The data provided an empirical point of comparison and reference for subsequent stages of research. Elicited texts, such as diaries and journals, are useful for contrasting with direct observations and interviews, as they elucidate the construction and reconstruction of identities (Charmaz 2006). The photographs served as a prompt and resource for further qualitative enquiry, so that participants could explain and expand upon the contents. Requiring participants to generate empirical data (photo-diaries) for discussion in the follow-up interview revealed actual practices and their influences. Keeping this visual record also provided insight into routine food practices, prompting conversations about things that people would not think to mention in their everyday talk about food and, often, things that people did without thinking. They also served to highlight contradictions and context specific behaviours, disrupting the self-narratives of food practice that participants presented. The photographs provided the initial means to find out about participants' households, social contacts and interactions with the built environment. In addition to the illustrated digital camera instructions in the participant pack (see appendix 3.2), I also explained how the camera worked during the briefing session. The cameras were very simple to use and I invited the participants to take some photographs during the briefing and familiarise themselves with the camera functions. None of the participants reported any difficulty with using the cameras.

Photovoice is a user-friendly technology that can be fun and easy for participants to grasp. It also provides an opportunity for participants to feel valued and taken seriously, as they are independently generating the data (Dennis et al. 2009). However, it is important to note that the only two participants to leave the study did so directly after attempting the photovoice exercise. The first, a woman of 44 returned the camera after a week having only taken four photographs. She reported that she had found it very embarrassing taking photographs of her lunch at work, especially as her co-workers were eating with her at the time. She explained that it would have been ‘too much’ to have repeated this over a four-day period. She did not feel comfortable with the photovoice activity and was also concerned that it might cause her ‘trouble’ at the factory she worked in. The second participant, a young man of 20 living in temporary accommodation, also decided to leave the study. I was unable to contact him for two weeks after giving him the camera. When I did meet with him again he returned the camera and explained that he had family problems that had made it very difficult to concentrate on participating in the study and that he did not think keeping a food photo-diary was something he would be able to do. Although relatively straightforward, the photovoice exercise did require a substantial degree of commitment from participants, more so than a one-off interview on food practices would have. For this reason, offering participants the camera as an incentive (see section 3.4.2) may well have reduced attrition.

There are many potential problems with photovoice. As with all self-report data there is the risk of misreporting. When using photovoice to investigate food practice the most obvious draw-back was that participants could simply choose not to record certain foods. Indeed, interpretation and levels of engagement for this activity differed significantly. The number of photographs per photo-diary ranged from 15 to 75. Some participants filled in the photo-log note sheets fully and took the time to clearly record the exact contents of the photographs and the time they were taken. For example, one participant went to the trouble of photographing sheets of paper with the day and date on so that I

would find the photo-diary data easier to make sense of (see plate 3.1 below). The quality of photographs that participants took varied quite considerably. Although the cameras were easy to use and relatively cheap they did not always produce very good quality photographs, as is evident in the chapters that follow. Given that the participants could view photographs as soon as they had taken them and so, if necessary, take another, this did not prove too much of a problem.

**Plate 3.1: Photograph by Lawrence from his food photo-diary**



Some of the participants followed the photovoice instructions to the letter and photographed *where* they ate their food and *who with*, thus providing physical and social context. They also took photographs of every snack and drink they consumed. For example, one participant, Sue, took 73 photographs in all, 27 of which were of cups of tea and coffee that she and her household consumed over the four-day photo-diary period. Whereas some other participants just took photographs of the meals they ate at home and did not include any contextual images, information or notes in addition to that. These differences in approach and engagement among participants are indicative of the highly individualised and subjective nature of photovoice methods. Decisions about what to photograph and what counts as ‘relevant’ are interpretive decisions made by participants (Harper 2002). All participants were provided with the

same materials, instructions and illustrations, yet their interpretation and enactment of the activity varied considerably. As a participant-led methodology, and in keeping with the interpretative paradigm, this variance reflects the subjective and individualised nature of the data such methods generate.

### **3.5.2 Narrative photovoice interviews**

I met with the participants again within a few days of them completing the photo-diary. At this point we set, or confirmed, a date for the narrative photovoice interview. I took the camera away (temporarily, as I would be using it again for the go-along interview) and printed the images from the memory card. I always attempted to arrange the interview as soon as possible after the photo diary-exercise was complete so that participants were more likely to still have a clear recall of the photo-diary period. The overall purpose of these interviews was to describe food practices, with specific reference to social and physical context, by eliciting a narrative of food practices via the photographs. All printed images were numbered, in preparation for the photovoice interview. These interviews were structured, to an extent, around the photographs produced in the previous stage.

A copy of the interview schedule is provided in appendix 3.3. As can be seen, the questions were intended to prompt narratives, to encourage participants to tell the ‘story’ of their food practices over the food photo-diary period. Question 6a (‘Is there anything in your personal history that makes you choose certain types of food?’) was intended to open-up discussions about family, culture and identity (as examined in section 2.4 of the literature review). Typically, these issues would have been touched upon, at least, earlier on in the interview. Asking the question outright gave participants a cue to self-identify with a particular set of practices or position and then describe them. For the most part, this question generated rich data on identity and beliefs around food.

However, a small number of participants simply answered ‘no’ and could not be drawn into reflection.

The main aim of the other questions was to establish the physical and social context in which food practices were performed and to generate descriptions of ‘typical’ routines. For example, the prompt ‘Is this what you normally eat on this day / at this time / when at work etc.?’ was used repeatedly to establish ‘eating routines’ (Jastran et al. 2009) ( as examined in section 2.41). Question three in particular, ‘Do you think that you eat and drink different things around different people?’; question five, ‘Tell me about the people in your photographs and how you know them’; and question 6b, ‘How do the people you live with or the people you know effect how you think about food?’, were informed, broadly, by social science literature on eating as a social practice. Participants were encouraged to make links between what they chose to eat and who they were eating with in order to explore the social contexts that might shape their food practices.

The questions for the schedule (see appendix 3.3) were arrived at through a mixture of topics arising from the literature review, as described above, and some practical concerns highlighted in the piloting process. A description of how the photovoice instructions and the narrative interviews were developed and piloted is given in the next section, 3.5.4. I found that when piloting the photovoice exercise the photographs were much less self-explanatory than I anticipated. When presented with a bundle of photographs that were not necessarily in the correct order it could be quite difficult for participants to make sense of them. The prompts ‘Can you remember at roughly what time you took this photograph?’ and ‘What made you go to this shop / restaurant / take away / supermarket?’ helped participants to recall and narrate what they had been doing over the course of the food photo-diary period and to link the photographs together.

All interviews were audio recorded. As can be seen in the interview schedule, I began by asking the participants to look through the photographs, check that they were in the correct order and to rearrange them if necessary (using the prompts described above to help them). Together, the participants and I then filled in a photo sheet (see appendix 3.4), on which we recorded the day, approximate time, content, physical and social context of each image. The photo sheet was merely a list of photograph numbers and details, but in practice it provided an activity to structure the interviews around and was useful to refer back to during the interview. Often, filling in the photo sheet would last the duration of the whole interview, as each photograph could prompt many potential conversations and topics. We would start talking about some of the people, places or foods in the photographs and the interview would progress onto different aspects of their food practices and the factors that shaped them. In this sense the photographs, and the task of recording data on each one, provided a framework for the interviews and also served to generate an accompanying set of descriptive data for each photo-diary. The photographs were not analysed as a discrete data set, but were instead used to promote critical discussion and reflection with the participants (Findholt et al. 2011).

Semi-structured interviews are content focused and organized around ordered but flexible questioning (Dunn 2000). One of the advantages of this approach was that the photographs served as prompts that elicited comments and topics that would not otherwise have occurred. Harper (2002) argues that photographs sharpen the participants' memory and reduce potential areas of misunderstanding. Further, that photographs evoke deeper elements of human consciousness than words, eliciting not just more information, but rather a different *kind* of information (Harper 2002). This was certainly the case in my experience, as participants would often make comments such as 'Oh, I'd forgotten that one' or 'Now, what was that?', as they looked through the photographs.

Semi-structured interviews do not pre-suppose the parameters and scope of understandings and experience (Dunn 2000). Participants were able to recount and reflect upon their food practices in a relatively loosely-structured and unrestricted way. Broadly, the photovoice interviews provided a narrative account of the food photo-diary. In a narrative interview the interviewee puts together what they believe has occurred, whilst recognising that what they say might be incomplete and remembering additional material as they go on (Rubin and Rubin 2005). Self-narratives serve as forms of social accounting and public discourse, open to continuous alteration (Gergen 2001). The photographs provided an empirical record of food practices on which to centre these narratives, prompting participants to explain and contextualise their behaviours and choices.

There are epistemological reasons for conducting this type of interview. The information I was trying to extract was complex, contextual and unlikely to be clearly formulated in the participants' minds in a way which they could simply articulate (Mason 1996). A combination of narrative and visual data helped elucidate connections that the participant may not have considered before. The photovoice narratives centred on typical daily routines, the people encountered during these routines and identities associated with them. Participants told the story of what they did during the photo-diary period.

### **3.5.3 Go-along interviews**

The go-along interview is an in-depth qualitative interview that is conducted by a researcher accompanying individual participants on outings in their familial environments (Carpiano 2009). The idea of the go-along interview emerged from ethnographic and anthropological research (Reed 2002, Kusenbach 2003), particularly Kusenbach's (2003) paper on street phenomenology, in which she used them to access reflexive aspects of lived experience in situ. In recent years



it has started to appear in geographic research, most notably Carpiano's (2009) methods paper on the application of go-alongs for health and well-being research. More recently, Evans and Jones (2011) used a mixture of what they referred to as 'walking interviews' and GPS to investigate the relationship between what people say and where they say it. This final stage of data collection took the form of accompanied food-shopping trips, which facilitated observations, descriptions and comparisons of how participants perceived and interacted with the built environment. It also provided an opportunity to clarify details from the photovoice interviews. These interviews complemented the narrative photovoice interviews because the food outlet environment provided a whole new set of prompts and points of discussion from which family and home food practices could be talked about. Participants revealed information about their family's eating routines that would not necessarily have come up in conversation during previous interviews. Using a range of data collection techniques to elicit differing data added depth to the narratives and accounts of food practice that participants gave. An account of how these interviews were developed and piloted is provided in the next section (3.5.4).

Go-alongs are a combination of observation and interview. They provide direct experience of the natural habitats of informants, and allowed me access to their food practices as they unfolded in real time and space (Kusenbach 2003). The two most common forms of go-along are the walk-along and the ride-along (car journey) (Carpiano 2009, Laurier and Lorimer 2007). However, the scope of these interviews need not be limited to a specific journey through the local area. Go-alongs can involve a mixture of activities and modes of movement; lasting anything from minutes to whole days (Kusenbach 2003, Carpiano 2009). It represents a more systematic approach than traditional ethnographic participant observation (Kusenbach 2003). I focused on the particular activity of shopping for food.

Symbolic interactionism treats thought and action as situated. Practices are constituted and located within discrete historical, autobiographical and social contexts. In turn, these contexts are themselves defined and recognised by purpose, thought and action (Rock 2001). In order to understand the activity of shopping for food as a situated activity, it is necessary to explore and interrogate it with participants in the sites where it is performed. As outlined in section 2.3.2, there is currently very little observational research on shopping in supermarkets (Gram 2010) and, as a result, one of the stated aims of this study is ‘to explore and describe how people perceive and interact with the micro food environment’ (see section 2.5). Visiting the food environment with them appeared to be the most direct way of achieving this.

As can be seen in table 3.1, the participants varied considerably in age and status. Some of the go-along interviews were conducted with the main family food shopper, such as Collette and Poppy. Other go-alongs were with single people, like June and Clifton, or people who lived with their parents, like James and Lauren. This variety led to some interesting discussions and comments during the go-alongs. Participants would start conversations about topics such as the way their parents approached food shopping, how they used to do the food shopping when their children lived at home, or how their shopping behaviour had changed as a result of a change in diet or the end of a relationship. In this way the go-alongs allowed participants to reflect on the social context of their food practices in a very specific setting that extended upon and enriched the narratives they provided in the photovoice interviews.

As can be seen in appendix 3.5, the go-along interview schedule is somewhat shorter and less detailed than that for the narrative photovoice interviews (appendix 3.3). As a negotiated and participant-led method, go-alongs are difficult to prepare for and explain in advance. Participants decided, and quite often subsequently changed their minds about, where we would go and what we would do. The questions were developed, for the most part, from the

literature review. Kusenbach's (2003) comments on the suitability of go-alongs for capturing environmental perception and spatial practice were particularly useful when designing the questions that I wanted to ask on the journey to and from the food shop (questions one to three). Wherever possible, I arranged to meet participants at their home or work place so that I could travel to the food outlet with them. The journey to and from the store provided an opportunity to talk about other stores in the area and elicit information about why participants chose a particular store or area. Question one from the go-along interview schedule (see appendix 3.5), 'Explain to me where we are going and why we are going there', prompted a range of discussions and comments about the local food environment and why certain stores were preferable to others. However, it was not always convenient for participants that I travel with them, especially for those participants who were very busy. On several occasions I had to meet participants at the store and then would part ways with them as soon as they had finished their shopping.

The limited literature available on go-alongs was of little use in formulating the questions I might want to ask in-store. Go-alongs are typically deployed to explore journeys and perceptions, rather than decision-making and performed activities such as shopping. As discussed in section 2.3.3, routine consumption behaviours, like food shopping, can be unreflective, uncritical and reactive (Ilmonen 2001). The observational nature of go-along interviews meant that I could watch participants' behaviour as they undertook the routine activity of food shopping. The prompts for question four: 'Do you always buy that?'; 'Who is that for?'; 'Why did you choose that one?', were designed to interrogate their repetitive and routine decisions about food purchases. During the interviews I accompanied the participants around the store and asked them to explain their purchasing decisions to me. They led me around the store and I would ask them questions as we went along. During the course of the interviews the majority of participants, after a short while, fell into the habit of explaining and commenting as they went along in a relatively conversational manner. By

contrast, a small number of participants (as will be discussed in chapter five) were extremely difficult to converse with whilst food shopping and were often distracted. I had to rely more heavily on observation and note taking in these instances.

In addition to audio-recording, I took the (participant's) digital camera with me on the go-along interviews to record the journeys we took, the places we visited and the purchases made. In one respect, this served to reinforce and validate the contribution of the participants by demonstrating that their input was taken seriously and warranted recording (Dennis et al. 2009). It also served to complement the photovoice data and helped me to describe and evaluate the sites visited, and thereby enriched the analysis. A visual representation of the feature or site facilitated a more detailed and rich understanding of participant's reference to it. These images can be seen in chapter four, where I describe the sites visited for this study, and in chapter five, in which in-store behaviours and choices are discussed. Observational notes were made during the interview and detailed field notes were generated on the basis of this. Carpiano (2009) suggests that field notes be made immediately after the go-along, regardless of whether it has been audio recorded because the utility of go-along data, in this respect, hinges on the inclusion of adequate levels of physical location information to situate and ground the interviews (Carpiano 2009).

At the end of the go-along interviews (which was also the end of the participants' involvement in the study), we had a short debriefing session after which I removed the memory card and left the camera, and all its accessories, with the participant. Pragmatically, the go-along interview was a useful way to close the research project. It provided the opportunity to schedule meetings with participants who might otherwise be reluctant to devote any more of their time to being interviewed (Kusenbach 2003), given that they had already met with me an average of four times prior to that. The go-along did not require the participant

to greatly interrupt their daily activities, only to agree to being accompanied when buying food at a time and place of their choosing.

### **3.5.4 Piloting and development**

Piloting, in qualitative research, cannot produce a fixed set of questions or approaches that can be uniformly deployed with all participants. An ethnographer never has exactly the same interview or observational experience twice, and the individual researcher themselves is never quite the same over time in terms of their opinions, research or reading. Absolute consistency in ethnographic interviews and observations is, therefore, unrealistic and undesirable (Rock 2001). There is no 'finished' research instrument to be produced. Data collection for this study comprised food photo-diaries, narrative photovoice interviews and go-alongs. It proved to be a lengthy and complex process. Complete data collection took a total of 6 months, including piloting, lasting from January 2010 until July 2010.

In order to pilot the methods and study materials (specifically, the participant packs – see appendix 3.2 and section 3.4.2), I initially approached students in my department and asked them to read the participant pack and complete the food photo-diary exercise. This served to highlight some of the more obvious and simple errors I had made. For example, the first draft of my participant pack did not include illustrations of how the food photo-diary might be approached. I had included too much information on some sheets which made them too dense and unreadable. After correcting these relatively minor presentation problems I continued piloting.

I utilised contacts from family and friends to recruit three more individuals, whom I had not previously met, to undertake the food photo-diary activity. From this exercise I learned that it was my self-presentation and

explanation of the task that needed development, rather than the participant pack instructions. The students who initially piloted the exercise were quite familiar with my study and my ideas before they agreed to test them, as we had discussed them informally several times. When it came to reflecting on the experience they focused on the technical and presentational aspects of it. They already understood why they were doing it and what the exercise was intended to achieve. When I tried to explain my study and the food photo-diary exercise to individuals outside of my department I was asked a series of questions I had not adequately prepared for. Specifically, I was asked for further information about the purpose of the study; how using photographs would be more useful than written accounts; what I intended to do with the photographs; who would see them; and what sort of pictures I was expecting. These individuals also expressed concern over whether or not their photographs would be 'good' or 'interesting' enough. Aside from having to explain the purpose of the study, I had not anticipated any of these questions and was surprised by the extent to which people expected to be judged and categorised.

This experience, especially with the first non-colleague I approached, made me much more aware of how I presented myself as a researcher and how sensitively and thoroughly I needed to explain the study and its aims. My familiarity with the study, and with research paradigms in general, had led me to neglect considerations of how individuals might interpret my research. Part of building a rapport with participants is developing a considered self-presentation that is appropriate not only to the questions the researcher intends to ask, but also to the questions that may be asked of the researcher (Ball 1990). I had not, at that stage, adequately prepared or practised how I would explain myself and my study to potential participants.

Another person who agreed to pilot the photo diary was a parent with a young child. When I explained the exercise she commented that she could not separate her food choices and meals from those of her daughter. For her, all food

choices and preparation were a matter of collective considerations. She could not tell me the story of her food practices without explaining that of her family as well. I could not answer the questions she posed on how she might decide what was 'relevant' to the study in terms of photographing the meals of herself, her daughter, and her partner. At length, I told her that *she* should decide what was relevant and interesting and that I would like to see what those around her ate as well, especially if she was preparing it for them. I explained that I would rather have 'too many photographs than not enough.' This way of explaining the food photo-diary exercise proved very positive and useful with future participants. I found that it was important to stress that I was interested in them and what they did, however mundane they might think it. I tried to emphasise that the more photographs they took and the more detail they produced, the better.

By the time I approached the last individual for piloting I felt more confident in explaining the study, and had begun to ask the participants questions about themselves, their circumstances and their opinions as I went through the participant pack with them. I had started to make the briefing more individualised and tailored to the participant and, thereby, more of a dialogue rather than a speech or set of instructions. In this way, the piloting process was an opportunity not only to refine practices but to rehearse them and become more confident in my delivery.

Go-along interviews, unlike photovoice, were more difficult to anticipate and pilot. I conducted two pilot go-along interviews, one with a fellow student and the other with a non-colleague (the woman with the young daughter, described above). The first felt very stunted and awkward. It consisted of a walk from campus to a small local supermarket and back again. The second was much easier and more conversational, which was probably due to the lack of an existing relationship with the individual. During these interviews I felt a great temptation both to fill the silences when people were looking at goods, and to pre-empt their decisions and purchases, thereby disrupting the act of food

shopping for them. Observing behaviour and allowing the participant to always take the lead proved, later, to be crucial to conducting successful go-along interviews.

The more unstructured and participant-led the methodology, the more problematic it is to pilot. In terms of agency it was the participants that led these interviews. They decided on the venue (be it a convenience store, supermarket or café), the mode of transport and the duration of the interview. Such an approach is intended to empower the participants and maximise the space for narratives about place and practice to emerge (Evans and Jones 2011). For ethnographers, piloting can serve to foreshadow research problems and questions, address issues of validity and refine self-presentation and representation (Sampson 2004). For the go-alongs especially, I found that although it was difficult to anticipate and 'test' particular questions, the piloting did inform my self-presentation and conduct in further interviews. Most notably, I learned to try and keep quiet while participants were thinking about a purchase.

Refinement of data collection methods, in qualitative research, is not confined to the piloting phase. Researchers continue to adapt and develop the methodology as the project unfolds. Ziebland and McPherson (2006) point out that early qualitative interviews can often raise issues that were not anticipated from the literature review and may suggest additional questions for subsequent interviews. I found this to be the case in the data collection for this study. After finishing the piloting, and having conducted two or three go-alongs, I began to reflect upon these experiences. For example, in my original interview schedules I did not include any questions about special offers or in-store promotions (as can be seen in the interview schedules reproduced in appendix 3.3 and 3.5). During my first go-along interview the participant spoke at length about special offers and spent a good deal of time examining products on special offer. This also occurred with my second participant, after which I began asking questions about special offers in both the photovoice and go-along interviews. In fact,



interactions with special offers and promotions emerged as a major theme of the analysis (as will be explained in chapter five).

### **3.6 Data Analysis**

Qualitative analysis is rarely a linear process. Analysis of data and data collection inevitably overlapped to a degree, as the content and format of early interviews shaped my approach and conduct in those that followed, with each process continually informing the other (Donovan 1988, Suddaby 2006). Data analysis should begin at an early stage in qualitative data collection and needs to be highly systematic (Ziebland and McPherson 2006). Ethnography relies on developing a full description of a group or society, with an emphasis on the details of everyday life (Charmaz and Mitchell 2001). Thematic analysis can streamline ethnographic fieldwork and analysis towards a more focused theoretical interpretation. Within the sub discipline of human geography, ethnographic and interactionist inquiry has helped to explore the relationship between context and identity and highlight the social construction of place (Gregory 2000).

#### **3.6.1 Applying a thematic analysis**

A thematic analysis approach was used to synthesise and analyse the photovoice interviews, go-along interviews and fieldnotes. Thematic analysis focuses on identifiable themes and patterns of living, behaviour and talk (Aronson 1994). This study aims to explore and describe both food behaviours and the contexts in which they are performed (see section 2.5). The approach taken to data analysis must reflect the area of interest and research aims, and the stated study aims fit rather well with a thematic approach to analysis, which seeks to generate descriptions of strategies and behaviours (Hammersley and Atkinson 1995).

In application, thematic analysis is by no means a unified approach and is deployed across disciplines and topics in a variety of ways. For example, although located firmly within the interpretivist paradigm for sociologists, thematic analysis is sometimes applied by clinical researchers as almost a form of content analysis, with a sole-focus on identifying recurring descriptive statements (Boyatzis 1998).

Despite being widely used in qualitative research there is a lack of clear conceptualisation and explanation of thematic analysis processes in much of the literature (Braun and Clarke 2006, Boyatzis 1998, Suddaby 2006). Thematic analysis, to a large extent, is based on the same relativist and interpretivist concerns as a purely grounded theory approach, most significantly those of constant comparison and theoretical sampling (Aronson 1994). Descriptions, explanations and relationships are categorised and subsequently explored and refined by applying them to other participants, cases and contexts. The purpose is to develop a narrative explanation, or theory, that can account for and accurately describe the phenomena. These principles necessitate that data collection and analysis are interdependent and that theory and conceptual categories are emergent (Suddaby 2006, Kitchin and Tate 2000). A thematic analysis, however, is differentiated from a grounded theory in that it aims to summarise data into themes that are then explained, rather than necessarily developing a novel theory to describe the findings (Ryan and Bernard 2000).

Braun and Clarke (2006) explain that, unlike discourse analysis, grounded theory, and conversation analysis (CA), a thematic analysis is not tied to a particular theoretical or epistemological position. As a method of analysis it is essentially independent of theory and can, therefore, be applied across a range of theoretical and epistemological approaches. It is compatible with both realist and constructionist paradigms, making it a flexible research tool for providing a rich account of the data (Braun and Clarke 2006). Thematic analysis is a process

for encoding qualitative information, rather than a theoretically informed model for research and analysis (Boyatzis 1998).

For this study, a thematic analysis was deployed within a symbolic interactionist framework. Symbolic interactionist enquiry seeks to interpret what is said and done by participants. The researcher re-examines and re-reads transcripts and field notes looking for the dilemmas, contradictions and links to broader socio-cultural issues that can help evidence and make-sense of the complex life-worlds of participants (Nicolson and Anderson 2003). The aim is to understand the meanings that individuals attach to talk and practice, and how they perform them (Rock 2001). A thematic analysis necessitates that the researcher identifies themes from the transcripts which describe and exemplify the subjective perceptions and everyday experiences of participants (Nicolson and Anderson 2003). Thematic analysis, like grounded theory, depends on a process of constant comparative analysis in order to achieve consistency and validity. This process develops ways of understanding human phenomena within the context in which they are experienced, based upon a rigorous interrogation of actions and descriptions across both participants and physical and social contexts (Thorne 2000).

Thematic analysis is typically used to describe, categorise and explain rather than produce novel theories of the phenomena being studied (Thorne 2000). This study aims to explore and explain the factors that shape routine food practices in specific contexts. It would be over ambitious to claim that I have generated an explanation of the data that could not be in some way reformulated or explained by other theories, as is the aim of a grounded theory analysis (Glaser and Strauss 2007). My analysis is situated in personal biography and enacted through the selection, interpretation and editing of the narrative evidence I have used to construct and support my arguments (Braun and Clarke 2006)

Grounded theory can be approached in a variety of ways and there is some disagreement over its exact processes and scope (Charmaz 2006). In recent years, there have been a number of methodological critiques and commentaries pointing out that qualitative researchers are increasingly describing their analytical approach as a grounded theory, yet what they are actually deploying is a general method of comparative analysis that could just as easily be described as a thematic analysis (Suddaby 2006, Thorne 2000). These analyses are situated in, and in dialogue with, wider bodies of literature and research. A purely grounded theory approach, by contrast, recommends that:

*"An effective strategy is, at first, literally to ignore the literature of theory and fact on the area under study, in order to assure that the emergence of categories will not be contaminated by concepts more suited to different areas" (p. 37) (Glaser and Strauss 1967)*

I cannot claim to have adopted this strategy. As can be seen from my interview schedules (see sections 3.5.2, 3.5.3 and appendix 3.3 and 3.5), the research and interview questions for this study were developed largely from the literature. More 'purist' interpretations of grounded theory, such as the one quoted above, have come to be replaced by more moderate approaches that aim for plausibility rather than irrefutability, and an acceptance that existing research and literature on a topic should not be dismissed, even at the outset (Charmaz 2003). Grounded theory remains a widely used, discussed and contested approach. The approach taken to data analysis in this study is best described as thematic because it sought to identify and describe patterns of behaviour and talk from the data, and then explain and categorise them in relation to each other and the context in which they occurred.

## **3.6.2 Stages of data organisation and analysis**

### **3.6.2.1 Transcription**

I transcribed all the interview data over a period of four months. On average, I met with every participant about four times, spending a total of around three or four hours with each of them. The 26 photovoice and 23 go-along interviews generated more than 45 hours of recorded interviews, two notebooks of observational notes, one fieldwork diary and 1322 photographs (taken by participants and me). The go-along interviews generated the most heterogeneous data, lasting anything from 12 minutes (the shortest) to several hours. I accompanied individuals, couples and whole families. I went with people to pick their children up from school, to get food at lunch time, to go to the local shop, and to do the weekly shop in the supermarket. We travelled sometimes together in cars and on buses, and at other times we walked or I met participants at the shopping venue or in cafes and community centres.

The photovoice interviews were structured around photographs as discussion prompts and the go-along interviews contained substantial portions of observation of non-verbal behaviour. Therefore, extensive notes had to be made during and after both types of interviews. These notes were necessary to make sense of the audio-recordings and to transcribe them in a coherent way. This is especially pertinent to the go-along interviews. Transcription and analysis can be hindered without specific information about where the interview took place and which features and areas are indicated by the participants (Carpiano 2009). It would have been very challenging for anyone else to have transcribed the interviews.

Both go-along and photo-diary interviews were transcribed using a combination of verbatim and selective transcription. During the go-along interviews I spent time with participants in a variety of social and physical

contexts (as will be explained in chapter four). Sometimes, during these interviews, participants would break away from the activity of food shopping or talking about food shopping and would simply start doing something else or talking to someone else.

One of the strengths of the go-along is that it serves as a rapport builder because it increases participation by exposing the researcher to people's lived experiences (Carpiano 2009). However, this can also mean that participants are easily distracted by other people that may be present and by getting on with their everyday activities. Additionally, the increased rapport often leads to participants bringing up other topics or chatting in between activities. I found this occurrence most common with my key informants, those who produced the richest and most detailed data and who, unsurprisingly, also proved to be relatively more communicative all round. This can be clearly seen in the extract from a go-along transcription below. The extract is from an interview which started in a café on a golf course. We then drove to some local shops in Smethwick and, finally, visited Asda. The interview lasted for three hours and the participant was shopping for items for an upcoming holiday, as well as doing the food shopping. The topic of conversation often veered away from food and consumption and, in the process, we established a good rapport.

***We pick up a trolley and go into Asda***

***Alan: Can you bear with me a minute I need ... did I tell you I went down to Cornwall?***

*CT: Yeah*

***Alan: I helped my cousin out ... he runs a little business on the sea front, a fair. And he ... I helped him out with that and he wants me back again. So I'm going back there for half term ... but I need a few bits and bobs to take down there.***

***We start at the toiletries. The participant works***

***his way round slowly and methodically buying toiletries (none of which are on the shopping list) and tells me a bit about his cousin's business. He then lapses into silence and concentrates on looking at the products. We then go to the clothes section where he looks for a new pair of shorts (on the shopping list he has with him). He takes his time and asks my opinion.***

*CT: Do you buy a lot of the special offers in here? Or do you stick to your list?*

*Alan: Erm ... I stick to my list really. I don't ... erm ... yeah I tend to but the same stuff really. I should be a bit more adventurous really ... I need something for tonight. And I've got that Wilderness thing tonight (a function he was going to).*

**(Alan, aged 51. Extract from go-along interview)**

When the participant made fleeting references to other activities and topics the interactions are transcribed verbatim. When the conversation turns towards unrelated topics (such as his cousin's business) I instead give a short description of what was said and done. It is in these instances that the transcription becomes selective. This approach to transcription is theoretically in keeping with the use of go-alongs as a means of data collection and with thematic analysis. Go-alongs are more modest and more systematic than ethnographic participant observation (Kusenbach 2003). They are focused and relatively narrow in scope, which allows for a greater number of participants to be interviewed (Kusenbach 2003). For this study, food and food shopping were the focus of the interviews. Substantial conversations with participants that did not in any way address this focus were not transcribed. The study is not a traditional ethnography about a particular group of people. It is explicitly focused on food consumption behaviours and the built environment. Transcription is part of the data analysis process and must, therefore, be

compatible with the theoretical framework of the methodology used (Halcomb and Davidson 2006).

As can be seen in the extract above the go-along transcripts combine both observational and interview data. The observational data is taken from field notes made whilst in the supermarket and immediately after the interview finished. First-hand knowledge from involvement in the interview process and observations was very much necessary to capture and logically record the interview data (Halcomb and Davidson 2006). The audio recordings of the go-along interviews often included relatively long periods with no speech at all, most typically when participants were examining different products or looking for something. Field notes were taken during these pauses and observations of participant behaviour made. Field notes generally consist of relatively concrete descriptions of social processes and their contexts (Hammersley and Atkinson, 1995). Combining these elements together in transcription helped me to generate a fuller picture of participant behaviour in the store and allowed me, in analysis, to compare what they said with what they actually did.

Transcribing photovoice interviews, by contrast, was much less problematic and varied. Transcription of photovoice interviews was largely verbatim. A more traditional and static interview style meant that participants were less likely to go off-topic. Even if this did happen I could use the photographs as prompts to draw participants back to the topic. In the extract below, from a photovoice interview, the participant talks about her son getting caught shop lifting, after which she starts using her mobile phone. At this point the photographs were on the table between us and I was able to use them, with some frequency, to bring the participant back to the desired conversation.

*Collette: .... .. it was Mr Convenience (local shop). But M----- (son) got caught shop lifting ... this was the year before last. She's only officially been the shop keeper there for the last 2 years and erm ... they knew he wasn't*



*the master mind ... he was being used by another kid to shop lift for him. But they'd videoed it happening, called me and they didn't call out the police. I said 'You should do.' They said 'No'. I said 'You should do because he's got to learn the consequences for it happening.' And I said ... well, I made him pay for the goods.*

**The participant gets a text message and she stops to respond to it.**

*CT: Now these photographs, number 3 onwards ... they look like Tescos.*

*Collette: They are Tescos ... That was an offer I looked at, I considered indicating plate 3.2 I think I did get one, I can't remember which now.<sup>5</sup>*

(Collette, aged 44. Extract from photovoice interview)

**Plate 3.2: Photograph by Collete from her food photo-diary**



---

<sup>5</sup> It is worth noting that, in the extract above, Collete is referring to a series of photographs she took herself in Tesco. During the photo-diary exercise she decided to take the camera with her when she went food shopping, in addition to recording the foods she ate and prepared (as per instructions). Further, when unpacking her shopping at home she photographed all the items that she bought that day, and talked me through them in the photovoice interview. Two other participants, Hollie and Simon, also did this. As discussed in section 3.5.1, photovoice elicits highly subjective and interpretative accounts from participants.

As can also be seen above, the photovoice transcripts are annotated to indicate when a participant is referring to and/or describing a photograph. As discussed in section 3.5.1, all of the participants' photographs were numbered on the hard copies and digitally. This allowed for the transcripts to be read in conjunction with the photo-diaries.

### **3.6.2.2 Themes**

A thematic analysis seeks to identify patterns of experience, talk and behaviour. As previously discussed, the process of qualitative analysis is an iterative one. Whilst transcribing the interviews I began to generate some ideas about what some possible themes might be. Kitchin and Tate (2000) describe this as 'effective transcription', from which the researcher tries to 'get a feel' for the data as they are transcribing, and thereby start to develop ideas about specific lines of enquiry. Whilst transcribing each interview I took notes on any possible themes or interesting observations, gradually compiling an analysis journal. Memoing and note taking during the process of listening to recordings makes transcription more than a simple clerical task. It makes it more about the generation of meanings and interpretations (Halcomb and Davidson 2006). It was at this point in the analysis that I decided to analyse the go-alongs and photovoice interviews as one data set. Originally, I had intended to analyse them separately. The go-along interviews would be used to explore food shopping practices and the photovoice interviews would be used to investigate food practices in the home. However, participants frequently talked about a different context or activity from the one they were engaged in at the time (as described in section 3.5.3). Whilst shopping in the supermarket participants would regularly describe household food practices. Equally, some participants also included photographs taken in food stores as part of their food photo-diaries. It became impossible to entirely separate themes spoken about in the two types of interview.

When transcribing the interviews it became apparent to me that the different types of information and data could not be divided into neat categories. Photovoice and go-along interviews did not produce two discrete data sets. Participants' comments and practices demonstrated that the sites in which food practices are performed are linked and enmeshed by issues of identity, routine and values. Thematic analysis enables researchers to use a wide variety of types of information in a systematic manner, due to the theoretical flexibility it entails, and is therefore very useful in synthesising data from different sources (Boyatzis 1998). This was particularly pertinent to my experience as, in the pursuit of methodological and analytical rigour, the two sites (home and food stores) were combined for analysis. Separating the data would have forced a division between contexts that did *not* reflect the ways in which participants spoke about them. Once arranged into a combined data set some initial, and very basic, themes could be applied. For example, 'cost', 'taste' and 'feeding others'.

### **3.6.2.3 Patterns and coding**

Once these initial 'themes' or patterns had been identified I started to code, to identify all data that related to the already classified patterns. The identified patterns were then expounded upon and modified (Aronson 1994). As my familiarity with, and understanding of, the data set increased I found that more sub-themes and sub-codes could be identified. In a more practical sense this took the form of reading some transcripts, making notes on possible themes and codes and developing a draft coding-frame. I would then pilot this on some more transcripts and modify it as I progressed. Categories and codes can be continually modified to include new information. Description, classification and connection are conducted in an iterative, rather than linear, process (Kitchin and Tate 2000).

The initial coding for this data set drew most heavily on an emic approach but also included some etic coding. Emic codes are drawn directly

from the data and the descriptions and talk of participants, while etic codes are informed from sources external to the participants, such as previous research and theories. A purely emic approach is somewhat unrealistic for a piece of research with highly specific areas of interest and research aims. All researchers come to their projects with previous ideas, perspectives and readings (Headland et al. 1990). Etic codes were based on my research questions and more obvious categories that could be applied early on in the analysis, such as the type of location being described by participants. For example, some of the earlier and more simplistic coding was etic. The extract below is from my emerging coding frame (see figure 3.5). The column on the left shows the code 'built environment' as it was originally applied, as an etic code. It began as a straightforward list of locations that participants visited or talked about visiting. The column on the right shows the code fully developed, after being applied to the data and shaped by open coding and emergent themes, demonstrating a mixture of etic and emic elements of coding.

**Figure 3.5: Coding and sub codes for the 'built environment'**

<p><b>Built Environment:</b>  Eateries  Home  Market  Other's home  Pubs  Shops  Supermarkets  Take away</p>	<p><b>Built Environment:</b>  Busy or crowded  Comparison and evaluation  Eateries  Home  Market  Nearby Amenities  Other's home  Parking  Physical Considerations:      Carrying Shopping      Distance or proximity      Mobility      Walking or walkability  Pubs  Shops  Supermarkets  Take away  Travel:      Driving      Public Transport      Walking</p>
--	--

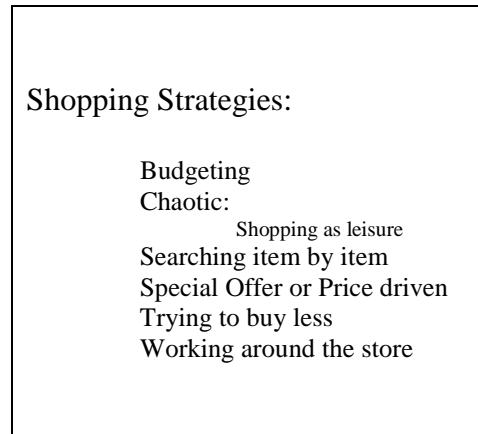
Sometimes the categories that emerge in analysis are used simply to produce a description of the cases investigated, as in the example above. But, analysis of ethnographic data can also include attempts to develop more systematic typologies or categories that hold out the prospect of application to data from other situations (Hammersley and Atkinson 1995). The extract below (figure 3.6) is from my research diary and, along with numerous other notes, observations and quotes combined to inform the development of the code ‘shopping strategies’ (see figure 3.7), which was subsequently developed into a set of routines-of-practice describing participants’ habitual food shopping behaviours (see sections 5.3 and 6.3). The sub codes describe the overall approach individuals took to decision-making once in-store, giving global and generalised descriptions of their food shopping practices. Dave’s approach to food shopping was ‘special offer or price driven’ (see figure 3.7), in that he relied very heavily on special offers to guide his purchasing decisions (see figure 3.6).

In a thematic analysis, once patterns of behaviour and talk have been identified (the ‘shopping strategies’), the next step is to categorise all data that relate to these patterns and, thereby, refine the themes and codes. The patterns are then expounded on and related codes sorted into sub-themes (the sub codes listed in figure 3.7) (Aronson 1994).

**Figure 3.6: Reproduction of extract from research diary**

Dave – Go-along
Likes experimenting with cooking and very concerned with price (will look around a lot – like Simon). Huge capacity for remembering prices from different shops – Shops around a lot, if only for the sake of a few pence.
“I shop on instinct” – great quote. Doesn’t use a list. Enjoys being “nosy” and looking around.
Shopping behaviour gets more erratic the longer we are out.
Seems to be looking and looking but not for anything in particular. Keeps changing his mind about products.

**Figure 3.7: ‘Shopping Strategies’ code and sub codes**



Finally, the task of the analyst is to try and explain the ‘story’ of each pattern, code and theme from all perspectives. In this case, by fully characterising the behaviours that comprised these different approaches to food shopping and by identifying the features that differentiated them from each other. Thematic analysis is a search for themes that emerge as being important to the description of the phenomenon. These emerging themes then become categories for analysis (Fereday and Muir-Cochrane 2006). Once the data were fully coded and analysed I began to build a narrative around them, explaining food practices, the role of social and physical context, and how participants talked about food and food-related behaviours and identity.

#### **3.6.2.4 CAQDAS: NVivo9**

NVivo9 software was used in order to store, organize and apply codes to the data set. NVivo is a Computer Assisted Qualitative Data Analysis Software (CAQDAS) package. It is designed for qualitative researchers working with rich text-based data and multimedia data. It can also facilitate mixed methods analysis. NVivo can be used to explore trends, build and test theories, and

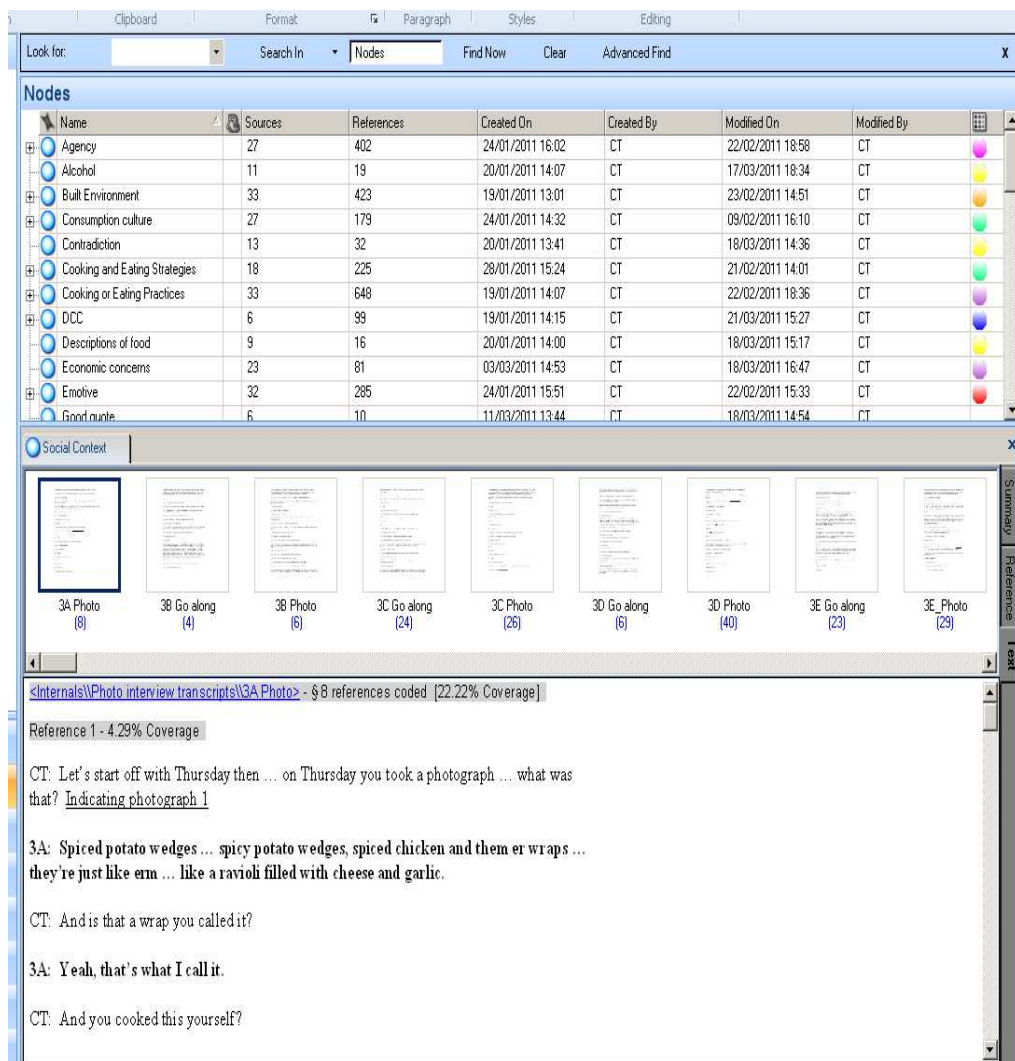
manage and build codes. The software allows for examination of relationships between cases, demographic attributes and codes (Sorensen 2008).

At present, there is very little discussion in academic literature about the use of CAQDAS. There is however, some debate over whether, or to what extent, it enhances or detracts from the quality and nature of qualitative research. One of the more obvious advantages of CAQDAS over manual methods is the ability to organize data and its analysis efficiently. Automated data retrieval facilitates complex searches that would be extremely difficult and time consuming if undertaken manually (Bringer et al. 2004). These packages have been criticised for making analysis too mechanical and discouraging researchers from engaging in analysis as an interpretative process (Suddaby 2006). However, it should be highlighted that although CAQDAS programmes can aid in the sorting and organising of qualitative data sets, none of them are capable of the intellectual and conceptualising process required to transform data into meaningful findings (Thorne 2000). In other words, NVivo helped me to manage the process of analysis, but not to actually analyse the data itself. For example, in NVivo codes can be combined, collapsed, renamed, separated out, made subordinates of other codes and moved around with very little effort. This meant that I could experiment with and modify my coding frame in a much more immediate and supported way than manual methods would have allowed for (Aronson 1994). The codes and sub codes shown in figures 3.5 and 3.7 (above) could be regrouped, merged or renamed almost immediately.

NVivo, as an analytical tool, can be used to different degrees. NVivo can be used from the outset of the research project, for the literature review and through to data collection, analysis and writing up. In this study I used NVivo as an analysis tool only after all transcription was completed and some initial coding started. All my interview transcripts were uploaded to NVivo and subsequently coded. NVivo was used, in this analysis, primarily as a 'code and retrieve' tool (Lewins and Silver 2009). For example, as can be seen in the

NVivo9 screen shot below from my analysis (figure 3.8), by clicking on a code ('node'), in this case 'Social Context', all of the text coded under this label is automatically displayed in one document with its sources labelled and hyperlinks provided back to the original transcripts.

**Figure 3.8: Screen-shot from NVivo illustrating its 'code and retrieve' capabilities**





### **3.7 Ethics and informed consent**

Ethical approval is required by Queen Mary, University of London, for all research involving human participants. On this basis, I submitted an application to the Queen Mary Research Ethics Committee (QMREC) for approval. My application was formally approved on 16<sup>th</sup> November 2009. A copy of the approval is given in appendix 3.6. In my submission to the committee I included a standard informed consent form for participants (see appendix 3.7). As a condition of ethical approval I was required to produce and submit a separate and additional informed consent form for the photovoice activity (see appendix 3.8). The committee felt that, as participants were being asked to photograph other people (from whom the participants themselves would have to seek permission), specific consent and agreement to do this must be sought in addition to obtaining informed consent to participate in the study.

Informed consent means that all participants should be informed about the research in a comprehensive and accurate way and be able to give their full and unconstrained consent (Hammersley and Atkinson 1995). Participants in this study were informed that they had the right to withdraw from the study at any time and permission to record interviews was also sought from participants. To ensure compliance with the Data Protection Act participants must be informed of what information will be held about them and who will have access to it (QMREC 2005). I explained what I intended to do with the data and how I would store their personal information during the process of obtaining informed consent. All participants were required to sign the two consent forms (see appendices 3.7 and 3.8) before participating in the study.

Ideally, informed consent describes an interactive process in which the individual voluntarily agrees to join a study after the purpose, risks, benefits and alternatives have been thoroughly described and understood (Marshall 2006).

The reality of obtaining informed consent can be very different. When recruiting participants I found that some people simply were not very interested in hearing about what I intended to do with the data and how it would be stored. In other cases, my affiliation with the PCT lent a certain credibility to the process and participants seemed happy to accept my assurances on this basis. One participant, however, was quite concerned that I might be in a position to ‘report’ to the Benefits Agency that her partner was living with her because I was ‘with’ the PCT. Also, the participant packs (see appendix 3.2), that I had taken so much care and time over when considering how best to present and explain the study, proved to be of very little interest to participants. For the most part, they did not read them. They preferred instead to ask me questions about the study and what I would do with their data as we went along.

Murphy and Dingwall maintain that the process of obtaining informed consent, in ethnographic research, is neither achievable nor demonstrable in the terms set out by research ethics committees. This is because such committees are based upon anticipatory regulatory regimes that are modelled on clinical research (Murphy and Dingwall 2007). Ethical issues, in qualitative research, are often emergent and cannot be anticipated and controlled for in the same way as in quantitative projects. That is not to say that ethnographers cannot thoroughly prepare for fieldwork. It is just that they must do so with the knowledge that unforeseen challenges will present themselves. Informed consent is problematized by the exploratory nature of data collection methods used by ethnographers. These include the extended periods of time ethnographers spend in the research setting; the emergent nature of ethnographic research focus and design; the nature of risk in ethnographic research; the power relationships between researchers and participants; and the public and semi-public settings that may be studied (Murphy and Dingwall 2007).

### 3.7.1 Confidentiality and data storage

Confidentiality can be a complicated issue in qualitative research due to the conversational nature of qualitative interviews. Nevertheless, it is important to ensure that participants' comments, thoughts and feelings are kept as confidences unless they have been expressly offered as material for the study (O'Reilly 2009). Hill (1993) argues that the nuanced and emergent character of ethical considerations facing ethnographers places certain demands on researchers. Trust must be established and maintained between ethnographers and participants in order to illicit honest, detailed and unforced accounts. In order to do this the researcher must try to be honest in all dealings with participants, explaining his or her purpose for entering in the field in a clear and non-technical manner. The intended uses of all forms of data, especially photographs, must be explained and permission must be received prior to collection (Hill 1993). Participants in ethnographic research are required to place a good deal of faith in the integrity of the researcher when they disclose personal and sometimes sensitive information about their lives. By its very nature, ethnography forces the researcher into relationships with the people being studied (Hammersley and Atkinson 1995).

During the course of my research some of the participants chose to disclose very personal information about bereavements, separations and other traumatic life events. I found that this tended to happen more when I interviewed participants in their homes, possibly because they felt more at ease in these environments and they provided a greater degree of privacy than alternative interview settings. If the participants spoke at length about a distressing event I would sometimes, if appropriate, turn off the dictaphone. If this was not possible (mostly due to where the dictaphone was placed and where the participant and I were positioned) I would simply not transcribe those sections of the interview. In any case, I never included any of those data in my analysis or disclosed them to a third party. Fortunately, none of the sensitive

information that I was privy to led me to believe that any harm might come to participants or others. The Queen Mary Research Ethics Committee guidelines reiterate that the researcher is obliged by law to inform the appropriate authorities if they receive information that indicates the occurrence or threat of harm and / or abuse (QMREC 2005).

A frequent concern about qualitative research, and especially ethnography, is that it makes private things public (Hammersley and Atkinson 1995, O'Reilly 2009). In qualitative work the details of participants' identity and experiences can be central to the research. Given that anonymity of the research participants is often a central feature of ethical research practice, ethnographers tend to address this by ensuring that only a minimal amount of information that could be used to identify any individual is made public (May 1997). Participants' details, for this study, were anonymised by the use of pseudonyms, as described in sections 3.4.2 and 3.4.3. Participants were informed of this when they were recruited. In all data analysis files and records the participants are referred to by their pseudonyms, or participant codes. All of these data and analysis are stored on a password protected computer.

The actual names and personal information of participants, of this study, are recorded only on their consent forms and their personal details forms. These records are currently stored in a secure filing cabinet, in the School of Geography, and will be kept for a further seven years. After this period, all personal information contained on the forms will be permanently anonymised, in accordance with the QMREC guidelines (QMREC 2005). Researchers have an ethical responsibility to do everything possible to disguise the identity of participants in the writing up phase, data storage, and subsequent dissemination of findings (Hill 1993).

### **3.7.2 Exploitation and vulnerable individuals**

Researchers are in a powerful position in relation to their research participants. It is the researcher who chooses the topic, directs the research and decides what to record. Added to which, researchers frequently study groups and individuals that are less powerful than themselves (O'Reilly 2009). The research relationship can be inherently exploitative because the researcher gets information and the participants get nothing in return (Hammersley and Atkinson 1995). Such a critique could certainly be made of this study. Data were collected from residents of one of the most deprived wards in the country (see 3.3). However, as mentioned in section 3.5, photovoice and go-along interviews are participant-led methods, which may go some way to redressing the balance. For example, the photovoice exercise relied on the participants to manage and record data collection. The narrative photovoice interview that followed required the participants to explain and elaborate on the images they had produced. It is their interpretations and experiences that were of central interest. Go-along interviews are participant-centred, with the researcher accompanying and shadowing the participant through their familiar environments.

In preparation for my fieldwork I completed a risk assessment (see appendix 3.9), in accordance with the requirements of the QMREC, and agreed a safety protocol with my supervisors. I was fortunate enough never to feel under any sort of threat or danger during my fieldwork. I did, however, on several occasions find myself put in a position of considerable trust or responsibility by participants. Two of the participants briefly left me with their young children, at the supermarket, whilst they went to fetch a trolley or get something from the car. At other times I was asked to hold or look after handbags and mobile phones during the course of go-along interviews. It was in these situations that I became acutely aware of the extent to which participants themselves took a risk in letting me observe and involve myself in their daily lives and routines. In general, the problems of access and personal safety I anticipated during the

planning stage were replaced, at the fieldwork stage, by surprise at the degree of tacit acceptance and trust that I was often afforded by participants.

### **3.8 Summary**

The methodology for this study was designed around the specific requirements of the research aims stated at the end of chapter two (section 2.5). Given that there is a substantial lack of understanding of how people interact with and perceive the food environment, at the individual and household level, participant-led data collection seemed the most appropriate choice. Exploring how individuals actually went about shopping for, choosing, preparing and consuming foods, as a situated activity, requires an investigation of food practices across contexts. By combining photovoice and go-along methods I was able to interrogate food practices in the environments of the (family) home and spaces of consumption.

Food practices are social practices and, as such, are often only tacitly understood and articulated. A symbolic interactionist approach explores how meanings are created, negotiated and enacted (Rock 2001). By examining how food practices were performed I was able to elicit explanations of the contextual factors that shaped food choices and the meaning that individuals attached to them. The next chapter further contextualises the food practices of Sandwell residents by describing the area in terms of its economy, history and food environment. The chapter describes the places that participants took me to and the ways in which they used and perceived them.

## **Chapter 4:**

# **Collecting data in Sandwell**

### **4.1 Overview**

Chapter three gave a detailed explanation of the methods of data collection employed for the study. This chapter is both descriptive *and* empirical. It describes the environment in which the data were collected, details the specific places visited, and presents empirical results on how participants view and use those places.

Initially, an overview of the Sandwell economy and food environment is provided to help contextualise the food practices and choices demonstrated by participants of this study. As a uniformly deprived and diverse borough that has been greatly affected by the decline in manufacturing and heavy industry, Sandwell is the site of numerous interventions and research projects, many of which have been explicitly concerned with health.

After this brief overview the chapter moves on to present the first of the empirical data, in section 4.4.1, by describing the sites in which the fieldwork was carried out and exploring how participants reported using them. For the go-along interviews I asked participants if I could accompany them on a routine outing to buy food in their local area. Whilst conducting these interviews I visited supermarkets, local shops, markets, cafes, discount stores and a chip shop. Additionally, some of the photovoice interviews were conducted in eat-in spaces. In examining the ways participants talked about using these spaces, and described their practices within them, this chapter addresses three specific research questions:

- What are the types and locations of the food consumption sites used by individuals?
- How do individuals perceive and describe the ways in which they use these sites?
- How do these sites, as specific contexts, shape food practices?

## **4.2 An economic and retail overview of Sandwell**

Sandwell is part of the Black Country, West Midlands. The borough has a long industrial history based on manufacturing. Its earliest industries included coal mining, iron foundries, glass making and chemical works (Sandwell Council 2012). Historically, economic growth has been slow in the area, and it remains heavily reliant on manufacturing (WMRO 2008). In the post war period the West Midlands economy was dominated by car manufacture and then later by textile production. However, both of these sectors have been significantly diminished and restructured in response to pressures from the global market. Sandwell Council describes the area as a *'traditional manufacturing economy which is likely to shrink further in future years, be badly placed to develop alternative areas of the economy and transfer people into new skills and employment opportunities'* (Sandwell MBC 2010).

### **4.2.1 The West Midlands**

The West Midlands area is the main location for the UK automotive industry, accounting for around 30% of total UK car production (EFILWC 2004), although very little production has ever been based specifically in Sandwell itself. Since the mid-1990s there has been a vast increase in flexibility within the



automotive industry, driven by intense competition, the pressures of cost recovery and consumer demands for quality and capability (Bailey et al. 2008). For workers this has meant a rise in redundancies and short term, precarious employment such as agency and seasonal positions. Major car manufacturers have increasingly responded by developing assembly operations in low-cost locations in emerging markets such as Central and Eastern Europe (Bailey et al. 2008).

Since the mid-1970s, the clothing industry has featured heavily in accounts of the West Midlands economy. The decade saw a marked increase in new clothing manufacturing firms at the lower end of the UK market, a development concentrated in the West Midlands. Small Asian-owned companies developed flexible and relatively low cost production facilities that were buoyed by the availability of family and co-ethnic labour, and by UK legislation that could be exploited to channel women into these poorly paid areas of work (Ram et al. 2002). In the 1980s the garment industry in Britain came under increasing pressure from the global market for more frequent style changes and for lower-cost items. These developments made it difficult for the economic migrants from Bangladesh and Pakistan to establish themselves and, as a result, these communities remain prone to deprivation (Sandwell MBC 2010)

Both the automotive industry and textile production are still major employers in the West Midlands in general, with up to 20,000 workers still employed in the textiles sector alone (Business Voice WM 2009). Although high-volume heavy industry in the area has been effectively ended by plant closures, advanced manufacturing is currently one of the strongest sectors in the area.

## 4.2.2 Sandwell

Sandwell, like other Black Country West Midlands boroughs, still has a high concentration of residents working in areas with a high level of manufacturing (Sandwell MBC 2010). There are hundreds of engineering companies that operate in Sandwell, such as the Hadley Group and Metsec (Think Sandwell 2012a). Metsec, the country's largest specialist metalworking company producing construction and manufacturing products (Metsec Plc 2012), is based in Oldbury, Sandwell.

Although Sandwell's economy remains partially dependent on manufacturing, its productivity is relatively poor. The borough is ranked within the bottom 25 in the UK on the 'UK Competitiveness Index 2010' (Sandwell MBC 2010). In 2008-9, 19% of Sandwell's working population were employed in manufacturing, 24.9% in distribution, hotels and restaurants, and 22% were employed by the public sector; (Sandwell MBC 2010). The numbers of people employed in knowledge intensive and professional services in Sandwell is lower than anywhere else in the West Midlands (WMRO 2008). The fastest growing sectors of employment in Sandwell are advanced manufacturing, food and drink production, green technologies and business services. Growth in these areas has been made possible by the increasingly flexible nature of the Sandwell workforce (Think Sandwell 2012a).

There is no university campus in Sandwell, as there are in the surrounding areas of Birmingham, Wolverhampton and Walsall. In turn this has implications for retail and employment in the area (WMRO 2008). In terms of retail, Sandwell is not regarded by West Midlands consumers as a defined sub-region for shopping, as a retail destination in its own right. Sandwell falls mainly within the Merry Hill shopping area and also into the Birmingham shopping region. Birmingham and Merry Hill are also the largest shopping destinations in the West Midlands (Experian 2009).

### **4.3 The Sandwell Food Environment**

Food shopping is an important local retail activity and, unlike shopping for specialist goods such as clothes or jewellery, tends to be strongly tied to location (Sandwell MBC 2010). Food and drink retail in Great Britain is worth £15 billion, one of the fastest growing sectors in the world. Food and drink is also the largest manufacturing sector in the UK, with the West Midlands taking a £5.3 billion share in this market (Think Sandwell 2012b). Sandwell's food environment reflects wider changes in national food retail trends. These have seen a sharp drop in the number of stores, but an increase in the average size of these stores, which are typically superstores (Rex and Blair 2003)

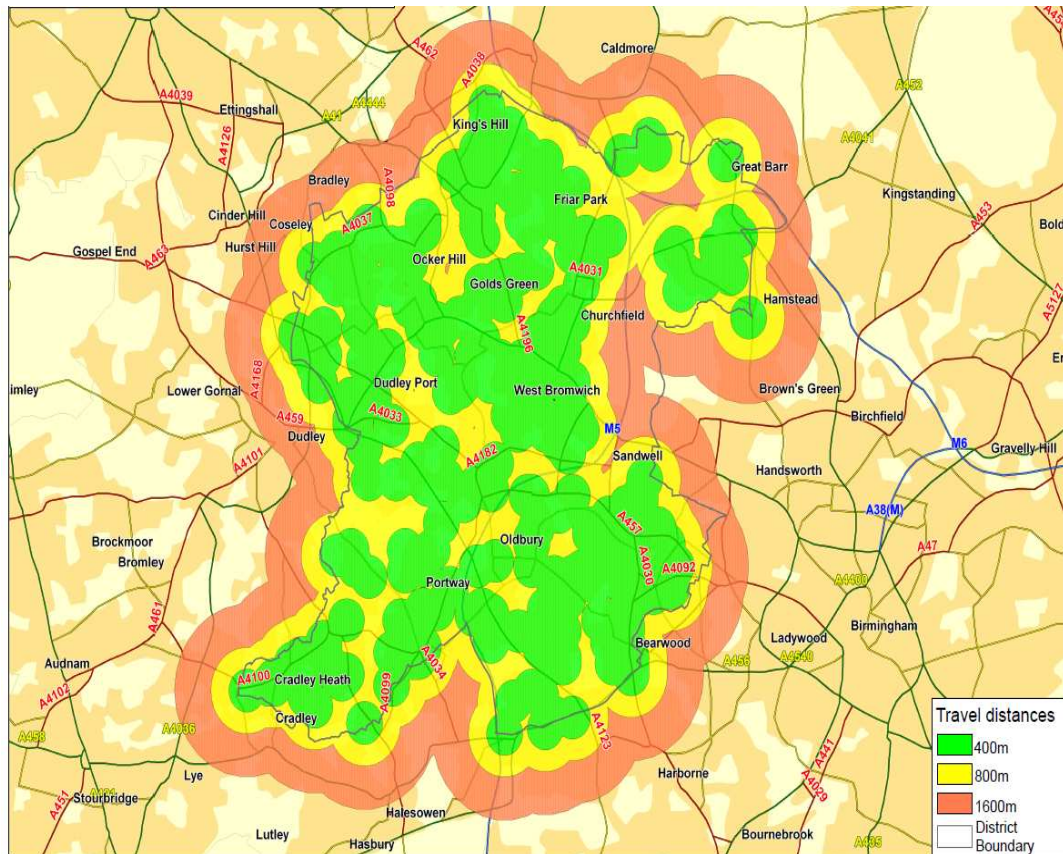
Sandwell is a very well researched area in terms of health and health service provision (Stewart and Rao 2000, Rex and Blair 2003, Kyle and Blair 2007, Ali et al. 2007, Middleton 1990, Dowler et al. 2001), which is partly attributable to the health and economic challenges the area faces (as described in sections 3.3 and 4.2). It has also been the subject of much food related policy and intervention. For example, Sandwell was one of the first five national pilot sites selected by the Department of Health to develop a '5 a Day Community Project' in 2000 to 2001, a programme to raise awareness of the health benefits of fruit and vegetable consumption, and to improve access to fruit and vegetables. The pilot was subsequently extended by a Big Lottery Fund grant and the scheme continued for a further two years (Bremner et al. 2006). Up until 2010 Sandwell had a dedicated Food Team focusing on policy, services, retail, intervention, education and research on food and dietary-health related issues in the area. This unit rolled-out local schemes such as Eatwell, Cookwell and Shopwell, which all focused on educating and engaging local residents in healthier food practices.

In 2001, Dowler and colleagues conducted a mixed methods study to measure and map food accessibility in Sandwell. The results showed large networks of streets and estates within the borough where no shops selling fresh fruit and vegetables existed. Although inexpensive and good quality food was available in Sandwell shops, this was restricted to small areas to which the majority of the population would have needed access to a car or public transport to use them (Dowler et al. 2001). A further food-access-mapping study in 2003 looked at 177 shops selling food in a geographically defined area of North West Sandwell. The researchers studied general stores, newsagents, butchers, green grocers, bakers, fishmongers, supermarkets and off-licences. They concluded that most residents of the study area did not have reasonable access to 'healthy food' (a range of fruit and vegetables) within walking distance (500 meters), and interpreted this as clear evidence of 'healthy food desertification' (Rex and Blair 2003) (see section 2.2.3.2 for a description of 'food deserts' theory). Also, they commented that access to chocolate, cigarettes and biscuits in this area were relatively high by comparison. Shop keepers interviewed as part of the study reported that they were reluctant to stock a greater range of fresh and healthy foods because they are highly perishable, difficult to manage, and generate little income for the shelf space they occupy (Rex and Blair 2003).

The next significant phase of food-access mapping in the area was commissioned by the Government office for the West Midlands and carried out in 2009 by the West Midlands Public Health Observatory (WMPHO). This was part of a region wide mapping exercise to identify outlets likely to sell fruit and vegetables. The accessibility maps, like the most recent one for Sandwell shown below (figure 4.1), were provided to each local authority to assist them in their strategic planning and policy (JMP Consultants 2009b). These maps are currently used by the Local Authority to inform regional spatial planning by a dedicated team that deals with housing, transport and food retail policy. The borough now also has an Urban Development Unit that is currently looking at

‘healthy retail’ in the area and the challenges posed by the growing fast food retail sector (Sandwell PCT 2010a)

**Figure 4.1: Access by walking to locations selling healthy food in Sandwell Metropolitan Borough Council <sup>6</sup> (WMPHO 2010)**



Although the Sandwell studies described above included qualitative components such as interviews with local shop keepers and focus groups of local residents, they remain theoretically informed by a ‘food deserts’ understanding of the food environment (see section 2.2.3.2). This is a stance that has

<sup>6</sup> Food-access measure for this project had been substantially developed since the last major mapping exercise in the area (see Rex and Blair 2003). A working definition for ‘Healthy food’ included a wide range of fruit and vegetables (including fresh, frozen, dried, tinned and juices), and fresh dairy produce.

underpinned a range of UK food policies and policy documents from the mid-1990s onwards (Cummins and Macintyre 2002b) and has been identified as a particular ‘barrier’ to healthy eating practices in the West Midlands (Saunders 2001). As previously discussed in chapter two, this model is prone to oversimplification and suggests that increasing food access would automatically improve diet (Macintyre 2007). However, proximity does not necessarily equate with usage. For example, Cummins and colleagues (2005) assessed the effect of the introduction of a food superstore in a relatively deprived Scottish community on self-reported fruit and vegetable consumption and psychological health. They found that, of the participants that lived in the intervention area, only 30% switched their main food shopping to the new superstore. The effects of changes to the local food environment were not universal (Cummins et al. 2005c).

It would appear that the failings of food deserts theory and the complexity of examining and intervening in food environments have been at least partially acknowledged in recent Sandwell research. The Literature Review document of the latest, and previously described, WMPHO food-access mapping project (JMP Consultants 2009a) cited the findings of Dibsdall and colleagues’ study on low income consumers’ attitudes towards fruit and vegetables. The researchers concluded that access to fruit and vegetables was *not* a major barrier to eating healthily and that affordability of fruit and vegetables was more complex than a simple lack of money (Dibsdall et al. 2003).

The participants for the present study also reported that the supermarket was the main site for their household food shopping (as will be discussed in sections 4.4.2, 4.4.3 and 5.1). The four largest UK supermarket chains are Tesco, Asda, Sainsbury’s and Morrison’s (Henderson Research 2011), all four of which are represented in Sandwell. Tesco, the UK market leader, had six branches in the area at the time fieldwork was undertaken; one Extra, two Metros and three Expresses. A seventh (super)store is under construction in West Bromwich town centre and is due to open in December 2012. It is expected to

be their largest European retail development (Think Sandwell 2012b). The only Tesco site visited as part of this study was the Metro branch in West Bromwich town centre.

As will be illustrated in table 4.1, Asda was by far the most popular and widely used store among participants, with 10 of the go-along interviews taking place there. There are five Asda stores in Sandwell; one supermarket, one supercentre and three superstores. The two branches of Asda visited for this study were Cape Hill and Great Bridge. Cape Hill Asda is a superstore located on the Cape Hill retail park in Smethwick, off Windmill Lane, an area characterised by varied food stores serving local communities originating in South Asia, the Caribbean and Eastern Europe (Quigley 2008). The Cape Hill Asda has a car park, café, Photoshop and pharmacy. It stocks the full range of Asda groceries and clothing range. Great Bridge Asda (see plate 4.1) is a supercentre located in Great Bridge retail park, on the border of West Bromwich and Tipton, located opposite what was once the commercial centre of Great Bridge (Quigley 2008). Being an Asda supercentre it is larger than the Cape Hill branch. It has all the same facilities as well as 24-hour opening, a petrol station, an optician and an extended range of electronic goods. The non-food range and café are located on the first floor of the store.

**Plate 4.1: Photograph of Great Bridge Asda (by CT).**



Sainsbury's have two branches (both SavaCentres) in Sandwell; one in Oldbury and another in Rowley Regis. The only store visited for this study was the Oldbury site (see plate 4.2). It sells the full range of Sainsbury's grocery products in addition to home ware, electrical goods and clothing items. The site includes a restaurant, Photoshop and 700-capacity car park. It is located in Oldbury Town and is easily accessible by public transport. Morrisons has three branches in Sandwell; a superstore in Wednesbury, a supermarket in West Bromwich town centre, and a supermarket in Oldbury. Morrisons was not visited as part of this study.

**Plate 4.2: Photograph of Oldbury SavaCentre (by CT).**



#### **4.4 Interactions with the Sandwell food environment**

The remainder of this chapter presents empirical data on participants' interactions with, and perceptions of, the Sandwell food environment and, thereby, addresses the research questions listed in section 4.1. Food consumption spaces, in the context of this study, refers to sites where food can be purchased for consumption on or off the premises, including eat-in establishments, 'local' shops, supermarkets and discount stores. Purchasing food, as an activity, is an engagement with, and in, place. Each site contains opportunities and choices that are both constructed within that place and are particular to it (Gregson et al. 2002). Classifying and categorising spaces where



food is consumed is a complex and contested endeavour, informed by consumer studies, marketing, business, public health, social science and economics literature. The ways in which food consumption spaces are labelled and defined in the sections that follow are based upon the accounts and descriptions given by participants.

Data are taken from descriptions of consumption spaces in both photovoice and go-along interviews, and from observational data recorded during the latter. Twenty-three separate go-along interviews were conducted for this study, which often included visits to more than one site. In total 35 visits were made to 21 different sites. The table below (4.1) lists all the locations visited and the number of visits to each.

**Table 4.1: Types, names, locations and frequencies of sites visited for go-along interviews**

<b>Sites visited for go-along interviews</b>			
<b>Type of site</b>	<b>Site name</b>	<b>Area</b>	<b>Times visited</b>
'Eat in' and 'take away'	Warley Woods (golf) Café	Bearwood, Smethwick	1
	Chip Shop	Bearwood, Smethwick	1
	Subtotal: 2		
'Local' and 'smaller' shops	Cost Less	Phoenix Street, West Bromwich	1
	Samra Supermarkets (Indian grocers)	Cape Hill, Smethwick	1
	M.R. Halal Meat and Poultry	Cape Hill, Smethwick	1
	Warley Meats (butchers)	Bearwood, Smethwick	1
	Global Foods (Newsagent and grocers)	Bearwood, Smethwick	2
	High Street Market	Town Centre, West Bromwich	2
	Kings Square Indoor Market	Town Centre, West Bromwich	1
	Subtotal : 9		

Discount stores	Home Bargains	Cape Hill, Smethwick	1
	Lidl	Acock's Green East Birmingham	1
	Pound Stretcher	Great Bridge West Bromwich	1
	B and M	Town Centre, West Bromwich	1
	Netto	Town Centre West Bromwich	3
	Subtotal : 7		
Supermarkets	Sainsbury's	Freeth Street, Oldbury	2
	Iceland	Bearwood, Smethwick	1
	Asda	Cape Hill, Smethwick	5
	Tesco Metro	Town Centre, West Bromwich	2
	Heron Foods	Town Centre, West Bromwich	1
	Iceland	Town Centre, West Bromwich	1
	Asda	Great Bridge, Tipton	5
	Subtotal: 17		
<b>Total visits to all sites: 35</b>			

#### 4.4.1 'Eat in' and 'take away' spaces

Eating outside of the home has increasingly become a common feature of modern life (Mikkelsen 2011, Banwell et al. 2005, Hemphill et al. 2008). When asked the questions 'Do you eat out?' or 'Where do you eat out?' participants described the use of both eat-in and take-away sites as part of their individual and household food practices. Eating out-of-home has become a central feature of everyday dietary practices and eating-out sites are now an important part of individual food environments (Mikkelsen 2011). Additionally, eating outside the home has implications for the *types* of food eaten. In Britain, the energy density of traditional fast-food can be up to 65% higher than that of the average British diet as prepared and consumed in the home (Prentice and Jebb 2003). The

increased consumption of meals from outside the home is now recognised by the World Health Organisation (WHO) as a potential contributor to increases in disorders such as obesity (Thornton et al. 2011).

Along with participants' descriptions of 'eating out', this section is also informed by observational data: two go-along interviews were conducted with participants while they went to purchase food from eat-in or take-away spaces (see table 4.1); and eight of the photovoice interviews were carried out in eat-in spaces at the suggestion of the participants (see table 4.2 below). As a matter of course, all of these individuals ordered beverages during the interview and two of them went on to order food and eat whilst we were discussing their photographs. The eat-in venues visited for this study are summarised in the table below (4.2) and can all best be described as small informal restaurants or snack bars. Participants reported selecting these spaces for mostly social and pragmatic reasons, rather than culinary ones, and tended to be largely unreflective and uncritical about the food served. These sites fitted in with their everyday practices and routines.

**Table 4.2: Names, locations and number of visits to eat-in spaces in which photovoice interviews were conducted**

<b>Eat-in spaces as venues for photovoice interviews</b>		
<b>Site name</b>	<b>Area</b>	<b>Times visited</b>
Bacon and Eggs (cafe)	Bearwood Road, Smethwick	1
YMCA Café	Carters Green, West Bromwich	3
PinkTank Café Bar in 'The Public' ('creative community, cultural and business space')	New Street, West Bromwich	2
Sainsbury's Restaurant	Freeth Street, Oldbury	1
Warley Woods (golf) Café	Bearwood, Smethwick	1
<b>Total visits to all sites: 8</b>		

#### 4.4.1.1 Eat-in spaces as social spaces

Cultural and social eating practices are constructed (Wiggins 2004). The use of eat-in spaces as social spaces was apparent in the way participants spoke about them. Eating was described almost as incidental and was always secondary to the social function that these spaces served. In the extract below, Hasan, a 34-year-old Bangladeshi father of five and full time community worker, explained why he and his Polish tenants met and socialised in Dino's Pizza on West Bromwich High Street. For Hasan, the eat-in space provided a place to meet with friends he might not otherwise see and as a way of overcoming cultural barriers.

*Hasan: That's from Dino (pizza, pictured below) that's a mixture of erm meats and you've got chicken and you've got onions erm ... green peppers ... topping ... ..  
With my friend yeah. So we shared that basically, so the pizza and we had this er chicken ... chicken strip wrap with fries*

*CT: So you were out with your friend ... just for something to eat?*

*Hasan: No, it was just to go out ... something to eat*

*CT: Did you eat in Dinos?*

*Hasan: Not always, but on that occasion we ate in Dinos. Mostly at Dinos*

*CT: Do you do that quite regularly ... go out with your friends?*

*Hasan: It's about erm 3 or 4 times a week ... .. Yeah, I go to their house in turn. Good time, watch film together, go to cinema together. It's really really good.*

*CT: Do they ever come to your house and meet the rest of your family?*

*Hasan: They come to my house but they don't come*

*inside my house because of the barriers, cultural barriers. Cos we ... my mum and my wife they don't want to see male coming into the house. But they do come inside, we sit in a separate room. They go in my garden. I got big house, I got 5 bedroom house. They go in the garden and sit in the garden.*

(Hasan, aged 34. Extract from photovoice interview)

Hasan constructed the eat-in space as primarily social. When asked if he went to Dino's for 'something to eat' he replied '*No, it was just to go out ... something to eat*'. Socialising and meeting with his friend was the primary purpose and eating was secondary. The energy dense foods consumed in Dino's stand out compared to the home-cooked traditional Bangladeshi dishes he ate for the duration of the photo-diary exercise. Hasan did not reflect on this contrast or even comment on it. When meeting with his friends at Dino's he was using the space for social purposes.

For some participants, particularly those aged over 50-years-old, buying and eating outside the home formed a significant part of their social routine and was engaged in with considerable frequency and consistency. Two of the West Bromwich participants (Janet and Pat), for example, both belonged to a number of social groups and clubs held at community centres and residential settings, where they could purchase and consume food. Janet, aged 63, and her partner are retired. They ate out very regularly with various groups. In the following extract she describes some of the 'clubs' that she and her partner ate at:

*Janet: We're with another group as well, it's called the Breakfast Club and the Supper Club and that's with the most loveliest lady ... She's on the partnership board, she's a governor and all sorts, she is everything and she actually opens her house up to this social club. She's got 2 extensions on the back. She is marvellous. She's the loveliest lady I've ever met in my life and on a Tuesday she does ... there's about 30 of us, most of them are very elderly. Erm ... and that's why there's younger ones as*

*well cos you go on holiday with them and you give them help on the stairs or push them up or something or other ... .. They're lovely people. She opens her house up on a Tuesday. Everything's laid ... table cloths, all the cutlery. You have cereal, you have a full breakfast, £1 odd she charges for it and then we fund raise and get money for it. And then on a Wednesday we go to the Supper Club. You play cards, you have to play Bingo.*

*CT: Is this with the same lady?*

*Janet: Yeah and you have your supper. It's either a jacket potato with salad or something or now and again she'll do a chicken, cobs ... with pork on and there's always cakes and cups of tea. And that costs you £5 ... .. It's called Swan Village Social Club. But they're brilliant, she's the loveliest lady.*

(Janet, aged 63. Extract from photovoice interview)

A few weeks later during the go-along interview we were on the bus, on our way to Great Bridge Asda. Janet pointed out of the window to a church and went on to describe yet another social club they ate at:

*Janet: I mean when we walk down to our church it's only just there ... We go there once a month for dinner. £5 for a three course meal, lovely. I'll show you on the way back ...*

(Janet, aged 63. Extract from go-along interview)

Other clubs and sites that Janet regularly ate at only become apparent when interviewing her friend, Pat, who was a member of many of the same social clubs. Here she describes the Oakdale social club:

*CT: So, you go there (Oakdale) every Monday ... do you eat there at all?*

*Pat: Well, this particular Monday it was someone's birthday and they always put a spread on if it's for birthdays. So we had a spread ... a load of sandwiches*

*done for us. So we'd have proper coffee ... have a cup of tea and a sandwich. We normally just have a cup of tea and a biscuit. Back to biscuits (laughs).*

*CT: Who else goes to this Oakdale then?*

*Pat: There's about 50, 60 of us there. All like older people like, mixed ... couples like and I've been going there for 4 years now ... cos I introduced Jane just after I started going there and that's where ... so I came to this club (Wood Lane Community Centre) and then she went there and she's been going ever since. But J---- (Janet's partner) had been going there for years and years ... before he lost his wife.*

**(Pat, aged 69. Extract from photovoice interview)**

These community-run 'clubs' for older members are well established in Sandwell, especially in West Bromwich. One of the focal points for these gatherings is Wood Lane Community Centre where many of these groups meet and organize events. Attached to the Community Centre is SWAN (Sandwell Women's Agency Network). SWAN is a community run organisation that holds weekly meetings and activities for local residents. Support and counselling services are available and, latterly, mixed-sex groups also run. It also serves as a kind of drop-in centre and meeting point for those who live locally. The food eaten in these spaces, both community centres and organizers' homes, was prepared by volunteers and club members and often subsidized by the PCT, although members did pay a small fee. The types of food provided were either cooked meals or a buffet-spread, what the participants refer to as 'party food': sandwiches, salads, crisps, cold meats and cakes. An illustration of the catering at these venues can be seen in plates 4.3 (from Janet's photo-diary) and 4.4 (from Pat's) that they took at an event they both attended at Oakdale social club.

**Plate 4.3: Photograph by Janet from her food photo-diary**



**Plate 4.4: Photograph by Pat from her food photo-diary**



#### **4.4.1.2 Breaking dietary restrictions in social spaces**

Food eaten at these social clubs was not necessarily included in their initial accounts of ‘eating out’ or indeed of their dietary practices in general. Janet described herself as having a range of food intolerances and digestive problems which limited her diet. After describing the various social clubs she eats in Janet went on to explain to me, in the extract below, the impact these health problems had on her consuming food outside the home:



*CT: How do you eat out?*

***Janet: I don't ... well, not very often, no ... unless I know where I'm going and if I go on holiday anywhere I have to phone in advance and make sure that I don't ... Cos I have my own gravy granules and stuff like that or gluten free gravy graduals and everything. See, you take all that stuff with you.***

***We don't tend to eat a lot of a Saturday, we're out and about and ... we go out nearly every day. We go out into town everyday just for a cup of coffee in the restaurant or somewhere up there.***

**(Janet, aged 63. Extract from photovoice interview)**

Eating at these social clubs and going 'for a cup of coffee' were a substantial and ingrained part of her social practices, to the extent that the participant did not really reflect on them. On several occasions she went on to talk about her cooking, eating and food shopping practices without mentioning or referencing the food she eats outside of the home. As this example illustrates, the food consumed in the context of the social clubs contradicts the narrative she provided of her overall eating habits as restricted, largely unenjoyable and repetitive. Her eating practices and dietary restrictions are context specific.

Supermarket cafes and restaurants were used and viewed, especially by older participants, in much the same way as social clubs, as part of an individual's social routine and therefore not reflected upon in any detail when they spoke of their food practices. As an illustration of this, consider the extract below from a photovoice interview conducted in Oldbury SavaCentre Restaurant with a 69-year-old Bearwood resident, June. The restaurant is on the first floor of the store, with lockers and a trolley park directly outside it. They serve a range of snack foods, pre-packed sandwiches, confectionery and light meals such as jacket potatoes, salads and omelettes. There is seating for 80 people. When we conducted the interview the restaurant was very busy. Most of the tables

were occupied and we had to queue for some time before being served. Her photo-diary depicted two visits to the same restaurant. As June talked me through and described the photographs she expressed, at best, ambivalence towards the food served there, despite reporting that she ate there very regularly.

*CT: So ... do you come in here quite a lot then?*

*June: At least once a week, yes.*

*CT: And what is it you like about this place?*

*June: It's convenient, it sells things that I want, the parking is OK, and it's a pleasant place to ... when there's not so few staff on ... it's a pleasant place to have a snack ... and a gossip.*

*CT: Can you get plenty of stuff that's suitable for you to eat here?*

*June: Well I wouldn't say plenty, but I get enough. They do a very nice omelette. I don't eat eggs very much but once in a while I have a cheese and onion omelette. Unfortunately they do it with chips but you know you don't have to eat them do you.*

(June, aged 69. Extract from photovoice interview)

Earlier on in the same interview the participant explains that she has a restricted diet, for health reasons, as she is on medication for cholesterol, stomach ulcers, joint pain, a heart condition and arthritis:

*June: It (medication) has an effect on my diet yes, and my life style. So I have to be quite careful. In the winter I have porridge and I would have it with soya milk. The reason I have soya ... and I do eat cheese, if I could give up cheese I would be vegan. Dairy makes my nose run, so ... in a big way. This is spray on cream (indicating the cake she is eating with extra cream on the side) wasn't much of it ... mostly water and air...*

(June, aged 69. Extract from photovoice interview)

June was eating a cream cake at the outset of the interview, and even pointed to the cream as she described why she should not eat dairy. June did not dwell on or explain this contradiction, instead she continues with her narrative. This, along with her account in the previous quote of the ‘*very nice omelette*’ they serve, runs counter to her account of a restricted diet. Foods consumed in this space, in what she described as a predominantly social space that she used to meet-up with friends and ‘*gossip*’, were not reflected upon in the same way as the foods she consumed at home. The foods she consumed in her home, as depicted and described in her photo-diary interview, adhere to the dietary restrictions she described. During the go-along interview that followed three weeks later June did not buy eggs, milk or cream, she bought soya products instead.

Another example in this vein is a photovoice interview I conducted in the Bacon and Eggs café in Smethwick. Brian, a 57-year-old man who worked part time, suggested we meet there as he was going there to pick up some speciality sausages he had ordered for himself and his wife. Unlike June, he very much enjoyed the food served in his chosen venue and reported that he regularly ordered sausages and other speciality meat products from the owners. At the outset of the interview he explained to me about the restricted diet that his herbalist had put him on to treat his chronic cough, as can be seen in the extract below:

***Brian: Er ... she (Herbalist) says don't touch pigs at all, can't have anything to do with a pig. Can't have any wheat, er ... no dairy, so I have goats milk. Er ... I've got 5 herbal remedies to take. Er ... I have to make this tea up in the morning, and that's horrible, it's disgusting ... .. But as I say it has helped a lot.***

**(Brian, aged 57. Extract from photovoice interview)**

Brian said all of this with the bag of speciality pork sausages he came to collect sitting on the table between us. Once again, the participant's narrative about his food practices was contradicted by his *actual* practices.

#### **4.4.1.3 Context specific eating practices**

All of these participants reported that they did not enjoy their restricted diet, that it was a cause of tension and dissatisfaction to them. For these participants eating outside of the home meant entering a social space that provided respite from the unwanted burden of a restrictive diet. These difficult and unenjoyable practices could be put aside in favour of more enjoyable ones. That is not to say that the participants I interviewed appeared deliberate in this or that they did not closely adhere to their diets in other contexts (as will become apparent in chapter six, this was not the case). Rather, the abandonment of restrictive food practices in these spaces was almost tacit. The link between social and cultural eating practices and their potentially damaging health outcomes is well researched, especially in minority ethnic populations (Bush et al. 1998, Anderson et al. 2005, Lawton et al. 2008). Medical sociology has explored the socially regulated interactions and expectations that lead to individuals failing to adhere to medical and health related dietary restrictions (Lawton et al. 2008). However, there is a lack of research on how specific spaces and contexts, as opposed to specific ethnicities or socio-cultural identities, impact on health-related eating behaviours.

Once in these cafes and social clubs (these social spaces), the participants automatically engaged with the food choices on offer and performed context-specific food practices. Their behaviour and food choices in these spaces were governed by how they perceived the space. When these consumption spaces are regarded as primarily social in nature, eating in them becomes almost an automatic behaviour (Cohen and Farley 2008), guided and shaped more by the

environment and context than critical decision-making or personalised narratives and identities related to food. These places were not regarded primarily as somewhere to eat. They are social spaces: places to meet friends; play bingo; to socialise, and so on. The food eaten in these spaces was not included or reflected upon in the accounts of diet and food practices that participants gave, unlike foods eaten in the home. Food practices and values are, in this sense, context specific. Despite giving a detailed account of restricted diets due to chronic medical conditions, the participants quoted above did not necessarily practice these restrictions when eating in spaces that they constructed as social. In which case, these examples appear to reinforce the idea that the observance of food practices, of specific 'food ways' varies in different contexts and can be heavily influenced by social setting and perceived social pressures (Buckser 1999). Buckser's historical piece on the development of kosher foodways for Danish Jews shows that kosher practices are dependent on which context they are performed in. For example, it is increasingly common to observe kosher in the home, but to also make strategic exceptions in non-Jewish settings (Buckser 1999).

#### **4.4.2 'Local' shops**

When talking about the act of going 'food shopping' participants talked about 'local' shops and supermarkets in very different ways and as fulfilling different household needs. Participants typically described using local shops to get 'bits and pieces'. In the extract below a part time teacher and mother of one explained that she did her weekly-shop at Asda and bought additional purchases throughout the week from her local shops in Bearwood.

*CT: How often do you go to Asda?*

*Catherine: It's normally just the weekends, Saturday or Sunday so ... then I might pick up bits and pieces in Bearwood.*

**(Catherine, aged 37. Extract from go-along interview)**

Similarly, a West Bromwich resident explained taking a similar approach to food shopping. In the extract that follows she cited bread, milk and sugar as examples of foods she bought at her local shop in between weekly-shops at Asda:

*Sue: Bread, milk, sugar ... if I ever run short. I mean I get them at the Asda on a Saturday but sometimes you run out of different things.*

**(Sue, aged 49. Extract from go-along interview)**

As can be seen in the examples above, local shops were most commonly referred to in relation to, or in comparison to supermarkets. Participants talked about using these shops on an ad hoc basis to supplement their planned visits to the supermarket. Regular 'big shops' at supermarkets interspersed by 'top-up' trips at local stores to meet daily needs is a well-documented approach to household food shopping (Grewal et al. 1998, Henderson Research 2011). Smaller, local grocery stores represent a more traditional, interpersonal and localised form of retailing that is rapidly being overtaken by retail consolidation in the form of supermarkets (Everts and Jackson 2009). This is especially apparent in Sandwell, where micro retailing of food in neighbourhoods is increasingly being obscured by reliance on large chain supermarkets (Grewal et al. 1998). In the extract below a mother of five explains that she uses Asda for her main food shopping, but goes on to explain the social benefits of using her local shop:

*CT: How often would you come to Great Bridge Retail Park then?*

*Collette: Once a fortnight and then I'd use my local shop for anything.*

*CT: Where's your local shop?*

*Collette: Right on the corner of my street, there's actually a photograph of it on the camera. It's called Mr Convenience and G----- (store manager) is very community spirited.*

*CT: Your friend?*

*Collette: She actually owns the shop. Erm ... she'll ask you for any ideas that you look for that you can't get hold of and nine times out of 10 if you go in there she'll give you a cup of tea as well ... she's very, very helpful.*

(Collette, aged 44. Extract from go-along interview)

Similarly, in the following quote from a go-along interview with a 51-year-old Bearwood resident, Alan, he explains why he used the local Indian food shops, in this case a butcher's in Smethwick, to supplement his weekly trip to Asda:

*Alan: Well ... you get minced lamb there and you can't get minced lamb anywhere really. You might find some in the supermarket. You certainly wouldn't find any in ... say like in what I'd call an English area supermarket. You wouldn't find minced lamb. So you couldn't ... you can't get chopped chicken there, unless you go ... you're never going to eat chopped chicken. So from that point of view I like it. I like it if you see what I mean; a) you can't get in anywhere else and b) it's ... it's slightly cheaper. And I just enjoy coming over here really; it's all part of the experience really ... going home with all fresh ingredients. Er ... I just want to show you that Chinese shop there ...*

(Alan, aged 51. Extract from go-along interview)

Visiting these smaller, 'local' shops gave him access to unusual foods and he enjoyed the environment and experience of using them. Directly after buying some meat from the butchers we went to Cape Hill Asda, where Alan carried out his 'proper shop.' Although the supermarket was at the core of his food shopping practices, as with most participants, local shops provided a welcome supplement and variety (see quote below).

*Alan: I go to Asda you know ... I try to go in one of them shops there (referring to Indian grocers) to get flavour in my shopping really.... ..*

*... .. I used to go shopping on Smethwick High Street cos there's all Indian shops there er ... I used to go there ... but now I just go to a couple of shops round the corner (pointing) that are quite good ... .. I find it quite vibrant really*

(Alan, aged 51. Extract from go-along interview)

#### **4.4.3 Supermarkets**

As discussed in the previous section, when asked where they did their food shopping most participants responded by naming a large chain supermarket, sometimes several, as can be seen in this response from a Bearwood resident and mother of two:

*CT: So where would you normally do your food shopping?*

*Caroline: Sainsbury's ... .. My husband picks me up. I usually get the bus from here and he picks me up. It's about 15, 20 minutes from here. But it's the nicest supermarket around here. I mean we've got Iceland. I don't like Aldi. I mean I get bits in there, you know. Cos I like things ... they do nice olives, stuff like that. So ... but I wouldn't get a weekly shop ... and the butchers that used to be really nice. There's only one, but because it's far more convenient to get it all under the one roof ... ..*

(Caroline, aged 52. Extract from photovoice interview)



Sainsbury's is the site of the 'weekly shop' for Caroline, who worked full-time, because it is the '*niciest supermarket*' as compared to Aldi and Iceland. The store she refers to is Oldbury Sainsbury's SavaCentre (pictured in plate 4.2 and described in section 4.3).

An additional illustration of the positioning of supermarkets as the primary sites for food-shopping is presented in the extract below. The quote is taken from a go-along interview with a young couple, Simon and Hollie. As we were walking through Victoria Park, in Smethwick, Simon, a father-to-be, listed the shops he and Hollie used to buy food from.

*Simon: Well we go to Iceland sometimes or we go to Tesco over there (pointing towards Tesco Express) or we go to Asda (referring to the Cape Hill superstore) ... sometimes we just go and get a few bits from Iceland, a few bits from Asda and a few bits from Tesco.*

(Simon, aged 26. Extract from go-along interview)

Simon merges a superstore, Express store and High Street branch into one category. A supermarket is, therefore, presented as a type of store rather than a size of store. All the sites the participant lists above are highly successful corporate chain stores. The description of particular stores as 'supermarkets' was by no means completely uniform or stable, it was relationally constructed by participants' discourses and practices (Gregson et al. 2002). As demonstrated in the quotes above and in the previous section, for the participants in this study 'supermarkets' were generally constituted as large chain supermarkets. Little or no distinction was made between High Street stores and superstores. The store brand, as opposed to scale or size of store, appeared to be the basis on which shops were deemed to be supermarkets.

#### 4.4.4 Discount Stores

Discount stores differ from supermarkets in four main ways; they offer fewer categories of goods; they offer very few well-known brand names; these stores are relatively small compared to supermarkets and; lastly, the shopping environment is very functional, with little decoration and goods often stacked-up in cardboard boxes (Cleeren et al. 2010). Discount stores occupied a much less central place in participants' food practices than supermarkets or local shops. Aside from three participants' photovoice interviews, all of the references made to these types of stores came from go-along interviews. It was only when we were on go-along interviews, when participants were actively inhabiting their food environments that any mention of them was made. Yet, a total of seven visits to discount stores were made during the go-along interviews (see table 4.2). Discount stores were generally not included in narratives of food practices and few planned purchases appeared to be made from these sites. The extract below is from a go-along interview in Great Bridge Asda with a retired 69-year-old woman. She commented that she will 'pop in' to the Pound Shop in West Bromwich if she is passing. She does not make planned trips there.

*Pat: I've got porridge, so I need ... either cornflakes, I've got cornflakes ... or I need some Shredded Wheat.*

***Participant picks up a box of Weetabix.***

*Pat: These are alright ... 24 ... for £1 ... in the Pound Shop.*

*CT: Do you go in the Pound Shop a lot?*

*Pat: Sometimes. You can pop in and get something if you're up the town. I'll just have a small one I think.*

***Participant picks up a small box of Weetabix and puts them in the trolley.***

(Pat, aged 69. Extract from go-along interview)

A further illustration of a spur-of-the-moment approach to deciding to visit discount stores can be seen in the following quote. When accompanying a 43 year-old civil servant, Lawrence, on a trip to Cape Hill Asda he decided to visit Home Bargains, the discount store located next to it in the retail park, on impulse.

*Lawrence: Have you been to Home Bargains?*

*CT: No*

*Lawrence: Let's go and have a look then*

***We walk into Home Bargains and pick up a basket***

*Lawrence: I always used to go in here, it's a kind of discount store for food and non-food ... It's better than Netto ... what annoys me about places like Lidl and Aldi is that if you go abroad where they shops are from they are better quality. I think we get short changed here, cos what they do here is not as good. I went to one in Italy at Easter and they have really good food in there. You know it's cheap but it is good food, and Lidl in England is OK ... But Home Bargains, they get a lot of job lots of stuff in there ... near their sell-by dates and erm ... But I guess one reason I stopped shopping here so much is I've started eating more healthy and there is junk in here that I know I shouldn't be eating, you know. Erm ... let's see.*

(Lawrence, aged 43. Extract from go-along interview)

Once we were in the store Lawrence embarked on an evaluation of discount stores in general (quoted above) and made comparisons to those he had visited abroad. We spent a good deal of time in the store looking around, although he only bought one item, a multipack of tinned tuna. Practices performed in these stores were constituted as non-essential and opportunistic and, therefore, difficult to elicit information about unless participants were actually in their food shopping environment.

The decision to use these stores was typically unplanned and context specific. On a shopping trip to West Bromwich town centre with a 47-year-old fitness instructor I was a little curious when we parked in Netto car park. The participant had not mentioned the store in her photovoice interview and did not list it as one of the places she was planning to go food shopping that day. Netto is a Danish discount-supermarket that sells a wide variety of food products and household items at a discount and relies heavily, like many discount stores, on parallel imports. West Bromwich Netto is located at the back of the Sandwell Centre precinct and has its own car park. In this extract she explained that she intended to visit Netto in order to take advantage of their shop-and-park offer:

*CT: Do you ever go in Netto?*

*Melissa: Yeah ... I'll be going there later on because if you park in here it's £2 and if you buy something in Netto for £5 ... I don't know I might go in there ... I don't know.*

***We get out of the car and walk towards the parking meter while the participant takes a call from her daughter arranging to meet her at the community centre later.***

*Melissa: As I said you get back your £2 but you've got to spend money in there and it's not all the time that you want to buy anything in there.*

(Melissa, aged 47. Extract from go-along interview)

Melissa remained undecided about whether or not to shop in Netto until we were making our way back to the car after going to the indoor market and Iceland. Upon entering the store the participant set herself a limit on her purchases (see extract below).

***The participant picks up a bottle of Irn Bru then walks over to the ginger beer and picks up 4 cans. She is mumbling to herself.***

*CT: Are you adding up as you go along?*

*Melissa: It adds up, it adds up (laughs)*

*CT: Why are you doing that?*

*Melissa: Cos I don't intend to spend more than £5*

***The participant picks up a loaf of bread and continues to add up the prices to herself***

(Melissa, aged 47. Extract from go-along interview)

Although she decided to shop in the store, mainly to get the car park discount, Melissa was very critical of these consumption spaces, as was Lawrence. They were very much aware of the risk of buying too much or 'junk'. As can be seen in the quotes above, visits to and purchases from these stores are framed in terms of price. This is perhaps unsurprising given the recent increases in customer price awareness and sensitivity, decreases in store loyalty and the fact that price aware consumers are more likely to be multi-store shoppers (McGoldrick et al. 1999).

## **4.5 Summary**

The Sandwell food environment has been both extensively researched and the subject of many interventions and education programmes. However, as with food environments literature more generally, there is an absence of qualitative research on how individuals actually perceive and use the food environment. This study attempts to address that by presenting detailed and individual accounts of food practices and interactions with the food environment. This chapter, in particular, gave an overview of the research site and its food environment before presenting results on how participants perceived and used specific sites within the local food environment. The sites of food consumption used by the participants in this study varied considerably. A mixture of

supermarkets, smaller or 'local' stores, markets and cafes were visited for go-along interviews and an even broader range were discussed and described by participants in photovoice interviews. Different types of stores and outlets appeared to serve different purposes.

Eat-in spaces were constituted by participants primarily as social spaces and, as such, subject to context specific eating practices. When inhabiting these spaces participants often abandoned health-related dietary restrictions that they reported followed carefully in other contexts and settings. The notion of context-specific eating practices has implications for understanding how and why individuals deviate from healthy-eating plans and medically restricted diets. Conceptualising eating spaces as social spaces can help account for the often contradictory nature of individual dietary behaviours. Supermarkets were repeatedly and consistently constituted as the site of the 'main' or 'weekly' shop for participants and households in this study. 'Local' or smaller shops were used to supplement these regular, planned shops with daily incidental purchases

Discount stores were viewed as sites of non-essential purchases and decisions to visit them were always framed in terms of cost. Shoppers tend to evaluate stores on the basis of what they believe to be the overall price level of the store. This image is formed through a limited number of actual evaluations or perceptual discriminations, generalised across a store (McGoldrick et al. 1999). Participants treated these sites with a degree of caution and suspicion, being careful to avoid purchasing too many items from them. Discount stores were rarely constituted as central to food practices and were not sites of planned purchases or even planned visits.

The next chapter will focus on supermarkets, the core site of food shopping practices for the participants of this study, by examining how participants perceived them and then going on to explore the routine practices of food shopping they deployed within them.

## **Chapter 5:**

# **Shopping for food: perceptions of supermarkets and routines-of-practice therein**

## **5.1 Overview**

Interactions with, and perceptions of, the Sandwell food environment were described in the previous chapter. This chapter presents findings on experiences of the supermarket and the routinized approaches to food shopping that participants adopted. The term routines-of-practice will be introduced and used to characterise these routinized approaches. The term is an adaptation and development of the concept of routine behaviours (Ilmonen 2001, Jastran et al. 2009) discussed in sections 2.3.3 and 2.4.1.

In the UK, it has been found that food consumption varies between neighbourhoods and that living in a deprived neighbourhood may be independently associated with poor diet (Anderson and Hunt 1992, Forsyth et al. 1994, Shohaimi et al. 2004). Residents in some areas of Sandwell, for example, have not had reasonable access to a range of fruit and vegetables within walking distance to where they live and have, instead, had relatively high levels of access to stores selling chocolate and biscuits (Rex and Blair 2003). As described in chapter four, supermarkets were consistently identified as the site of the ‘main’ food shop for participants of this study and were the most frequently visited type of store for the go-along interviews (see table 4.2). Smaller, local grocery stores are rapidly being overtaken by retail consolidation in the form of supermarkets (Everts and Jackson 2009), with supermarkets now central and highly regular to food shopping practices (Fine 1995).

In addition to being a diet related behaviour, shopping for food is also an act of material consumption, situated in highly designed environments, such as supermarkets. Since the mid-1980s there has been rapid growth in the study of consumption and, increasingly, of consumption as practice (Jackson and Holbrook 1995). Consumer research studies show that in-store decision making about food purchases is a complex process and that theorising it as a linear and rational process is unhelpful in understanding consumption behaviours (Gram 2010). Individuals do not behave in uniform ways in food stores.

This chapter begins with a description of how participants described supermarkets and the features that they identified as central to the food shopping experience, namely, an extended range of choice and the presence of numerous price promotions. After which, the habitual nature of participants' practices of food shopping are addressed. The term routines-of-practice is used to describe the overall patterns of behaviour, movement and decision making that participants demonstrated when food shopping. Participants varied in their responses to the supermarket environment from passive and chaotic ways of approaching purchasing decisions to more planned and purposeful interactions with the space. Data are taken from go-along interviews, field notes and observations in supermarkets, and also from participants' descriptions of these stores in photovoice interviews. In examining both the context-specific perceptions of supermarkets and the routine aspects of food shopping behaviour the following research questions are addressed:

- How do people perceive supermarkets as built environment sites?
- How do individuals behave when shopping for food and how do they account for these behaviours?
- What characterises the routines of behaviour and decision making that people employ when shopping for food?



## **5.2 The context-specific norms of supermarkets**

This section outlines the ways in which participants described supermarkets and the dominant features and experiences that they identified as characteristic of these spaces. Although supermarkets and larger stores are often inconsequential in terms of architectural innovation, they are hugely significant symbolically and culturally. Consumption spaces are part of everyday culture and practices of the mundane, they are highly textured and symbolic places, containing multiple and contested meanings and opportunities (Jackson and Holbrook 1995). Bell and Valentine refer to supermarkets as ‘temples of urban food consumption’ and suggest that a trip to the supermarket is now a ritual and landmark in the structuring of our life-patterns and everyday life (Bell and Valentine 1997) Supermarkets and large discount stores, as participants described them, were constituted by two context-specific characteristics:

- An extended range of choice
- Price promotions

The degree to which individuals interacted with these features and relied upon them when making purchasing decisions varied and is described, in full, in section 5.3.

### **5.2.1 Expectations of an extended range of choice**

A wide range of products in-store to choose from has long been identified in both planning and consumer studies research as a key factor in selecting shopping destinations (Oppewal et al. 1997, Timmermans 1982, Babin et al. 1994). Participants of this study consistently cited an extended variety of

products as a desirable and, at times, even necessary aspect of their shopping experience. In the quote below, a part time office worker and mother of four explained why she had to supplement her weekly-shop at Tesco (the site of the go-along) with trips to Asda.

***Participant continues walking down the aisle***

*CT: What are you thinking of now?*

***Jayanti: I'm thinking ... fresh stuff, but what I do ... Sunday when I go to Asda again I buy green grocery stuff from there. But sometimes I do that as well ...***

*CT: Why would you get that from Asda rather than here or somewhere else?*

***Jayanti: I don't know they've got more of a selection there. It's not much ... this Tesco is too small***

(Jayanti, aged 45. Extract from go-along interview)

There is more choice at Asda. It has a greater selection of products to choose from and it is this that makes it appealing. Jayanti did not, and possibly could not, say what she would like to buy in Asda that could not be bought in Tesco, but she still wanted to have a wide range of products to choose from. It was the expectation of choice, rather than the individual items of purchase to choose from, that was important.

All of the participants expressed a preference for a wide range of choice, regardless of their budget or how much they intended to buy. People actively sought out stores, sites and offers where they knew they would be presented with a wide range of choice. For example, in the quote that follows a 49-year-old West Bromwich resident explains that she prefers Asda to her local shops because of the range of choice on offer there:

*CT: So why wouldn't you use the Nisa or the shops at Carters Green then?*

***Sue: Well, not really. There's not the choice, there's not my choice you know. Asda's better I think.***

*CT: What would you be looking for that they haven't got there?*

***Sue: Well you know ... just ... they've just got more choice the Asda and it's a bigger store. I mean they sell clothes as well don't they.***

**(Sue, aged 49. Extract from go-along interview)**

The participant had two school-age daughters living at home and the family existed on a very limited income from social security benefits. Her photovoice interview revealed household food practices of meals prepared largely from scratch and made to last over a few days, such as stews and casseroles. Their meals tended to be made from simple ingredients with a lot of repetition. All of these foods could be easily obtained at the local shops in Carters Green, within walking distance of where the participant lives. Even without the money to spend on more purchases, even if purchases were routine and heavily constrained by cost, the expectation of choice was an important factor in deciding where to shop.

Once inside the supermarket the importance of choice is still evident. Collette, quoted below, had five children living at home and also reported having what she considered to be a limited income:

***Collette: Oh, now ... my biggest question is ... is that a one-off flavour?***

***Looking at the Oat-So-Simple Sweet Cinnamon flavour.***

***... But is that a one-off flavour or is that going to be on the shelf permanently. I'm tempted to get it but I'm also thinking I've got enough breakfast cereal in. M--- likes it and we've got 2 boxes of the Golden Syrup one, so I'll leave it for now.***

**(Collette, aged 44. Extract from go-along interview)**

Her rationale for wanting to buy the product (porridge oats) was novelty. It was a new addition to a range that she was familiar with. Even though she reported having enough cereal at home she was still tempted, further motivated by the fact that the new flavour might be a limited edition and therefore not be available again. When presented with a new choice of product the participant automatically engaged. The simple fact that there was a choice, a *novel* choice, added to the appeal. Extended choice and novelty are contextually specific norms of the consumption space, of the shopping experience. Supermarkets sell a vast range of goods under one roof. Displays, signs and lighting encourage the consumer to look around, to enjoy browsing from the range on offer (Bowly 1997). Part of the culture and spectacle of large shopping spaces, like supermarkets, is colour, display and the encouragement of sensory pleasure from these features (Leach 1984).

### **5.2.2 Price promotions**

Price promotions are also a vital part of the consumption space environment and of the context specific culture of the supermarket. All participants commented upon them in their interviews and all the go-along interviews conducted in supermarkets involved interactions with them. Consumer price knowledge is an area of fundamental importance to the pricing strategies of retailers, especially supermarkets (McGoldrick et al. 1999). These spaces contain a vast array of price information, offers and promotions. Few individuals would be able, or even want, to retain more than a fraction of this information, which creates the opportunity for retailers to carefully select and target their promotions and reductions (McGoldrick et al. 1999). Perceptions of and reactions to price promotions varied substantially. For some, specifically those that tended to deploy more contextually driven and reactive routines of shopping behaviour, price promotions served as a means of guiding their use of the store (as will be discussed in sections 5.3.1 and 5.3.2). However, when outside of the

consumption space, when not actively inhabiting and interacting with it, these participants became more critical of price promotions, as demonstrated here by Collette in her photovoice interview:

*Collette: But you do tend to get more from Asda cos ... and it's awful cos you have to really resist a lot of their adverts. You know the special offers.*

*CT: Do you feel particularly tempted by those?*

*Collette: Oh yeah, because it's ... especially canned stuff because it's like 'Oh, that'll keep' and then ... like I was looking through my cupboard today and there was stuff in there that was out of date from like 2007. So I've been and got like offers and no one's eaten them so I've wasted money. So ... I know they're gearing it towards getting it off the shelf and whatever but ... and it is hard to resist them.*

(Collette, aged 44. Extract from photovoice interview)

Similarly, whilst driving into West Bromwich town centre a 47-year-old participant, Melissa, explained the potential pitfalls of shopping in a large supermarket (Asda) and interacting with price promotions (see below extract).

*Melissa: Sometimes it is cos Asda is just open 24 hours and because of my hectic lifestyle you know ... Cos sometimes when I finish work, 5 'o' clock it's closed, the market's closed. So I'll have to spend a bit of extra money and go to Asda. And the thing about it as well, when you go to Asda you don't just end up buying what you're supposed to. You end up buying ... you see something that you don't really want like buy-one-get-one-free ... and erm you end up spending more money*

(Melissa, aged 47. Extract from go-along interview)

Asda, both the Cape Hill and Great Bridge branches, had a large number of very visible price promotions and they were much more prominent than in other stores visited for this study. In both branches there was a large 'special

offer section' located at the entrance of the store (see plates 5.1, 5.2 and 5.3 below).

**Plates 5.1 and 5.2: Photographs of special offer displays in Great Bridge Asda (by CT).**



**Plate 5.3: Photograph of special offer display in Cape Hill Asda (by CT).**



Four out of the 10 participants who visited Asda as part of their go-along interviews (see table 4.2), went straight to the special offers section at the front of the store and soon as we arrived. 'Roll back' promotions were located on almost every end-of-aisle display and there were multiple purchase discounts in every aisle, like that pictured in plates 5.4 below.

**Plate 5.4: Photograph of ‘Roll Back’ promotion in Cape Hill Asda (by CT).**



Price promotions and discounts are recognised as one of the key factors that most influence store patronage decisions (Grewal et al. 1998, McGoldrick et al. 1999). Large consumption spaces, especially supermarkets, are highly designed and considered built environment sites that facilitate certain behaviours, often at an unconscious level. They shape and even dictate how we ‘do’ shopping once in these environments. Marketers are increasingly favouring in-store marketing and promotions, such as reductions and special offers, over traditional out-of-store media advertising (Egol and Vollmer 2008). Price promotions are an integral feature of the shopping experience, of the cultural politics of shopping. How individuals interact with and perceive them is key to understanding the role of agency in shopping behaviours.

Cultural studies work on large consumption spaces tends to focus on representation and semiotic analysis, on ‘reading’ these environments like texts rather than engaging with consumers as active agents (Jackson and Holbrook 1995). On the other hand, orthodox economic theories of consumer choice reduce ‘food choice’ to the demand for physical objects (of food) by each individual consumer (Fine et al. 1998), thereby implicitly assuming the process of choice to be rational and consistent. However, consumers are often unaware of the exact processes and decision-making that surround their purchasing behaviours as they tend to fall into well-established habits and responses when in

the supermarket and actively shopping (Gram 2010). The ways in which participants perceived the supermarket environment, and the expectations they had of the shopping experience, are tied to the ways they behave in those spaces. Choosing from a range of products and stopping to investigate and engage with price promotions can offer the individual routine, easily recognisable and familiar ways in which to structure their shopping experience. The various promotion stands and special offer displays can act as landmarks and points-of-action in an otherwise expansive and mundane space. The supermarket aisles are punctuated with offers and promotions (as illustrated in plate 5.4) that entice the individual to stop and look. The extent to which people respond and rely on these features, or even ignore and resist them, can be characterised in terms of planning and agency, and are discussed in the next section.

### **5.3 Understanding behaviour in the supermarket: routines-of-practice for food shopping**

This section addresses the ways in which participants behaved in supermarkets; how they moved about those spaces and how they interacted with the various features of them. The practice of shopping for food as an everyday activity was observed and discussed during go-alongs and also talked about, more generally, in photovoice interviews. Geographers have demonstrated that regular activities, practices and routines are constrained by time-space factors (Takashashi et al. 2001, Jackson and Thrift 1995). The ways in which geographers have investigated this varies considerably. The sub-discipline of time-geography was developed as a way of describing the space-time structure of social events and at the same time analysing the interdependence of these events (Hagerstrand 1975, Jackson and Thrift 1995, Thrift 1977). Time and space are resources that individuals use, allocate and deploy in their daily activities and routines. Time geography emphasises how the conditions of time, space and environment



constrain and impose upon what an individual can do and the practices they can perform (Thrift 1977). The approach has been extensively criticised for being tacitly masculine in its theorising of individual paths of action and taking little account of interdependence and co-operation (Rose 1993). Also, and more recently, it has been overshadowed by GIS in terms of examining individuals' movements through time and space (Svee et al. 2009, Miller 1991, Miller 2005). However, this quantitative approach remains valuable and relevant because it deals with the choreography of an individual's activities and acknowledges the fact that every situation and practice is inevitably rooted in context and past situations (Svee et al. 2009). The situatedness of human movement is highly relevant to understanding how individuals behave and perform in particular contexts (Jackson and Thrift 1995), including that of food shopping.

Qualitative geographers have also addressed notions of practice, routine and movement, but from quite a different angle. Qualitative and cultural geographers have focused on practical action and performance, looking at how individuals and groups inhabit their worlds through investigating actions (Latham 2003). A concern for context-specific practices and everyday activities is very much associated with the subject matter of the 'non-representational' theories that became an influential paradigm within cultural human geography from the mid-1990s onwards (Anderson and Harrison 2010). The term 'non-representational theories' refers to a body of work that shares a concern for *not* prioritising the role of representation in accounts of subjectivities and the social (Anderson and Harrison 2010), leading towards a greater emphasis on the symbolic importance and meaning of place and context.

In a very different way from quantitative time-geography, this body of literature also examines the situatedness of human activity (Thrift and Dewsbury 2000, Gregson and Rose 2000). For example, Geographic work on movement and mobility (Spinney 2009, Wylie 2005, Wylie 2009) has looked beyond movement as the practical outcome of rational decision making to consider the

ephemeral meanings of movement (Spinney 2009). Movement is not merely a means to an end, it can be shaped and motivated by experience and place. To illustrate, Wylie's reflections on an encounter with a series of memorial benches in Cornwall town, a very specific site, describes landscapes and his movement within them in terms of embodiment, perception and distance (Wylie 2009). We move around a particular space not just to arrive somewhere or achieve something, but sometimes just to fully experience that space.

With regard to health, geographers and other social scientists have long argued the importance of and explored the spatial dimensions to daily life that significantly affect health and illness (Takashashi et al. 2001). Although individuals are often unable to verbally articulate their spatial and social behaviour and what influences it, the influence of these factors on individual action can often be 'read' to some degree from the daily routines of individuals (Takashashi et al. 2001). Food shopping in large consumption spaces, like supermarkets, involves moving around, interacting with and using a specific space. Food shopping is more than a mundane domestic task; it is a complex, multi-layered and situated activity. Latham (2003) called for a reframing of research as a creative and performative practice, seeking to understand everyday urban public culture as embodied practice that is located within particular networks of power and knowledge (Latham 2003). As discussed in section 2.3.3 and 2.4.1, the concept of routine behaviours and practices has also been used to characterise mundane and repetitive consumption activities (Ilmonen 2001) and habitual family eating practices (Jastran et al. 2009).

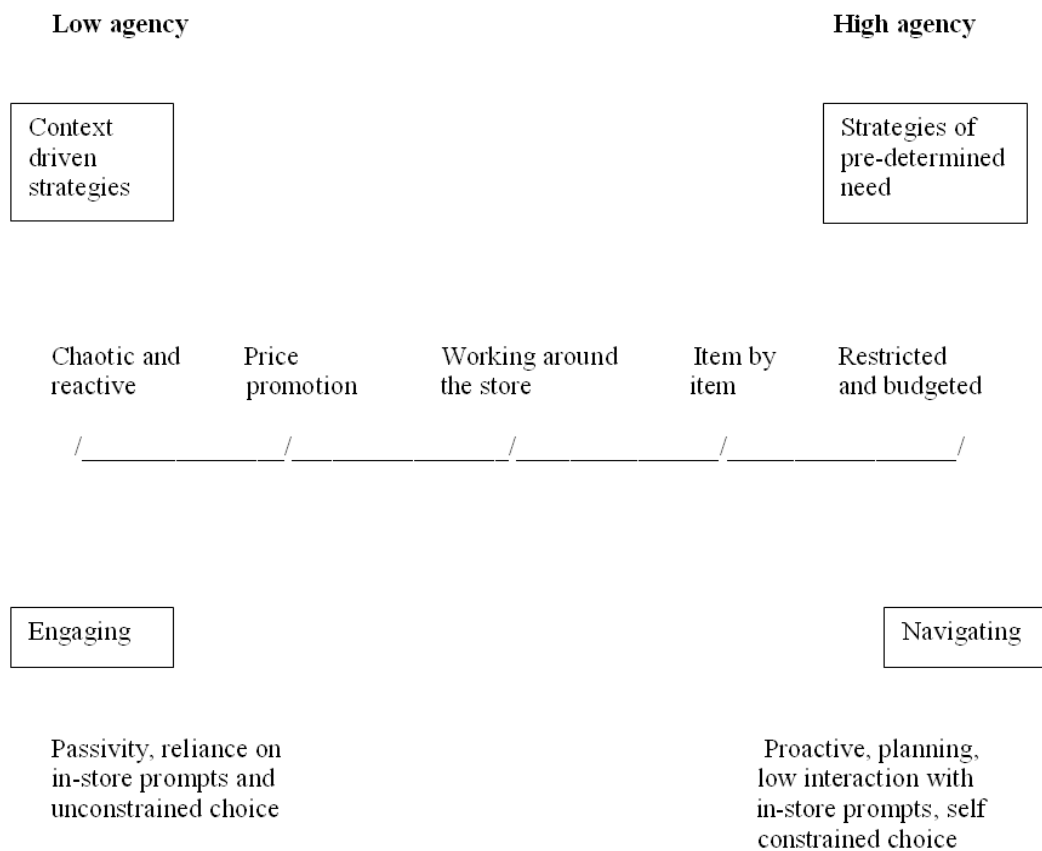
Participants in this study demonstrated and described routinized patterns of behaviour when shopping for food in larger stores. The descriptions that follow outline how individuals moved about in-store and how they interacted with the features of the consumption space. These patterns of behaviour and movement are broadly characterised and presented here as types of 'routines-of-practice', based upon observations and interactions with participants while they

were shopping for food. The term ‘routines-of-practice’ refers to the habitual (and often uncritical) approaches, behaviours, decisions and even ways of moving around, that participants adopted in specific contexts. A routine-of-practice is a characterisation of the general way in which a participant consistently approached a routine and repetitive food related task, in this instance, food shopping. As mentioned in the previous section (5.2) and discussed at length in sections 2.3.2 and 2.3.3, consumers are often unaware of the exact processes and rationalisations that occur when they make purchasing decisions in supermarkets because they tend to rely on well-established and somewhat tacit routines of behaviour (Gram 2010). The term routines-of-practice is an adaptation and development of the concepts of routine discussed in the literature review (chapter two) and is intended to portray sets of routine behaviours and decision making.

The ways in which participants behaved in-store - the ways in which they used the supermarket space, moved around it and made decisions about what to purchase - can be explained with reference to differing levels of individual agency, planning and reliance on the in-store environment. ‘Agency’, as it is used here, refers to the reflexive monitoring of personal conduct and behaviour of participants whilst shopping (Jackson and Holbrook 1995). Some participants actively ‘navigated’ the supermarket space. Such individuals had a clear idea of what they intended to purchase and/or how much they intended to spend prior to the shopping trip. This degree of planning necessitated a high level of agency, resulting in shopping routines-of-practice in which individuals interacted less with environmental prompts, such as special offers, and instead relied more on their own pre-determined intentions. By contrast, those who engaged in lower agency routines-of-practice relied heavily on in-store cues and often demonstrated somewhat chaotic in-store behaviour.

It is important to note that the routines-of-practice presented are not exclusive, discrete categories. Some participants deployed a mixture of routines-of-practice in any one shopping trip. The routines are best understood as a spectrum of low to high-agency, as overlapping strategies which are summarised in the diagram below (figure 5.1). The diagram depicts five broad routines-of-practice that can be characterised from the data: (1) ‘Chaotic and reactive’, (2) ‘Price promotion’, (3) ‘Working around the store’, (4) ‘Item by Item’, and (5) ‘Restricted and budgeted’. ‘Chaotic and reactive’ is the lowest agency and most highly environmentally-determined routine-of-practice, and ‘restricted and budgeted’ the highest agency and has the lowest level of reliance on the in-store environment. The five categories are explained and explored in the sections that follow.

**Figure 5.1: Routines-of-practice adopted when shopping for food in supermarkets**



### 5.3.1 'Chaotic and reactive'

At the very lowest end of the agency spectrum is the 'chaotic and reactive' routine-of- practice, so named because participants tended to react to features of the supermarket environment in a passive and sometimes chaotic way. Participants demonstrated and reported very little or no planning at all and relied heavily and often exclusively on the physical and social architecture of the space to guide their behaviours and purchases. This approach to shopping was characterised by erratic movements around the store. Participants often wandered around the supermarket, doubling back on themselves, and visiting the same aisle (or even shop) several times. As a result, the go-along interviews that were predominantly 'chaotic and reactive' in terms of behaviour were the longest interviews, the lengthiest of which was nearly three hours long. Also, these interviews typically included unplanned non-food purchases such as clothing, stationery and gifts. These were also some of the most difficult go-along interviews to conduct, as participants became very much engrossed in the process of examining and selecting goods, so much so that it became difficult to talk to them. This, coupled with erratic physical trajectories around the supermarket space, meant that interactions with participants, in this context, could be very limited. The disjointed nature that these interviews could take is demonstrated in the quote below:

***The participant turns around and starts looking at the shelves opposite.***

*CT: What's caught your eye?*

***Lauren: Digestives (picking up a packet of mini digestives).***

***The participant looks at them, puts them back and starts looking at the other packs of biscuits.***

***Lauren: I'm not a big biscuit eater ... I love them***

*(pointing at a box of Tux cheese biscuits). I am a fan of cheese ... it's only like ... if I eat block cheese I can only eat really mature cheddar.*

***The participant starts looking at the chocolate biscuits***

*Lauren: I have to be really in the mood for those*

***The participant turns around and starts looking at the multipacks or crisps again, carefully scanning the shelves and eventually settling on Nik Naks, which she puts in the basket.***

***The participant walks off again and stops to look at the cream cakes***

*Lauren: I like them cakes but I don't like trifles ... Oh I've got to get my mum a card.*

***The participant walks towards the greeting card and magazine aisle. She stops short at the teas and coffees and starts looking at the shelves.***

(Lauren, aged 23. Extract from go-along interview)

The above extract is taken from a go-along interview in Great Bridge Asda with a West Bromwich resident. Lauren lived at home with her parents and worked part time in child care. The purpose of the shopping trip was to buy food for an upcoming church retreat. During the interview (which lasted over an hour) Lauren wandered around the store looking at a wide variety of foods and with little clear idea of what items she might want to purchase. In the extract it can be seen that Lauren is switching her attention from one product to another, moving up and down the aisles and finally walking off to a different aisle. She examined biscuits, crisps and cakes. This 'wandering' around the store from product to product was characteristic of low-agency, chaotic shopping routines. In this instance the participant provided a narrative while she was examining the products. There is no interviewer dialogue in this extract (above), only observation and Lauren's narrative. Lauren was entirely absorbed in the activity

of examining products, in responding to the environment and, therefore, became difficult to engage with compared with interviews with participants performing less chaotic behaviours. A further example of chaotic and distracted behaviour can be seen in this extract, from a go-along with a young man in West Bromwich Asda. As is demonstrated, he experienced a great deal of indecision over what to purchase:

*CT: How much is the Asda's ice cream?*

*Adam: £1.97. I don't know whether to ... er ... put the ice cream back and get the cheesecake.*

*CT: How much is the cheesecake?*

*Adam: Pound (pauses for a long time over the cheese cake) ... Don't know what to do (laughs) (moves on to examining the ice cream closely). Sorry about this ...*

*CT: That's OK ... long as you like ... what governs your choice?*

*Adam: (still staring at the ice cream) ... Yeah ... I don't normally buy this though ... so no. I'm not really thinking about money now (continues examining ice cream). I'm probably gonna get that ... Oh, I don't know what to do! (goes back to comparing the ice cream) ... that's it (puts ice cream back in the freezer) ... Oh, I'm sorry now ... I'm gonna go and get some bread (walks towards bakery section, past the cakes and pauses to look) ... see ... now I've seen something else I like ...*

*CT: What are you looking for?*

*Adam: Cookies ... or yum yums ... they're really nice too. I don't normally buy stuff like this see (goes quiet and looks at cakes)*

*CT: Why can't you make your mind up?*

*Adam: (laughs) So much temptation. If it wasn't here it wouldn't have bothered me.*

(Adam, aged 18. Extract from go-along interview)

At the time of the interview Adam was living in temporary accommodation at the YMCA and was not in paid employment. We spent a good deal of time by the frozen desserts (as can be seen above) while he tried to make his mind up between several different types of ice cream and a cheesecake. His speech was disjointed, as he was concentrating on his dilemma, and he kept walking back and forth the aisle, looking at various desserts. At length he put the ice cream back in the freezer and decided to buy some baked confectionary instead. At the very end of the shopping trip he decided he did want ice cream after all and we picked up a carton on the way to the check-out. His behaviour, speech, movement and decision making could all easily be described as chaotic. Adam only had a £10 budget to spend that day, yet we were in the supermarket for around 45 minutes, as he could not decide what to buy. His approach to purchasing food was contextually driven and passive, he reacted to the products displayed rather than having a clear idea of what he intended to purchase. As he says when he is deciding whether or not to buy cakes, *'if it wasn't here it wouldn't have bothered me.'* The role of planning in in-store decision-making has been well researched and the concept of the impulsive-shopper is a familiar topic in consumer studies (Woodruffe-Burton et al. 2006). For example, in their quantitative study of planning and food shopping, Cobb and Hoyer highlighted a trend towards unplanned consumer decision making, identifying 'impulse purchasers' as characteristic of this approach (Cobb and Hoyer 1986).

The largely unplanned nature of the food shopping routines could clearly be seen in the often impulsive decisions to buy certain foods or visit certain stores. For example, the extract below is taken from a go-along interview in West Bromwich. Whilst walking along the High Street with a participant, on our way to a different store, she decided, on impulse, to go into Heron Foods:

*CT: Do you ever go to any of the other food shops down here on the High Street?*

*Pamela: Yeah, we usually just see what they've got. Like*



*in Heron (as we walk past it) ... let's quickly pop in Heron*

***The participant walks across to the other side of the street and starts making her way towards Heron Foods.***

*Pamela: They've got yoghurts my mum usually likes*

***We walk into Heron***

(Pamela, aged 42. Extract from go-along interview)

We looked around for a few minutes and Pamela considered various products, although she only bought a set of three cooking sauces, on special offer for £1. Whilst in the queue for the check-out I asked her what she intended to buy that day (see below):

*CT: So what are we shopping for Today?*

***Pamela: Today? I'm just looking for stuff ... .. And it's Wednesday, Today we've got mince and pasta and I've got mushrooms in, tomatoes. So any other bits I can throw in with it the meat. But if we see anything different ... .. But also, I promised my brother I'd make him carrot cake for Christmas and I should have the stuff ... the things I need as well***

(Pamela, aged 42. Extract from go-along interview)

Pamela had not planned any purchases, but did have a few vague ideas of what she might buy, including the ingredients for a carrot cake 'for Christmas'. The go-along interview this extract was taken from was conducted in March.

Engagement with the consumption space environment, in low agency routines-of-practice, also included responding to sensory cues, like sights and smells. Some participants regarded this as part of the shopping experience and often reported that they had not eaten yet when I met them for the go-along interviews. For example, in the extract that follows Adam laughed when, after

spending some time agonising over his choice of frozen dessert, I asked if he was hungry:

*CT: Are you hungry?*

*Adam: Yes (laughs)*

*CT: Do you often shop when hungry?*

*Adam: No, normally I know what I'm gonna get but today I'm ... in temptation (laughs)*

*CT: Have you eaten today?*

*Adam: No (moves back towards the ice cream)*

**(Adam, aged 18. Extract from go-along interview)**

Adam had not eaten before we went to Asda that day, even though we did not meet to go shopping until lunch time. Likewise, Lauren, a 23-year-old child care worker had not eaten before her go-along either (see quote below):

*Lauren: I've had nothing to eat this morning*

*CT: It's 12 'o' clock ... is that typical?*

*Lauren: Yeah, I'm not hungry. I'm getting slightly peckish now but I'm not hungry.*

**(Lauren, aged 23. Extract from go-along interview)**

Yet, participants were not always overtly aware of the effects this might have. When asked if being hungry affected what she bought Lauren replied '*it doesn't really make any odds*'. However, within twenty minutes of making this comment we were making our way towards the bread and baked goods section of Asda. Her reaction can be seen in the following quote:

***Lauren: Oh, something just come out the bakery***

*CT: I can smell something with apples I think*

***Lauren: Cinnamon***

**(Lauren, aged 23. Extract from go-along interview)**

Lauren responded to the sensory stimuli, to the smell of freshly baked goods, and then followed that prompt and made her way to the bakery. She engaged with the environmental cues and allowed herself to be led around the consumption space. This appears to be a consistent approach to shopping for her, as she explained later on in the interview:

***Lauren: I don't like go down all the aisles ... I just like to go here, there and everywhere.***

**(Lauren, aged 23. Extract from go-along interview)**

Her food shopping practices were deliberately passive, as illustrated here:

*CT: What are you looking for?*

***Lauren: Just something that grabs me***

**(Lauren, aged 23. Extract from go-along interview)**

In this sense, food shopping can be regarded, in part, as a leisure activity and a source of pleasure. The activity of 'looking around' was an engaging and enjoyable one for some participants, even if they operated within a limited budget. As I observed them, they were all very much engrossed in the activity and took their time. They all spent a considerable amount of time examining products that they did not necessarily intend buying, but did so because they enjoyed the activity of shopping, of engaging with the wide range of choice and variety provided in the consumption space. This practice of shopping as a

recreational and leisure activity is well documented (Miller 1998, Leach 1984, Jackson and Holbrook 1995, Cox et al. 2005).

### **5.3.2 'Price promotion'**

A closely related, and somewhat overlapping, routine-of-practice that emerged from the data is that of 'price promotion'. It describes approaches in which participants actively sought out price promotions, such as special offers and reductions, and used them to guide both their purchasing decisions and their physical movements around the store. This approach entails a slightly higher level of agency than 'chaotic and reactive' because participants identified a key feature of the shopping environment, price promotions, and organized their movement around the store by systematically engaging with them. However, it remains a low-agency routine-of-practice because it is contextually driven and involves very little or no planning at all. As has been stated, participants sometimes deployed a mixture of approaches on any one shopping trip, and the mixture of 'chaotic and reactive' with 'price promotion' routines-of-practice was a relatively common combination.

The rationale behind the 'price promotion' approach, as the participants explained it, was that it reduced the overall cost of the food shopping. Purchasing predominantly discounted goods was a strategic way of reducing spending on food shopping. Longitudinal research on store choice has demonstrated that there is increasing price consciousness among shoppers. Further, that the quantity and complexity of price promotions and information is constantly growing (McGoldrick et al. 1999). Participants in this study were typically very explicit about their desire to save money and their preference for discounted products, as demonstrated in the quote below from a go-along interview in Asda:

***Whilst walking over to the special offer display***

***Collette: I come here in case I see anything we might need ... .. And I told you I normally find all the reduced stuff.***

(Collette, aged 44. Extract from go-along interview)

Collette is a West Bromwich resident and single parent who had five children living at home. The eldest son worked full time and, other than that, the participant reported that the family relied on social security benefits for their income. She regarded 'saving money' as an important concern when food shopping. The participant had a very positive reaction to price promotions and her behaviour and decision making became quite systematic. As we moved around the store she interacted with then. First, she would select a reduced item, then she would ascribe a need or purpose to it. The quote below is another from her go-along in Asda, in which she starts to explain the meals she could cook based on her 'special offer' purchases.

***The participant puts a reduced price leg of pork in the trolley***

***Collette: And that's a good price because on Saturday night I'll say 'What are we having for Sunday dinner?' And everyone likes pork ... And I told you I normally find all the reduced stuff erm ... ..***

***She starts looking at the reduced fruit and vegetables.***

***Collette: Right, tomorrow night's tea with a cheese sauce***

***Participant puts a pack of reduced cauliflower and broccoli into the trolley.***

***... ..***

***We walk back towards the meats, the way we came and Collette picks up a pack of reduced Scottish beef sausages.***

***Collette: That's not bad. Well, I'll freeze those and they***

*will be Saturday night (putting them in the trolley). Oh my God, look at that.*

(Collette, aged 44. Extract from go-along interview)

In another example (below) of a participant deploying this particular routine-of-practice, a single man in his 40s explained the benefits, as he saw them, of using price promotions to guide purchases during a go-along in Tesco.

*Clifton: I go along, see something that I like. And you know you sometimes get these Extra Specials, really taste nice, quality ones ... .. Sometimes they have a special deal on and I think 'well, it's only me, I like that' And I could go down this next aisle and something on fantastically ... something on fantastically good offer. Have it (laughs). You know it's like, it's not ... So why plan you know when you can have something fantastic?*

(Clifton, aged 43. Extract from go-along interview)

For Clifton, relying on price promotions to guide food shopping was a very positive experience. It provided opportunities to try new products and to sample high quality products at a reduced cost. The way he described his in-store decision making process is somewhat typical of those employing this strategy and very much like that of Collette (quoted above). Firstly, he comes across a reduced or special offer product that he wanted. Secondly, as shown in the quote below, he rationalises the purchase by ascribing a purpose or need to it:

*Clifton: Sometimes they have a special deal on and I think 'well, it's only me. I like that' ... and bung it in (laughs). So I can go out and I'll think 'I'll have this today.'*

(Clifton, aged 43. Extract from go-along interview)

Research on the recreational aspects of shopping is increasingly referencing the role that price promotions play in the shopping experience, perhaps unsurprising given the constantly expanding range and frequency of price promotions available to shoppers. Cox and colleagues' quantitative study of 1300 shoppers

found that ‘bargain hunting’ was one of the most common sources of pleasure derived from shopping as an activity (Cox et al. 2005)

This approach to food shopping can be a somewhat contradictory one. Participants expressed a strong desire and intention to reduce the cost of food shopping, but at the same time employed low-agency, unplanned and reactive routines-of-practice in-store. Participants reacted to special offers, reductions and price promotions, almost compulsively in some cases. Although, logically, price promotions rely on the premise of saving money, in the context of the consumption space this often became secondary to engaging with price promotions and the activity of ‘bargain hunting’ (Cox et al. 2005). The process of trying to save money on individual purchases appeared to be more important than the overall cost of the shopping. For example, the quote below is from Dave, a 45-year-old man who was unemployed and living in semi-permanent accommodation at West Bromwich YMCA. He explained that he buys special offers because they are cheaper, but goes on to say that cost is not a major factor in making purchasing decisions.

***Dave: ... If I see something on special offer I think ‘right, that’s cheaper than it normally is ... then I’ll grab a few of them.***

*CT: Is cost a big consideration then when you’re shopping?*

***Dave: Erm ... not really. It’s supposed to be but if I like the look of something then I’ll buy it anyway.***

**(Dave, aged 45. Extract photovoice interview)**

This seemingly contradictory statement highlights the lack of agency in ‘price promotion’ routines-of-practice and the heavy reliance they facilitate on the consumption space environment. This approach appears to be more about engaging with the environment and performing context specific practices than

about actual cost. Despite a continually increasing concern for cost, individual recall and accuracy about actual prices are low. McGoldrick and colleagues (1999) illustrate this point by citing Dickson and Sawyer's (1990) marketing study<sup>7</sup>, which reported that when asked directly after buying something 50% of respondents could not accurately recall the price of the thing they bought. The authors attribute this disparity to the complexity, frequency and range of promotions and products on offer, which results in a restricted cognitive capacity to process this information therefore falling consumer price awareness (McGoldrick et al. 1999). People simply cannot keep track of and process all the information available in the supermarket space.

Participants that employed this routine-of-practice often demonstrated emotive responses to, and interactions with, price promotions. For example, Lauren was mostly 'chaotic and reactive' in her shopping behaviours (see section 5.3.1), but was also very susceptible to price promotions when she came across them, as can be seen in her emphatic reaction in the quote below from a go-along in Asda:

***The participant points towards the end of the store and starts walking off. She stops abruptly by an end-of-aisle special offer display for Dairylea Dunkers (see plate 5.5 and starts examining the range silently and quite intensely.***

*CT: You seem quite excited about this ... what is it?*

***Lauren: I only have these at Assembly days ... Dunkers. You never had a Dunker? (laughs)***

*CT: No ... I've not lived*

***Lauren: They're cheese in the end there (holding a box) and like you can have bread sticks, nachos, rice crackers. I like these ... they're called Jumbo Tubes ... I don't***

---

<sup>7</sup> Dickson, P.R. and A.G. Savifyer, 1990, 'The Price Knowledge and Search of Supermarket Shoppers', *Journal of Marketing*, Vol. 54, No. 3, pp. 42—53.



*know how you'd describe them really ... but they've got like chives on them.*

*CT: They're £1 for 4 ... are they normally more?*

*Lauren: They're like 50 odd something pence each. Normally they sell them by themselves.*

**The participant puts 4 packs in her basket and walks off.**

*Lauren: I need drinks*

*CT: What's so good about Dunkers then?*

*Lauren: They're ... they're quite weird really. They're not particularly nice ... I have this weird obsession with them ... They taste nice but they taste weird, so when you have one you think 'mmm, mmm, they taste really funky' but then I think 'oh, I like these'. I'm weird, I did say before I'm very weird ...*

(Lauren, aged 23. Extract from go-along interview)

**Plate 5.5: Photograph of Dairylea Dunkers display (by CT).**



Lauren commented that she does not really like Dairylea Dunkers very much, but she bought four packs anyway because she was motivated by the reduction in price. The lure of saving money on the purchase appears to be more important than whether or not she actually likes the product. This distinction is reflected in

Miller's (1998) concepts of 'thrift' and 'frugality' in his theories of shopping behaviour. He explains that both terms imply restrained expenditure and consumption. However, although frugality equates to spending and consuming less 'thrift' has subtly different connotations. Thrift is the practice of doing more (consumption) with less (money), meaning that overall expenditure may not be reduced (Miller 1998). Miller goes on to argue, in line with Cox and colleagues' (2005) findings, that this practice is characterised by the thrill of seeking 'bargains' and gives the example of buying food on special offer in the supermarket (Miller 1998).

In addition to a concern with saving money, the individuals who employed a 'price promotion' approach to shopping also responded to the temporality of price promotions, being very much aware that they were only available for a limited time. The participant quoted below, Janet, a retired woman aged 63, gave a very emphatic response when asked about special offers. The temporal nature of price promotions was a big part of the appeal. Special offers are for a limited time only.

*CT: Do you often get special offers then?*

*Janet: God yeah, most definitely yeah ... mostly anyway.  
They don't have many but you know ... but when they do ...*

**(Janet, aged 63. Extract from go-along interview)**

Similarly, Collette also adopted 'price promotion' routines-of-practice and, to a much lesser extent, a 'chaotic and reactive' approach. She had a very strong reaction to special offers. In the extract below she encounters a price promotion for Super Noodles (see plate 5.6) whilst shopping in West Bromwich Asda. Once she noticed that the noodles were on promotion for even less than they were the week before she decided to make the most of the special offer:

*... Oh my God, that's so good*

***The participant turns and sees a special offer for super noodles on the opposite shelf. She seems genuinely excited.***

*Collette: That's even cheaper than it was last week.*

*CT: Who are the super noodles for?*

*Collette: Z—and M---- (her children). Right, I'm going to get ...actually I might get 12 .... Er ... 2 chicken, oh my gosh 2 bacon.*

***The participant starts putting packs of super noodles into the trolley***

*Collette: I don't know why these are on offer. At the local shop these are 69 pence each, from the local shop.*

*CT: Mr Convenience?*

*Collette: Mr Convenience. So ... 6 for £2. See, you can't really ignore something like that. I'll get 2 more chicken.*

(Collette, aged 44. Extract from go-along interview)

**Plate 5.6: Photograph of Super Noodles display (by CT).**



Participants that were guided around the store in this way, by engaging with price promotions, tended to use and move around the consumption space in a fairly uniform way. Upon entering the supermarket, they made their way

straight to the special offer displays, which are typically located at the front of the store (Great Bridge Asda, Cape Hill Asda and West Bromwich Tesco) then they would go on to work their way around the store stopping at every, or almost every, special offer and promotion display that they passed, pausing to interact and make a decision as to whether or not to purchase. For example, the extract below is from a go-along interview in West Bromwich Tesco with Clifton:

***Participant stops walking and talking and starts looking at boxes of chocolates on special offer.***

*CT: Chocolate?*

***Clifton: I buy it for the tenants. I buy it for the tenants.***

*CT: Do you? That's nice. Why do you do that?*

***Clifton: Just a ... just a welcome present. I won't ... I don't think I'll buy these (puts chocolates back).***

*CT: Are you always moved by the special offers? Do you look at those?*

***Clifton: Well ... .. yeah. I do (laughs). I do but, er ... .. let me see ... this one sounds good ... sounds good (participant picks up a loaf of multiseed bread). I always seem to go for brown bread as well.***

*CT: Why's that?*

***Clifton: I don't know. I think when I've eaten white bread ... unless it's good quality white bread it feels as though it's really nasty (laughs). Er ...***

***The participant walks on to look at some special offer frozen food (wedges, chips and pizza).***

(Clifton, aged 43. Extract from go-along interview)

As can be seen, the participant moved from one price promotion to another and this, effectively, guided his movements around the store. Even though he did not decide to buy each price promotion product he encountered, interacting with these prompts was a way of pacing his movement around the consumption space,

a way of making sense of the vast array of choice on offer and ordering his interactions. People who employed these routines-of-practice seemed to really enjoy shopping because relying on price promotion rather than pre planning brought elements of novelty and choice to their shopping experience which, as stated in 5.2 are part of the context specific culture of the supermarket.

### 5.3.3 'Working around the store'

'Working around the store' is also a contextually driven routine-of-practice and one that relied quite heavily on familiarity and repetitive food purchases. Participants were prompted, rather than led, by products and features, denoting a somewhat higher level of agency than the one described in the previous section. It was also one of the most common approaches I observed, with nine participants relying substantially on it in their go-along interviews. Participants typically deployed these routines when they were shopping in stores that they used regularly and were highly familiar with. Participants relied on the well-known layout of the store. They worked their way around it methodically, aisle by aisle, looking around them for familiar, regularly consumed products, which they used as a prompt to select and purchase. The extract that follows is from a go-along interview in Great Bridge Asda with Pat, who lived alone:

***Participant looks back towards the shelves and walks on, mumbling as she looks at the canned foods.***

***Pat: Beans I've got. Beans and sausages, that's what we had the other day (referring to photovoice interview). Remember? Erm ... they must be down here. I don't have red sauce ... I only use that about once a month. But I'll tell you what I do have a lot of ... beetroot. I love beetroot.***

(Pat, aged 69. Extract from go-along interview)

As Pat saw baked beans on the shelf it served as a prompt. She questioned whether or not she had baked beans at home, commented that she did and then continued to progress down the aisle, pausing next at the jars of pickled beetroot. She did most of her food shopping at Great Bridge Asda and she was very familiar with the store layout, which she used as a prompt to inform and guide purchasing decisions.

This type of engagement and interaction with the shopping environment was almost tacit, and the participants I interviewed found it quite easy to chat and talk about other subjects as they worked their way around the store selecting purchases, as can be seen in this extract:

*CT: Why do you think it's important to get organic food?*

*Catherine: Because of the environment to be honest and like the animals involved as well ... oh, milk I always get milk as well ... and cheese as well, sometimes we do, sometimes we don't ... do we need cat food? (as we pass it) ... we don't, do we? ... I'll tell you what ... shall we get cartons? (to daughter)*

***We stop by the children's juice drinks.***

*Catherine: K--- (daughter), the cartons ... there's cartons there ... do you want to get them?*

(Catherine, aged 37. Extract from go-along interview)

Catherine, a part time teacher, was shopping in Cape Hill Asda with her three-year-old daughter. We were having a conversation about organic food. As the participant was explaining to me why she tries to buy organic produce wherever possible, she continued to engage with the consumption space, continued to look around for familiar products in familiar locations to prompt purchasing decisions. Catherine did this without interrupting her purchases or her progress around the store. This is in contrast to the much more absorbing, 'chaotic and reactive' routine-of-practice described in section 5.3.1, in which interactions

with participants were often limited by how engrossed they became in making purchasing decisions.

Although this approach involved less reliance upon the shopping environment than those described in sections 5.3.1 and 5.3.2, it remains a contextually driven routine-of-practice. Participants become accustomed to making purchasing decisions in a particular physical context, in a particular store, and came to rely upon that environment to identify and determine purchases. This is demonstrated in the extract that follows, taken from a go-along interview in Bearwood Iceland with an 18-year-old man who lived with his parents:

*CT: What are we looking for now?*

*James: Nah, I'm seeing if there's anything else. This is all the dessert stuff (pointing at the frozen dessert and ice cream chests).*

*CT: You don't buy a lot of desserts?*

*James: I'm not really a sweet tooth person.*

*CT: So what might you be looking for if there's something else?*

**PARTICIPANT STOPS ABRUPTLY BY FROZEN VEGETABLE CHESTS**

*CT: Oh, veg*

*James: Sweet corn (picks up large bag of frozen sweet corn)*

*CT: Oh, for your tuna pasta and sweet corn?*

*James: Yeah.*

(James, aged 18. Extract from go-along interview)

James reported that he regularly went to this branch of Iceland, close to where he lived, to get shopping for his mother and to buy items for himself that he referred

to in his photovoice interview as his 'snack food'. This consisted of processed frozen chicken products, tinned tuna and sweet corn. The 'snack food' was typically consumed at weekends when he cooked for himself and his girlfriend. Despite the repetitive and routine nature of these purchases, as he described them, and the frequency with which he used the store, he still looked around the space for prompting, '*seeing if there's anything else*'.

On another occasion, I accompanied a married couple and their teenage son on a shopping trip to West Bromwich Tesco. The couple had three children living at home, the youngest of whom came shopping with us. On entering the store the family group members assumed quite specific roles. The wife (Jayanti) walked in front, working her way up and down the aisles, methodically looking around at various products and placing them in the trolley. Her husband followed her, pushing the trolley. As Jayanti examined various products she would ask her husband if they had any at home or which particular product would be preferable. She consulted him. Meanwhile, the son wandered off alone. He kept returning to this mother with potential purchases, all of which were high energy snack foods, and asking for her approval. Their interactions can be seen in the quote below:

*Jayanti: .... .... (to son who is returning with some spicy Pringles) N---, I've got some, these ones. Go and get a bottle of squash to take back.*

*Son: I want these (crisps)*

*Jayanti: They're horrible they are (pointing to son's choice of crisps)*

*Son: No, they're hot*

... ..

*Son comes back with a large tub of ice cream*

*Jayanti: (to son) Why don't you get some Hagen Das instead?*



*Husband: Go on ...*

*Jayanti: Hagen Das*

*Son: (to mum) have you seen these new ones (holding a box of Magnum Minis)*

*Jayanti: Yeah, I hope I'm going to get one*

*CT: What's that, the ice cream?*

*Jayanti: Yeah. As soon as we get home, this one (indicating son), just scoffs it.*

(Jayanti, aged 45. Extract from go-along interview)

The family were engaging with the consumption space environment and performing context-specific behaviours. They regularly used this store and, upon entering it, they relied on the familiar layout and reacted to the products displayed. Jayanti exercised the most agency, as she physically led the family around the store and had the final say on all purchases. Although quite complex and involving three household members, the approach remains the same, decision about what to purchase are made in a specific context and shaped by that context.

#### **5.3.4 'Item by item'**

The item by item approach is a relatively high agency routine-of-practice for which participants relied on planning and predictable food practices. Individuals entered the supermarket with either a written list or a very clear idea of which items they intended to purchase. This approach required a higher level of agency than the previous one (see section 5.3.3) because participants actively planned for shopping and were less reactive to the shopping environment. Engagement with price promotions and impulse-buys still occurred, but the participants maintained a purposeful trajectory around the store. A trajectory which was based upon pre planned purchases. This routine-of-practice is comparable to

what Cobb and Hoyer refer to as 'partial planners'. These are individuals who plan their purchases to an extent but engage in impulse buying with certain types of brands or products (Cobb and Hoyer 1986). Limited engagement with features of the shopping environment was anticipated by participants of this study in that they expected to go home with some purchases that they had not planned, as demonstrated in the extract below:

***We walk into Asda. The participant stops at the Photo Shop to put some used batteries in their recycle bin.***

***Poppy: Where's my shopping list? (she searches her pockets).***

***CT: Do you always bring a list?***

***Poppy: Gosh yes, I have to (laughs). Yes I have to or I wouldn't remember, especially when I have to deal with her (laughs).***

***CT: Do you stick to the list?***

***Poppy: Yeah ... generally, unless I see anything on offer. Yeah ... I look for the bargains and stuff, save money.***

**(Poppy, aged 43. Extract from go-along interview)**

The extract is taken from a go-along interview in Great Bridge Asda with Poppy, a 43-year-old mother of one. The extract highlights that participants adopting this approach tended to carefully plan for food shopping trips to the supermarket, more especially for Poppy as she limited supermarket shops to once a month for bulk-buying. After shopping at Asda we went to Lidl in Acock's Green, specifically to bulk-buy fruit juice and soft drinks. Poppy prepared a separate list for each store. In each store she moved purposefully around the space searching for each item on her list. She did stop at price promotion displays as we passed them and considered purchases that were not on the list, but this remained secondary to completing her pre planned purchases. Her behaviour in Lidl is illustrated in the extract below:

***We park in Lidl car park, collect a trolley and go in.***

*CT: Do you have a list for in here as well?*

***Poppy: Kind of ... just in case I forget***

*CT: You have a separate Lidl list?*

***Poppy: Yeah, just in case I came here***

***The participant puts a box of tea bags in the trolley then she goes straight to the fruit juices.***

*CT: What other stuff might you buy in here apart from juice?*

***Poppy: Nothing ... nothing really. I might have a look. Yeah ... maybe buy nuts and things ... but just the fruit juice today I think ... just cos I don't really come here often I don't know ... I don't really look at anything else really ... unless I notice anything.***

**(Poppy, aged 43. Extract from go-along interview)**

Poppy limited herself to 'nuts and things' if she was going to consider additional purchases in this space. She did not look around the whole store. In fact, we were only in Lidl for just over 10 minutes. The participant searched for the items on her list and then made her way directly to the check out. Interactions with this consumption space were limited and structured.

Individuals performing this routine-of-practice were also selective in which features of the shopping environment they chose to interact with. They actively navigated the space searching for their pre-planned purchases, rather than being led around the space and reacting to the environment. The sense of purpose this approach entailed was evident in both participants' performed shopping practices and in their descriptions of them. A married 57-year-old West Bromwich resident, Brian, explained his approach to shopping to me during a go-along in Oldbury SavaCentre:

*CT: Do you normally take a list with you when you go shopping?*

*Brian: No, I don't. I just ... er ... for instance if we need something for er ... if I know what we need I'll go in, I'll be we need this, this, this, this and I just get them and go. I don't, you know ... and occasionally, depending what time I've got, I will buy er ... have a bit of a snoop round, have a look for something for a bit of a pudding. But, er ... sausages is the main thing now ... .... I'll check down here for a bit of spelt bread.*

***We walk straight up to the fresh meat counter and Brian starts looking at the sausages.***

**(Brian, aged 57. Extract from go-along interview)**

In the car, on the way to the supermarket, Brian told me that the purpose of the shopping trip was to buy sausages for dinner that evening. He also talked, at length, about his wife's wheat intolerance and the wheat-free '*spelt bread*' they bought. On entering the store he went straight to the meat counter for the sausages and went on to the check if there was any svelte bread in store (there was not). He then walked back towards the check out through the fresh produce section, picking up bananas and apples on the way. We were in the store less than 15 minutes and he spent £4.30. Although he made some unplanned purchases he had a clear purpose to the shopping trip and navigated the space to search out his desired products item by item.

### **5.3.5 'Restricted and budgeted'**

This approach often overlapped with the previous one, in that it is a high-agency routine-of-practice in which participants constrained the range of foodstuffs they allowed themselves to choose from, planned their purchases and actively navigated the supermarket space. Participants demonstrated a very controlled, considered and critical use of the space. They limited their choices heavily either in terms of money, health considerations or both. The inclusion of health or economic related values in the routines they employed is what differentiated

this approach from that of the ‘item by item’ approach (section 5.3.4). These participants were highly motivated not to waste money and/or not to purchase unhealthy foods. As with the ‘chaotic and reactive’ routines-of-practice, this resulted in lengthy go-along interviews. Yet, they were very different in nature. The participants worked their way around the store in a methodical way and spent a great deal of time examining the labels of products to check the ingredients, price or value. The following extracts are taken from a photovoice interview in which Lawrence described a deliberate and considered approach to deciding what to purchase:

*Lawrence: when I pick stuff up now ... say I'm in Tesco's I always look at the product label, just to have a glance and just see one: globally, how many calories are in it, if it's going to mess the diet and secondly, if it's just a stupid amount of fat or something in it. So I'm probably making better choices through those things, more than anything else you know.*

.....

*Lawrence: I used to eat a lot of pre-packaged readymade meals, almost all the time and now I haven't ... I probably haven't eaten ... about 2 in the last month and a half. Erm ... and I'd say my shopping always used to be going into whichever supermarket and looking at the reduced price counter or whatever was on discount that day and say if you're in a hurry ... grab your packaged meal and just eating it. Now if I but the stuff I do look at what's in it and if it's loaded with fat and things, unless it's a really nice meal something worth buying. I have bought them but I've tended to buy better stuff, you know the Finest range whatever ... because they're just better products, even if they're like calories they're nice foods so ... and er ... the things I have when my partner is here at the weekend and then I'll do that but I'd buy better products. Whereas before I'd grab anything, if it was cheap and he'd eat it you know. So I'm consciously careful in that sense, yeah.*

(Lawrence, aged 43. Extracts from photovoice interview)

The participant lived in Bearwood and made what he described as a ‘comfortable income’ working as a civil servant. More than four months prior to being interviewed the participant completed a three-month meal-replacement diet and lost three stone in weight, a loss he had successfully maintained. Since finishing the diet he explained that he had been working hard to establish healthier eating habits and was, perhaps as a consequence, very reflective and critical of his food practices. In the quote above he explained that he is now much more careful about what he buys and no longer relies on price promotions to decide what to purchase. He is very careful to avoid ‘*fat and things*’ and ‘*rubbish*’. Some weeks later, during a go-along interview in Cape Hill Asda, Lawrence spent several minutes comparing the fat content, range of flavours and ingredients before deciding to purchase the pictured pack of yoghurts (see plate 5.7). As can be seen in the extract below, he took time over the purchase and selected the product he believed to be the healthiest:

***The participant picks up a pack of Activia yoghurts***

***Lawrence: They’re fat free, they’re good. They taste as good as erm ... the other ones. They last quite well. I’ll probably get ... yeah ... that’s not fat free (looking at another pack of Activia yoghurts). That one is ... and then the flavours, you don’t get the same flavours. I’ll stick with the fat free.***

(Lawrence, aged 43. Extract from go-along interview)

**Plate 5.7: Photograph of Activia yoghurt (by CT).**



Participants that deployed restricted and budgeted shopping routines were very clear about what they wanted before entering the supermarket and, equally, they were extremely clear about what they did *not* want. Thereby constraining the range of contextual choice and giving the shopping trips a sense of purpose. An example of this can be seen in this quotation from a go-along interview with Lisa, a child minder, market researcher and mother of three:

*CT: And this (local butchers) is where you get all your meat from?*

*Lisa: Yes*

*CT: Don't you get any from the supermarket?*

*Lisa: Oh we have done. We'll be rushing around and we'll think 'oh grab that', but we normally only get it ..... (indecipherable). I don't trust supermarket meat*

*CT: Why's that?*

*Lisa: Did you see the advert where they pump it full of water and stuff. Gross. Eurgh, it's just nasty.*

*CT: So you prefer to go to your local butchers .....*

*Lisa: The only meat I buy from the supermarket would be ... erm ... sausages, because I like certain ... I ... I don't like any sausage. I like the Irish Richmond ones. They're the only ones I'll eat. Cos I ... You know you have them gritty bits inside.*

(Lisa, aged 38. Extract from go-along interview)

The interview took place on a trip to her local butchers, in Bearwood. During the drive there Lisa told me why she bought the family's meat from the butchers and not Asda or Sainsbury's, where she regularly did her 'big shop.' She explained that she does not trust supermarket meat because of concerns over the quality of the meat. These self-imposed restrictions further limit her potential purchases once she is in the supermarket. The likelihood of Lisa impulse-buying

or responding to a price promotion on meat was greatly reduced, as supermarket meat is, in her view, not to be trusted.

A critical and purposeful use of consumption spaces was also observed in participants who described themselves as existing on a very limited budget. I interviewed a couple, Simon and Hollie, who had recently moved to Smethwick and whose sole source of income was from social security benefits. Despite operating within a limited budget they expressed a strong desire to eat healthily, motivated largely by the fact that Hollie was 6-months-pregnant, as Simon explains below:

*Simon: Before I met Hollie I'd just lost my job and it's about 2 months well ... I was doing agency work and it ended. I was probably quite skint then and I was in the habit of like ... I'd get a few loaves of bread, a load of cheap sausages and I'd just have sausage sandwiches everyday ... .... But now that it's not just me, even before she was pregnant, I was always really strict with her when we went shopping not to like waste money on crap. I always completely make sure we're OK. The second she moved in with me I felt responsible and I had to make sure we ... we could manage ... ... We don't really tend to snack because er she needs to eat more meals now she's pregnant*

(Simon, aged 27. Extract from photovoice interview)

In order to maximise their limited budget and eat the healthiest and most enjoyable diet they could, they employed a number of pre-planned strategies when food shopping. The most notable of which was their use of a calculator when food shopping. Once they had agreed a set budget for the shop Simon would enter the total amount onto his mobile phone (see plate 5.8), using the calculator function. Each time he selected an item he would subtract the cost from the total, ensuring that they did not go over-budget. I observed this strategy on a go-along interview with them both in Cape Hill Asda (below).



**Simon gets his phone out in preparation**

*CT: Is this the calculator thing? How much have you got to spend?*

*Simon: Er ... about 15 quid.*

**We start walking slowly around the fruit and vegetables section. Hollie selects a pack of onions (see plate 5.9).**

*Simon: We've got to get mushrooms as well ... so probably a bolognese.*

*CT: Who cooks that?*

*Simon: I do most of the cooking ... What did we have last week?*

*Hollie: Er ...*

*Simon: Chicken strips and fajitas ... that was it.*

*CT: What are you looking for?*

*Simon: Just some salad and tomatoes... there they are*

**Simon selects a bag of salad and subtracts the amount from the total on his phone.**

(Hollie and Simon, aged 21 and 27. Extract from go-along interview)

**Plates 5.8 and 5.9: Photographs of Simon with his mobile phone and Hollie with a pack of onions (by CT).**



Employing such a detailed and careful approach meant that every purchase had to be considered, as can be seen below (later during the same interview) when Simon checked with Asda staff to make sure that his selected purchase was affordable.

***The participants both start sorting through the wraps and tortillas. Simon goes to ask a member of staff exactly how much they are, as it is not clearly marked on the shelf. He puts a pack of tortillas in the trolley***

... ..

*CT: How much have you got left out of your budget?*

*Simon: £3.29*

(Simon, aged 27. Extract from go-along interview)

Saving money on food shopping was a significant way for the couple to increase their disposable income. They explained that rent (with which they were in arrears) and food were their two biggest expenses. On weeks that they thought they had performed a particularly cost-effective shop they kept the receipt and tried to replicate it on subsequent shopping trips, as Simon explains here:

***Simon: Like if we've done really well and got lots we'll put it (receipt) to one side just to try and get it again or use it as a shopping list, but not always.***

(Simon, aged 27. Extract from go-along interview)

Reducing potential purchases by implementing health-related and/or economic restrictions is a high agency approach to food shopping. Interactions with the consumption space become selective and structured because participants had to adhere to self-imposed values and constraints when they are performing shopping practices. The approach adopted by Simon and Hollie, above, is what Miller (1998) would describe as 'frugal'. These participants strategically insured

that they spent as little as possible and had a set budget for their purchases. This contrasts substantially with the ‘price promotion’ routine-of-practice (see section 5.3.2) which more consistently conforms to what Miller describes as ‘thrift’, whereas a ‘restricted and budgeted’ approach focused on outcome in terms of cost. A ‘price promotion’ approach focused instead on process and engagement with the shopping environment.

## **5.4 Summary**

Supermarkets are an incredibly important part of the urban landscape. They play a central role in contemporary cultural life and food shopping within them can be a communal activity, one with its own discourses and practices (Bell and Valentine 1997). As sites and spaces they are bound up with broader theories of consumption culture, mass marketing, spectacle and the politics of shopping.

Participants in this study described supermarkets as central to their food shopping practices and consistently described the shopping environment as characterised by an extended range of choice and an array of price promotions. In-store shopping behaviours were dependent upon the degree of agency, planning and engagement with the shopping environment that individuals deployed. The concept of routines-of-practice was introduced in this chapter to describe and characterise the habitual behavioural routines that individuals adopted and performed in the specific context of the supermarket. Shopping motives and practices are contextualised within narratives, lifestyle, relationships, identity and location (Woodruffe-Burton et al. 2006). Shopping practices are not a series of rational decision-making, nor are they constituted by individuals uniformly responding to the consumption environment. Food shopping routines-of-practice are, therefore, inseparable from the spaces in which they are performed and the social actors that perform them.

The five approaches to routine food shopping behaviour identified were 'chaotic and reactive'; 'price promotion'; 'working around the store'; 'item by item' and 'restricted and budgeted'. Within the supermarket environment, the cues and prompts to consume are so numerous and pervasive that individuals can simply allow themselves to be passively led around by them. Those who deployed high-agency routines-of-practice were able to navigate these spaces without constantly interacting with these features, they planned purchases and effectively constrained the scope of choice they allowed themselves.

Routinized behaviour is a way of avoiding a long series of mundane decision-making in a specific context (Ilmonen 2001). Just as individuals deploy routinized food-related behaviours in the supermarket, they also perform them in the home. The next chapter will examine how participants approached individual and family food choices at home in terms of planning, agency and individuality.

## **Chapter 6:**

# **Routines-of-practice in the home and food related identities**

## **6.1 Overview**

Routine food-related behaviours have been characterised, in the previous chapter, in relation to shopping for food in supermarkets, and specifically in the context of the food environment as a consumption environment. In this chapter, the novel concept of routines-of-practice will be further examined in the context of the home and the family. Research on family eating habits has traditionally focused on socio-economic theories of the family as a site of fixed identities and practices. These studies tend to underestimate the extent to which variations in contemporary families, including different family types and differences in social class and ethnicity, may result in significant variations in the way that individuals structure family meals and organize relationships around them (Hunt et al. 2011).

More recent work has started to look at how people cognitively and actively construct practices such as family meals. People have personal food systems and develop intricate strategies and approaches based on negotiation, values and identity (Blake et al. 2008, Blake et al. 2009). As Blake observes, individuals construct categories of identities that they adopt with regard to food and when performing routine food behaviours at home (Blake et al. 2008). Some participants for this study ascribed themselves very specific identities in relation to food consumption, most notably that of ‘fussy eater’ and ‘healthy eater’.

Research on families, households and food is also susceptible to political trends and a distinct moral discourse is often evident in work on lower socio-economic status households (O'Doherty Jensen and Holm 1999). The family unit is frequently cited simplistically and unproblematically as the most appropriate and positive environment in which to instil healthy food behaviours (Elfhag and Rasmussen 2008, Franko et al. 2008, Yannakoulia et al. 2008). Yet, qualitative research demonstrates that family life can entail an on-going series of negotiation and renegotiation of cooking and eating practices between immediate family, extended family, household residents and non-residents (Wills et al. 2008b). Some of the participants of this study described very complex and often conflicting considerations that informed their home food practices.

This chapter will address how individuals negotiated, organized and participated in household food practices. The extent to which these practices can be described as individualistic or collective in their overall approach to cooking and eating will be explored. Further, the ways in which participants positioned and identified themselves in relation to food consumption will be examined with reference to the identities, norms and practices that emerged from their accounts. Data are taken from both photovoice and go-along interviews. Individuals discussed their habitual food routines at length during the photovoice interviews, but also made frequent references to this during the go-along interviews. As discussed in section 3.6.2.2 and 5.1, participants frequently talked about a different context or activity from the one they were engaged in at the time. Whilst shopping in the supermarket participants would regularly describe home food practices. Using data from both sets of interviews served both to give a more rounded account of individual practices and to highlight contradictions and conflicts across those different contexts. This chapter will specifically address the following research questions:

- How do individuals decide which foods to eat and cook and how does the home environment shape these decisions?

- How do routines-of-practice for cooking and eating compare between households and how might these be characterised?
- How do individuals label themselves in relation to their cooking and eating habits?
- How do these labels impact upon food related values and practices across contexts?

## 6.2 Home and privacy

When participants spoke of ‘home’, in relation to cooking and eating practices, they explicitly identified the privacy these spaces afforded them. Supermarkets were characterized by choice and special offers, by consumption norms and expectations about the shopping experience (see section 5.2). Eating-out, in the local food environment, was constructed as a primarily social activity for many participants, often with eating as a secondary consideration (see section 4.4.1). Home, by contrast, was a place in which they could eat in a relaxed way without worrying about being observed by, or interacting with, others. Unlike the eat-in spaces described in section 4.4.1.1, home spaces provided the opportunity for people to concentrate on their food, enjoy it without interruptions, and take their time. As Dave describes below:

*CT: Do you get tempted to eat out while you’re in Birmingham?*

*Dave: Very rare.*

*CT: Why is that?*

***Dave: Half the time I just don't bother to sit down somewhere and eat. I want be able to sit down and relax and eat at my own leisure without having people sort of staring at you all the time cos I feel you do that when you're out.***

**(Dave, aged 45. Extract from photovoice interview)**

Dave lived alone and, for him, eating at home afforded privacy and meant that he could eat at his 'leisure'. Eating is a very social activity and social context can dictate how individuals behave and perform when eating with others. Eating alone lessens the performativity of the act and means that norms for 'appropriate' eating in social situations need not be adhered to (Roth et al. 2001). In fact, many of the participants reported enjoying eating alone at home. Sue, for example, waited until her children had gone to school and she was alone in the house before eating breakfast so that she could eat without disruptions or interruptions, as she explains below:

***Sue: My cup of tea that I'm having with my toast indicating plates 6.1 and 6.2 That's my breakfast. That's about half past 9, when they've gone off to school and everything.***

***CT: So why do you have your breakfast after the kids have gone?***

***Sue: Cos I can sit and enjoy it then. Cos it's stressful first thing in the morning you know. Once they're off to school and that I can sit down and enjoy my breakfast and a cup of tea.***

**(Sue, aged 49. Extract from photovoice interview)**



**Plates 6.1 and 6.2: Photographs by Sue from her food photo-diary**



Similarly, Jayanti waited until the house was empty before sitting down to enjoy a cup of tea and a slice of cake, as she explains in the following extract.

***Jayanti: Then I got home. Before the kids got back I had a cup of tea and a cake indicating plate 6.3***

*CT: Very nice ...*

***Jayanti: Naughty. And, erm ... then more tea  
.... ....***

*CT: OK. So this is when you got home from work. What time is that?*

***Jayanti: Er ... about half 2, before I pick the kids up.***

*CT: So you're at home on your own now?*

***Jayanti: Yeah. Just before I pick the kids up. I have a cup of tea.  
.... ....***

*CT: Have you got quite a sweet tooth?*

***Jayanti: I have, yeah. Not so much chocolate but cakes. I'm terrible. I've just had one (laughs).***

(Jayanti, aged 45. Extract from photovoice interview)

**Plate 6.3: Photograph by Jayanti from her food photo-diary**



The quotes above illustrate the ways in which participants used spaces of home to avoid both the constraints of eating in social settings and the presence of other family members who could distract or interrupt them. Home is a private site demarcated in terms of control over who may be encountered, the expected range of activities and the appropriate modes of behaviour within it (Allan and Crow 1989). Mothers especially, like Jayanti and Sue, described waiting until their children were out to eat their own food. Deliberately seeking to be alone, in order to enjoy eating, was also enacted by participants when other family members were at home. Lauren, who described ‘erratic’ household routines-of-practice (as will be explained in section 6.3.1), explained that as well as eating meals at different times from the rest of the family she would also sometimes take food into her bedroom to be alone and eat:

*CT: Is that the pasta bake? Indicating plate 6.4*

*Lauren: Yeah ... with some cheese on the top.*

*CT: What time did you eat that?*

*Lauren: Probably about half 10*

*CT: Did you eat that on your own?*

*Lauren: Yeah ... I took it into my bedroom as well*

**(Lauren, aged 23. Extract from photovoice interview)**

**Plate 6.4: Photograph by Lauren from her food photo-diary**



However, for some participants the desire to eat alone was a far more pragmatic one. Adam, who was unemployed and lived in temporary accommodation, preferred to eat alone in his room so that he did not have to share food, as he explains below:

*CT: That's OK. Looking at the photographs .... the people you have eaten with are D----- (friend) and your mum and your sister. But ... mostly you seem to eat on your own ... is that fair?*

*Adam: Yeah. Yeah ... cos if there's people in my room ... and I'm not saying this in a bad way ... if there's people in my room. But ... like, if they've got nothing then I don't like eating in front of them ... cos I know they'll want, I know I'll have to offer them some, and then I'll have nothing left. If I've got enough then I will offer it around ... but if I've only got a little bit left then I feel bad eating in front of them, so I'll wait.*

**(Adam, aged 18. Extract from photovoice interview)**

As discussed in section 5.3.1, Adam managed on a very limited income. When we went food shopping together in Asda he had only £10 to spend and was not sure when he would next be able to go food shopping. Added to which, the nature of Adam's temporary accommodation meant that he was housed with other young people in a similar situation, very few of which, he explained, were

working or had much of a disposable income. Although he had formed friendships with other residents, some of whom he later introduced me to, their shared experience of limited incomes and food insecurity often made social eating very impractical. For Adam, eating alone in his room meant that his food would last longer, and he could avoid the potential expense and feelings of guilt that he associated with eating in front of his peers. Prolonged episodes of food insecurity have psychological and social effects on individuals, in that they can often experience feelings of anxiety over their food supply and engage in disrupted or unsocial eating patterns and behaviours (Connell et al. 2005). By eating in private Adam could conserve food. In the extract below he describes what he ate on the Friday and Saturday of the photo-diary period. All the food he ate was eaten alone and in his room:

*Adam: Yeah. And then later on ... last meal of the day (Friday) ... toast ... indicating plate 6.5 Cos when I do eat all I have is toast. So then ... probably around 7ish or something.*

*CT: Indoors? ...just you there?*

*Adam: Yeah. I had 2 chocolate bars again and a glass of squash indicating plates 6.6 and 6.7*

*CT: It looks like you didn't go out all day. Looking at the photographs I mean ...*

*Adam: No, probably not.*

... ..

*Adam: No ... this wasn't the most interesting weekend. Then this is it for the day then, another 2 chocolate bars ... probably about 6 ... with the squash*

*CT: All indoors?*

*Adam: Yes*

(Adam, aged 18. Extract from photovoice interview)

**Plates 6.5, 6.6 and 6.7: Photographs by Adam from his food photo-diary**



Jaspreet, like Adam, also gave pragmatic reasons for preferring to eat at home. In the extract that follows he explains that eating at home is cheaper:

*CT: Is that (dinner)at home as well?*

*Jaspreet: Yeah at home, always at home*

*Jaspreet via Translator: Everything at home*

*CT: Do you eat all your meals at home?*

*Jaspreet: Yeah, not too much shop. We don't go*

*Translator: We ... Indian people, very, very rare go out.*

*CT: Why's that?*

***Translator: Cos what you make yourself is nothing like what you buy from a shop, that's first.***

***Jaspreet: Indian people not shop***

... ..

***CT: So all of these meals (indicating all of the photographs) are at your home?***

***Jaspreet: Yes, always.***

... ..

***Jaspreet via Translator: Another thing ... when you go out, you pay through roof and make your own it's cheaper, yeah. It's good cos you know what's put in. Many factors. Most time you go Indian restaurant you won't see Indian people.***

**(Jaspreet, aged 60. Extract from photovoice interview)**

For Jaspreet, meals prepared and eaten at home were both more economical and more trustworthy. Overall, home, in relation to food and eating, afforded privacy and the opportunity to eat away from the gaze of others. Home spaces are arranged to facilitate privacy, as visitors and, even residents, can be selectively screened or challenged before they are permitted access to various locations within the home (Allan and Crow 1989). For some, this provided the simple benefit of being able to enjoy their food without interruptions or distractions. For others, this privacy was a refuge from unwanted expense or having to share food.

## **6.3 Understanding behaviour in the home: routines-of-practice for cooking and eating**

This section addresses the ways in which participants organized, experienced and described their food practices at home. Home and family food practices were talked about at length in the photovoice interviews and the vast majority of photographs that participants took were of food eaten in their homes.

Additionally, participants also talked about home when we were shopping for food during the go-along interviews. As discussed in sections 2.3.3 and 5.3, the situatedness of human activity and movement is highly relevant to understanding how individuals behave and perform in particular contexts (Jackson and Thrift 1995, Takashashi et al. 2001). People have personal food systems and develop intricate mental processes that involve value negotiation and the formation of habitual behaviours and routine practices (Blake et al. 2008).

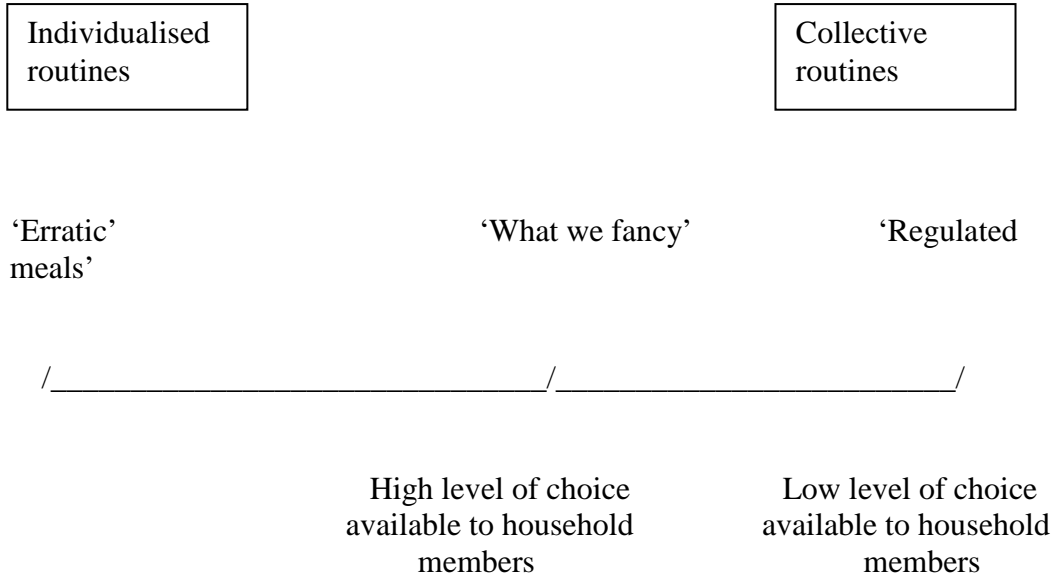
The term routines-of-practice will be used again in this chapter as a framework to help characterise how individuals described their approach to and, where appropriate, their participation in home food routines. Shopping routines were explained with reference to agency, planning and engagement with the in-store environment. Routines in the home can be typified by the extent to which they can be described as either collective or individualised and complex. As with shopping routines the role of agency figured heavily in the accounts participants gave. However, whereas for shopping routines-of-practice agency served as a resource for planning and resisting in-store prompts to consume, in the home agency dictated the extent to which people used food practices to express individuality and exercise choice. Differentiated practices and personal tastes were dismissed, within some families, as inconvenient and subordinate to the overall aim of arranging healthy shared family meals. For other participants, recognising and meeting individual needs was paramount to achieving harmonious and satisfying family food practices.

Participants were often very descriptive about the home food routines that they engaged in, unlike those they talked about and performed in the supermarket. These patterns of behaviour were articulated very clearly and participants often reflected upon them critically and in some detail. Participants appeared to be much more aware and cognisant of their food practices in home spaces than in consumption spaces.

The descriptions that follow outline how home food practices were described. As with shopping routines-of-practice (see section 5.3) these routines are not discrete or exclusive. Individuals and households sometimes deployed a mixture of approaches that varied according to social context and events such as special occasions. The approaches can be understood, in part, as a spectrum of typical practices ranging from individualistic to collective, which are summarised in the diagram below (figure 6.1). The routines-of-practice described here are (1) 'erratic', (2) 'what we fancy' and (3) 'regulated meals'. The most individualised and least planned of these routines is 'erratic', as individuals rarely cooked and ate planned or shared meals. The most collective of the routines is 'regulated meals' in which individual and/or family eating practices were regulated, planned and organized. The 'what we fancy' approach was characterised by complex considerations, a concern for individual choices, and a heavy emphasis on shared family meal times.



**Figure 6.1: Routines-of-practice adopted for home cooking and eating behaviours**



### 6.3.1 'Erratic'

This routine-of-practice is highly individualised and one in which food behaviours were used as a means of expressing individual choice. 'Erratic' routine food practices comprise impulsive cooking and eating behaviours. Rather than having regular or planned eating practices, these participants described eating erratically, making impulsive decisions about what to eat and often skipping meals altogether. Participants rarely planned meals, although they sometimes ate meals planned and prepared by other family members. Some participants described at length how members of their family typically ate different foods at different times. Although all of the participants reported eating shared meals with others at some point, those characterised here as having 'erratic' home food practices made the fewest references to this and often ate alone, as is illustrated in the extract below:

**Lauren:** *Yeah ... .. Friday night, that's my tea indicating plate 6.8 That's sweet and sour chicken with rice.*

**CT:** *Did you cook that?*

**Lauren:** *Er ... mum, but it's only out of the microwave. One of the microwavable ones.*

**CT:** *Did everyone else have that?*

**Lauren:** *Probably not, no. We all have different.*

**CT:** *How do you manage that?*

**Lauren:** *It's organized chaos. When you walk through the door you eat or you have it later.*

**CT:** *Do you have to get a lot of frozen stuff to do that?*

**Lauren:** *Er yeah, we eat a lot of frozen stuff anyway.*

(Lauren, aged 23. Extract from photovoice interview)

**Plate 6.8:** Photograph by Lauren from her food photo-diary



Here, Lauren describes how her family would typically eat at different times and that she preferred to take an impulsive, rather than planned, approach to decisions about food. She went on to comment that:

*I'll go home and my mum will be like 'what do you want for your tea?' and I'm 'I don't know' and then I'm 'Where's my tea?' and she goes 'I don't know what you want so I don't know what to cook.' ... .. I just ... I don't know. You know how sometimes you feel like it and I'll have that or ... sometimes I can sit there and I'll think 'Oh, I can't be bothered to eat. I'll ... I'll have ...' I don't eat, I'm not hungry. I have hungry patches where I don't get hungry. Like, when I'm here (at work) ... when I sit down to eat I'll sit down to eat ... but I don't tend to get hungry. But then I'll go home and I'm not hungry.*

(Lauren, aged 23. Extract from photovoice interview)

Lauren described her eating practices, above, as erratic in the sense that they were dictated by hunger, cravings and potential effort rather than habit or routine. However, there were some regular food routines within the household that she mentioned throughout the interview, for example:

*Lauren: Yeah. I have dinner with my mummy.*

*CT: Does your mum do most of the cooking at home?*

*Lauren: Yeah ... she has no choice.*

*CT: Do you all sit down together and eat?*

*Lauren: No, cos my brother comes in about half 5, 6 and he'll have his tea and we all have something different anyway. I mean my dad waits to a lot later to have his tea cos he cooks his own curries so ...*

(Lauren, aged 23. Extract from photovoice interview)

As this extract demonstrates, Lauren sometimes ate with her mother, who did most of the cooking, although their home food practices remain characterised by descriptions of everyone eating different things at different times. Individuals within the home made decisions about what to eat based on personal preferences, practices and concerns rather than collective ones. If Lauren or other family members did not want to eat the food offered by her mother they would eat out or prepare their own meal or snack.

Conducting photovoice interviews with participants who described these sorts of practices could be quite challenging as they often had difficulty remembering what they had eaten on particular days and were sometimes unable to identify the foods depicted in their photo-diaries. In the extract below, Pamela demonstrates this problem:

***Pamela: ... I can't remember what day it is now, I've no idea indicating plate 6.9.***

*CT: I think it's still Friday*

***Pamela: What did we have? Friday evening ... erm ... I can't remember what this is. I have no idea. The reason I got orange juice is because I got iron tablets and my mate says if you put iron tablets with orange juice it dissolves a lot better. That's the only reason (laughs) Yeah the orange juice, otherwise I wouldn't bother.***

... ..

*CT: So this dinner indicating plate 6.9...*

***Pamela: I don't remember what it is***

*CT: There's some sort of veg*

***Pamela: Its vegetables. I think it was any vegetables. It's probably just veggies and stuff. Cos it's like Friday evening I come back from Kids Club and it's just something to eat and it's more than likely veggie stuff. I don't think it was meat.***

(Pamela, aged 42. Extract from photovoice interview)

**Plate 6.9: Photograph by Pamela from her food photo-diary**



In her photovoice interview, Pamela described a hectic lifestyle. Although she was not in paid employment she did voluntary work for a number of local organizations and spent a great deal of time with her extended family or at church. Her food practices were erratic and eating was often done quickly and in between other activities, as she explains:

*CT: And you say this is on the way indicating plate 6.10  
Where's on the way?*

*Pamela: I was legging it and I grabbed that what was in  
the fridge and I took that with me*

*CT: And you ate that at Food Bank (where she volunteered)?*

*Pamela: Yeah*

**(Pamela, aged 42. Extract from photovoice interview)**

**Plate 6.10: Photograph by Pamela from her food photo-diary**



Pamela ate irregularly and rarely planned meals. Eating is something that she fitted-in rather than organized her activities around. Food and eating was not a priority for her and she consistently described food as an afterthought or secondary consideration. As with Lauren, she did not depict cooking and eating as particularly significant activities. Both participants attributed their attitudes towards food as a direct result of their lifestyles. Warde (1999) explains that these types of practices are explained by both pragmatic and symbolic concerns. In one way, they reflect the declining cultural importance of eating regular meals in the home in postmodern times. Also, erratic and convenience eating behaviours are a provisional response to the problems of scheduling everyday life (Warde 1999). Both participants seemed to attach little importance to eating regular meals and both reported difficulties in scheduling regular eating times. Pamela described quite a hectic lifestyle, despite not being in paid employment, and had a wide range of voluntary and community commitments. Lauren worked varying shift patterns in childcare, meaning that she ate at irregular times.

By contrast, Adam explained (below) that his erratic eating practices were a result of living on a restricted income of social security benefits rather than a matter of life-style:

*CT: Do you normally have breakfast?*

*Adam: er ... it depends on what I have. Sometimes I probably won't eat like till on the night. It depends on whether I've got anything ... cos ... er ... I don't really plan anything food-wise ... cos its money ... its whether I've got it or not. If I've got it then I'll have something. If I've got bread then I'll have toast. But ... like ... I haven't had Bread since then indicating plate 6.11 (laughs) because I haven't had any money.*

*CT: When do you get your money?*

*Adam: I get some tomorrow, but I've only got £35 to last me two weeks cos, erm ... my (mobile phone) contract's come out this week ... for my phone. So I'll only have £35 to last me 2 weeks ... so that's going to be a really like noodles diet probably (laughs).*

(Adam, aged 18. Extract from photovoice interview)

**Plate 6.11: Photograph by Adam from his food photo-diary**



As he suggests in the above extract, he eats very little in the few days before he receives his social security benefit. As with Lauren and Pamela, eating regular meals was not a priority for Adam. His photovoice interview revealed that his diet consisted overwhelmingly of toast, instant noodles and chocolate biscuits, most of which (as discussed in section 6.2) he ate alone in his room.

*Adam: My breakfast, yeah ... erm ... Asda chocolate biscuits indicates plate 6.12 ... erm just like digestive biscuits with chocolate on.*

*CT: Oh, right ... do you get them in a multi pack? There are loads in your photos ...*

*Adam: Yeah, you get 20 for a pound ... so, so it's alright.*

(Adam, aged 18. Extract from photovoice interview)

**Plate 6.12: Photograph by Adam from his food photo-diary**



Unlike Lauren and Pamela, he was not happy with his eating practices. Adam talked about the regular cooked meals he had when he lived at home with his mother and explained, below, that he would like to adopt similar food practices if he could afford it:

*Adam: No ...money. It's all about money. If I had, you know ... If I had a job and a good income then I would (cook). I'd do it more often cos I like cooking. I like nice meals and that, but ... I can't afford it (laughs) ... .. cos my mum obviously cooks meals every day and, er, well I can't do that but .... But If I had a job I would do that.*

(Adam, aged 18. Extract from photovoice interview)



‘Erratic’ food practices appeared to be more of a choice for some participants than others. Some enjoyed an individualistic approach and eating what and when it suited them, like Pamela. However, others, such as Adam, described eating erratically and alone as a force of circumstance rather than a deliberate approach or preference. The cultural trend towards more solitary and individualistic eating practices, like those described by the participants above, is well documented (Bove et al. 2003, Jerome 1976, Dagevos 2005). As discussed in section 2.4.1, this increase in individual practices and decrease in family meals has been identified as contributing to poor health and socialisation and has also been discursively constructed as a moral issue indicative of a decline in family values. This trend, however, can also be rationalised as a response to changes in the broader and societal food environment, as a social-adaptive reaction. For example, when social and environmental conditions severely limit the food supply, diet and consumption patterns adapt accordingly (Jerome 1976). An increase in individualised food practices can be regarded as social adaptation to an abundance of food and food choices.

### **6.3.2 ‘What we fancy’**

This approach, like the previous one, also entails a high regard for individualised food practices. It is so named because the participants who employed it frequently explained food choices and practices in terms of what they and other family members ‘fancied’ eating. It is different, however, from an ‘erratic’ approach in that this routine-of-practice placed great value on communal eating and, in particular, on *family meal times*. Even if family members were all eating different types of food, the participants who adopted this approach were determined to ensure that they ate together, as a family. They rationalised their food practices by referencing individual likes and dislikes and assumed full responsibility for catering to their family’s personal food preferences. All of the participants who described their food practices in this way were mothers with

children living at home and all reported doing most of the cooking for the household. This is not particularly surprising given that, in most households, one adult typically has the primary food role, with mothers twice as likely as fathers to say that they held this role (Blake et al. 2009). Women continue to be held largely responsible for domestic food preparation even when in paid employment (Gofton 1995).

‘What we fancy’ represents the most complex and multi-layered of the three routines-of-practice presented here. The participants quoted below tried to combine the often conflicting aims of meeting everyone’s particular tastes and needs while simultaneously trying to ensure that the household ate family meals together. This complexity is reflected in the extract below from Caroline, a mother of two. She explained some of her family’s highly specific and individualised food needs:

*Caroline: Erm ... both T---- (eldest son) and I will eat the yolk of an egg but not the white, don't like the white (laughs). It's ridiculous ... erm ... J--- (youngest son) and I both love cheese. T--- and S---- (husband) hate cheese. So I can't kind of do anything, you know. Things like pasta bakes are out the window. Er ... T--- and I both love pasta and rice, S---- will eat pasta and rice. J--- won't. Erm ... T--- loves beans on toast, I mean he's quite happy with beans on toast. I'm quite happy for him to have that because that's quite good. And I do buy the low sugar beans... but I do buy the low sugar. I do worry about S---- cos he, he's Scottish. He was brought up with lots of salt. Everything has mounds of salt. So I do have to watch his intake and I do buy low sodium ... is it low salt you can get? And I buy that. Erm ... T--- will eat ... he loves bacon and chicken, steak. He's quite good with his you know. I'd say T--- and I are quite similar in our food tastes.*

(Caroline, aged 52. Extract from photovoice interview)

As can be seen, Caroline outlined some complex likes and dislikes and described how this made preparing shared meals, and trying to arrange communal eating, a challenge. Despite these difficulties, and in contrast to those deploying 'erratic' routines-of-practice, family meals were very important to her. As she went on the comment:

***Caroline: Yeah, I do try for us all to sit for our evening meals. Sometimes if S----'s working late, I'll just give J-- his and he'll have it in his room or he'll have it in the living room. Er ... and I'll have mine in the kitchen. Sometimes ... at least 3 times a week we'll eat together.***

**(Caroline, aged 52. Extract from photovoice interview)**

Catherine, a mother of one, also described family meals as very important, and she tried to get the household eating together on a regular basis.

***Catherine: ... cos we do tend to ... We try and eat together probably ... probably 4 or 5 times a week. Like of an evening as a family.***

**(Catherine, aged 37. Extract from photovoice interview)**

In order to facilitate family meals, these participants reported often having to cook different meals for individual members of the family. The gendered nature of these findings resonates with those of Blake and colleagues, who found that mothers reported using food choice coping strategies such as skipping meals and 'treating' children with food to encourage good behaviour more than fathers did. Fathers described fewer and less varied food choice strategies (Blake et al. 2009). Responsibility for managing and organizing family food practices, in this study, appears to more of a concern for mothers than for fathers. To further illustrate, here, Sue, a mother of two school-age children, talks about the meals she prepared for her children and partner:

*CT: So do you end up cooking different dinners for everyone?*

*Sue: Sometimes I do, yeah. Sometimes it's a case of we all have the same thing but most times it's something different cos everyone's got different tastes*

*CT: So do you mind doing that?*

*Sue: Sometimes it gets me down but you know, there you go.*

*CT: Do you ever end up cooking more than 2 things?*

*Sue: I can do yeah. I can do. You know like E----- and L----- (daughters) might have different, I could have something different and P--- (partner) could have something different if he's around like, so ... yeah.*

*CT: What might that involve then?*

*Sue: Well, like ... the girls could have like pasta. They like spaghetti and meatballs ... erm ... I could do something like a bacon sandwich or whatever. P--- could have fish er ... L----- could have a pie from the chip shop or an Asda pie you know.*

*CT: Do you do all the cooking?*

*Sue: Most of it yeah*

(Sue, aged 49. Extract from photovoice interview)

She went on to comment:

*...I look at it this way, I'd rather them eat something they want cos if I do them something they don't want, they ain't going to eat it are they? At least I know if they wanted it they'll eat it, they ain't going to waste it.*

(Sue, aged 49. Extract from photovoice interview)

Similarly, Caroline described preparing multiple meals for one sitting:

*Caroline: and ... .. I even cook 3 or 4 different meals some nights ... because we're all so fussy ... ..*

*I think right we haven't had this for a while, we'll have this.' Well, you know cos it can get very samey can't it. I mean they don't say anything but sometimes they can be a bit 'oh'. I'll go 'right, I'm doing so and so.' 'are having that again?' 'OK' Then I'll do something different. But you run out of ideas, especially with ... when you've got to make not just one meal but you're doing 2 or 3 so ... ..*

**(Caroline, aged 52. Extract from photovoice interview)**

As demonstrated above, organising family food practices can entail a perpetual negotiation and renegotiation of eating behaviours and preferences between immediate family, extended family, and household residents (Wills et al. 2008b). The cooking practices described by the participants are complex and labour intensive. They require a great deal of consideration, preparation and planning. These participants took responsibility for the cooking and eating practices of their partners and children and described trying to ensure that they ate regular, healthy meals. Once again, these findings echo those of Blake and colleagues (as cited above) who reported that the mothers they interviewed placed a high value on providing healthy meals for the family, compared with fathers who reported being content to just participate in family meals.

The mothers who described 'what we fancy' routines-of-practice were very much concerned that others ate and enjoyed the meals they prepared. Catherine, for example, talked at length of the importance of eating together. When she was not working part time she typically ate her day time meals with her nursery-aged daughter, as she explains below:

*CT: Do you make a conscious effort to eat the same things K--- (daughter) eats?*

*Catherine: I find I have to. If I try to give her something different she doesn't want it. She wants the same as me. It's irritating at times, when I fancy something and she doesn't want it but I know if I make her something different she'll want what I've got so ... .. so I tend to just make whatever she wants and I just have that. I mean I like the soups you get ... like the Covent Garden soups ... and I'll say 'we're having soup today' and she's happy with that ... soup and toast for lunch.*

(Catherine, aged 37. Extract from photovoice interview)

Catherine reported that she tried to eat the same things as her daughter to encourage her to eat and to set an example. As can be seen from the quote she would sacrifice eating what she 'fancied' because her daughter wanted to eat the same as her. It was the daughter who chose what to eat, albeit from the options her mother presented. The participant made the compromise between meeting her daughter's individual preferences and the desire to engage in collective food practices, to share meals.

In a similar vein, Collette, a mother of five, gave accounts of cooking family meals to suit the preferences expressed by her children at the expense of her own:

*Collette: ..... I said 'Was it OK?' and I said 'Don't worry; I'm not going to make it every week.' I did make that once, found something they liked and had it every week and they got sick to death of it. So, I've learned from that one. This was meatballs night indicating plate 6.13. And it ended up with no pasta, just the meatballs, a sauce which was a jar plus shop tomatoes ... so I did add some fresh to it, and garlic bread which I suppose was OK but to me isn't very filling. I mean I didn't have the meatballs, I just had the sauce but I didn't do myself some pasta to go with it. But it ruined it for me cos I was looking forward to something ... I even grated the cheese ready to put on top of the meatballs but it just didn't happen.*

*CT: Why didn't it happen?*

*Collette: Well, they had no enthusiasm for it. 'I'll do some pasta.' 'No.' 'I'll do some meatballs.' 'No'. 'Well eat them now I've cooked them.' 'OK.'*

*CT: So who ate that then?*

*Collette: M----- (son) didn't. Well actually he ate garlic bread and sauce and he had grated cheese on his, he did have that. But V----- (son), D----- (daughter) and Z— (daughter) did have the meatballs and that so ... I had more or less the same as M-----. Meatballs had to be eaten though, cos as I said they'd been in the freezer for too long and they needed to be cooked cos I needed room for the next time I did the shopping (laughs). But er ... it was an idea I'd had and I kept bringing it up every night. 'Shall we do the meatballs tonight?' 'No.' 'Shall we do the meatballs tonight?' 'No.' 'Oh, I'm not asking. I'm going to do it now.' So ... but that failed ... and I do, I ask them for ideas.*

(Collette, aged 44. Extract from photovoice interview)

**Plate 6.13: Photograph by Collete from her food photo-diary**



As the extract revealed, Collette recalled being very disappointed that her children's preferences prevented her from cooking the meal the way she would have preferred. As with Caroline, she expresses a desire to provide the family with choice and variety, to avoid making them the same meals over and over

again. She takes responsibility for providing a varied and enjoyable diet through shared family meals. In addition, the participants that described these sorts of practices talked both about the work they did to ensure their families ate meals together and the financial cost of catering to everyone's preferences. In a further example, Caroline describes this work and the cost in the extract below:

***Caroline: ... My friends say 'you must be mad ... it must drive you mad.' But you get used to it. And I just like them to eat and to be happy in what they're eating and as long as I know they're having something healthy then I'm happy. My food bill's extortionate. You should come shopping with me (laughs).***

*CT: How much do you think you spend on average ... on a shop? ... in the supermarket ...*

***Caroline: Er ... I do a big weekly shop, which is anything ... can be anything between £130 and £180 a week. But if I spend £130 you can guarantee I'm back out spending 20 ... you know like. I spent £140 last Wednesday and then before I went to Asda I spent about 20 quid on bits, and then I spent £25 last night. I've got to go shopping tonight. There's no milk, there's no squash, so ... ..***

(Caroline, aged 52. Extract from photovoice interview)

Collette also expressed her frustration at the cost of meeting her children's dietary needs and demands:

*CT: How much do you think you spend a week on shopping?*

***Collette: At least £100, definitely. And what galls me is that it's nearly always on next to nothing.***

*CT: What do you mean?*

***Collette: Erm ... most of it goes on breakfast bars thing like ... silly things, what I call non essentials. Well I ...***



*to be absolutely honest I think one breakfast bar a day is enough and I'm trying to cover everybody and it's gone.*

(Collette, aged 44. Extract from photovoice interview)

The participants quoted above were acutely aware of the individual likes and dislikes of their families and worked very hard to manage and accommodate them. A comparable trend was reported by Miller (1998) in his ethnographic study of shopping in North London. He encountered a core of households in which mothers subsumed their individual needs and preferences to those of the rest of the household, including food shopping and cooking practices. Far from being passive in nature, Miller depicts these practices as high-agency in many respects. The mothers he interviewed did not just buy and cook uncritically to meet with the preferences and desires of their household, they sought to manage, influence and change the behaviours of their families (Miller 1998). Indeed, the approaches described by the participants of this study are not reducible to a simple matter of them uncritically responding to the preferences and demands of family members. Rather, they tried to negotiate home food practices that kept everyone happy and at the same time were sufficiently healthful and delivered in the format of family meals.

### **6.3.3 Regulated meals**

The final routine-of-practice presented here is characterised by a regulated approach to cooking and eating. Participants who deployed these planned and organized routines came from a variety of household structures, with some living with their families and others living alone. Those participants living alone regulated the times and cost of their meals, being mindful to avoid wasting food. For families this approach was highly collective in nature, with family members eating regular shared meals together. As with the 'what we fancy' routine-of-practice, a high value was placed on family meals and communal eating.

However, in this approach, individual preferences were *not* catered for and a low level of choice and individual discretion was exercised by family members. Careful planning, repetition of successful meals and a somewhat autocratic approach to choices about food were frequent features of participants' accounts.

In the following extract, Jayanti demonstrates this point when she explains how she organizes and prepares her family's meals:

*CT: Some mornings you have cereal, other mornings you do them a cooked breakfast?*

***Jayanti: Not a proper one. We don't have bacon or sausages. Love egg. Boiled egg, scrambled egg, sometimes an omelette.***

*CT: How do you decide what to do them for breakfast?*

***Jayanti: I just try and vary it. One day we'll have scrambled egg, one day we'll have boiled egg.***

*CT: Do they get to choose at all?*

***Jayanti: No***

... ..

*CT: And do you always eat the same things at meal times?*

***Jayanti: Yeah. Yeah. I make them ... I'm not cooking different things (whispered)***

*CT: Do you do all the cooking?*

***Jayanti: Yes***

**(Jayanti, aged 45. Extract from photovoice interview)**

Like Collette and Caroline in the previous section, Jayanti's children also had specific food preferences and dislikes. However, they appeared less exacting than the ones described by those participants (see section 6.3.2 'what we fancy').

Also, she talked about individual likes and dislikes in less detail and appeared to attach less importance to them.

*CT: Do they (children) ever complain about all eating the same thing?*

***Jayanti: No. On the whole they are good, to be honest. They eat what's in front of them. Except my eldest, he's ... he prefers meat, he doesn't like vegetables. He'll eat them like a dinner, but like certain curries and things he's not ... it's not meat. My husband's like that. If there's not meat there ... He'll eat it but he'll have a groan and a moan. Like today, I'm cooking pasta. I've just started doing the pasta and he doesn't ... no meat in it. Doesn't want it.***

(Jayanti, aged 45. Extract from photovoice interview)

Jayanti consistently described preparing only one meal for the whole family as more important than catering to individual likes and dislikes. She had the final say as to what was served at meal times. Although she was aware of individual preferences and dislikes she did not really factor these in to the planning and preparation of meals, adopting a rather autocratic approach to choices made about food.

In a further example, Lisa and her husband took a very organized and regulated approach to planning and preparing meals for themselves and their three children. Over the years they had compiled their own recipe book, in which they recorded recipes for home cooked meals they had tried and liked, as she explains in the following:

*CT: Is that quite typical then, that you'll all have the same thing for dinner?*

***Lisa: We always do the same. The only thing we don't do the same is when we have curry because my son cannot stand curry, so I'll do him something different.***

... ..

*We've got a big recipe book now ... with all the things that he's cooked and it's been good (laughs). He's own personalised recipe book (laughs) ... .. I do the shopping. Because I plan the meals for the week and I tell him what to cook (laughs). I know what I've got to buy you see. So I go through the recipes, oh we need that, we need that. But we grow a lot of the stuff ourselves, so ... like the chilies and all the herbs ... ..*

*So that's a Saturday. Sunday's always the roast dinner and ... and ... I don't know. We do chicken one day a week. We do sausages or bacon one day a week, fish one day a week and the ... the red meat. So we try and keep it ... but we vary the recipes obviously, otherwise they get sick of the same thing every week wouldn't they? Yeah.*

*CT: So ... (to Lisa) You'll plan out what meals D----'s (husband)going to do. Then you'll do the shopping ... then you'll ... what ... like give him a list of what meals he's doing? How does it ... how does it work?*

*Husband: Sometimes I'll just come home and there'll just be a recipe on the side and I'll know what I'm doing, right. That's what we're cooking.*

**(Lisa, aged 38. Extract from photovoice interview)**

Lisa selected which meals the family would have from the recipe book and shopped accordingly. She did some initial preparation and left the ingredients and relevant recipe for her husband, who cooked all the evening meals. This very organized and regulated method of performing family meals ensured an entirely collective approach to household food practices. The parents jointly took responsibility and divided tasks between them. Individual tastes were catered for to an extent, as can be seen above, but most meals were shared with all the family eating the same thing. The family shared a meal every night, which they described as very important to family life. In fact, they placed a high value on all the family eating the same food and, as can be seen here, were quite critical of their extended family, some of whom took a more individualised approach to home food practices.

*CT: Do you have the same sorts of things when the kids have their friends over as you would ordinarily?*

*Lisa: Yeah. I don't do separate meals. So the only ordeal is G----- (son) when we have curry.*

*Husband: Yeah and I don't mind that cos he's tried it a few times and he ...*

*Lisa: He'll try it, yeah. He'll say "I'll have another go." But no, we'll always do the same and if they don't like it then it's tough, (laughs) tough love. But its worked cos now G----- will eat anything except the curry.*

*CT: Have they all got fairly broad palates then? Will they try most things?*

*Lisa: Yeah. Yeah. We've never said ....*

*Husband: Yeah. All of them hate broccoli*

*Lisa: (laughs) Yeah, cos his mum did. Didn't she? Oh yeah, we make them eat their vegetables. Oh definitely. But his (Husband's) mum was very different to us, wasn't she? She would do separate meals for each member of the family because one didn't like this and one didn't like that and I said "I just ... I just can't". How can you do that when you've got 3 kids and you work and I said "no, this is what we're having and if you don't like it then you'll go hungry."*

*Husband: She still does it for my big brother, cos he still lives at home.*

*CT: How old's your big brother?*

*Husband: Older than ... nearly 40!*

**(Lisa, aged 38. Extract from photovoice interview)**

This approach to cooking and eating practices also differed from the previous approach in that pragmatic concerns such as cost, waste, health and time were consistently positioned by participants as more important than

enjoyment of food or individual tastes. These participants appeared to have a less emotional relationship with food and often a very pragmatic one. For example, June, a retired nurse, who lived alone, explained to me how she decided what to cook and eat on a daily basis:

*June: ... I have a couple of friends who have allotments so I can get vegetables from them. I had that vegetable curry it was made from ... that was made with stuff from their allotments.*

... ..

*CT: And this is your dinner? Indicating plate 6.14*

*June: Vegetable curry, yes.*

*CT: And you made this yourself?*

*June: I did, yes. I made a big thing and I put the rest in the freezer.*

*CT: Do you do that often?*

*June: Er .. no, it depends how many vegetables and things I've been given. But I do tend to mix them up with the rice and stick them in the freezer with the rice, you know, instead of making another lot of rice ... .. those are red beans.*

... ..

*CT: What other sort of dishes do you tend to cook yourself?*

*June: I would have rice with ... I eat a lot of garlic. Sort of garlic and onion sauce and mixed vegetables, whatever vegetables I've got really ... ..*

(June, aged 69. Extract from photovoice interview)

**Plate 6.14: Photograph by June from her food photo-diary**



June reported that she had a number of friends with allotments who regularly gave her fruits and vegetables. She incorporated this into her food practices by making decisions about what to cook dependent on what fresh fruit and vegetables she had been given. When she had a large amount of vegetables she would cook one large dish and then freeze the leftovers, as she describes above with the vegetable curry. This pragmatic approach to organising meals is centred on what is readily available rather than what is desired.

The ‘regulated meals’ routine-of-practice, entailed a high value on avoiding the waste of both food and money. As discussed in section 6.2, eating meals in the home was consistently described as a way of saving money. Participants, like June, expressed a preference for eating at home and described economical home food practices. Clifton, for example, explained that he would rather eat at home, as opposed to eating out, because he wanted to avoid wasting the food he had at home. Once he had purchased food, like the burger rolls talked about below, he made sure than he ate all of it before it went off:

*CT: Looking at this ... it seems like you eat most of your meals indoors. Is that typical?*

*Clifton: Yeah ... it's typical that I eat indoors ... Today I haven't had any lunch. I've got ... erm ... haven't had any lunch today I'm*

*... I'm eating on the move. On the go.*

*CT: Do you prefer to go home and have your lunch?*

*Clifton: Erm ... I wouldn't say I prefer. It's just that ... er ... it's just that I know ... I know that food is definitely there. I mean I don't like to waste things ... if I'm ... if I'm buying something for myself, say, you know ... rather than just chucking it out in a week ... just use it ... just use it and don't ... don't sort of throw the food away and wait for it to go rotten.*

... ..

*CT: Is this your lunch? Indicating plate 6.15. Beans and rolls?*

*Clifton: Yeah. Yeah ... I had too many rolls. You see I bought these for the beef burgers (laughs). I had too many.*

(Clifton, aged 43. Extract from photovoice interview)

**Plate 6.15: Photograph by Clifton from his food photo-diary**



Another participant, Dave, who lived alone expressed similar concerns about waste and tried carefully to ensure that he used all the food he bought before it went off. This often entailed eating the same or similar meals for several consecutive days, as demonstrated here as he describes some of the meals he cooked in the photo-diary period:



*Dave: Spiced potato wedges ... spicy potato wedges, spiced chicken and them er wraps ... they're just like erm ... like a ravioli filled with cheese and garlic.*

... ..

*CT: Right ... and this second photo indicating plate 6.16 ... is that's the same day (Thursday)?*

*Dave: Yeah. I had the rest of the potato wedges and that's like er ... chicken breast wrapped in bread crumbs filled with cream cheese and garlic ... as an alternative to a chicken kiev. I thought I'd have the cream cheese instead.*

... ..

*Dave: Yeah, normally is I cook something I cook for ... because I ... I mess about with food anyway, I cook a few things together ... that'll do me for 2 or 3 meals rather than just the one meal. Otherwise there's no point me doing that. I might as well open a tin of beans if I'm on my own.*

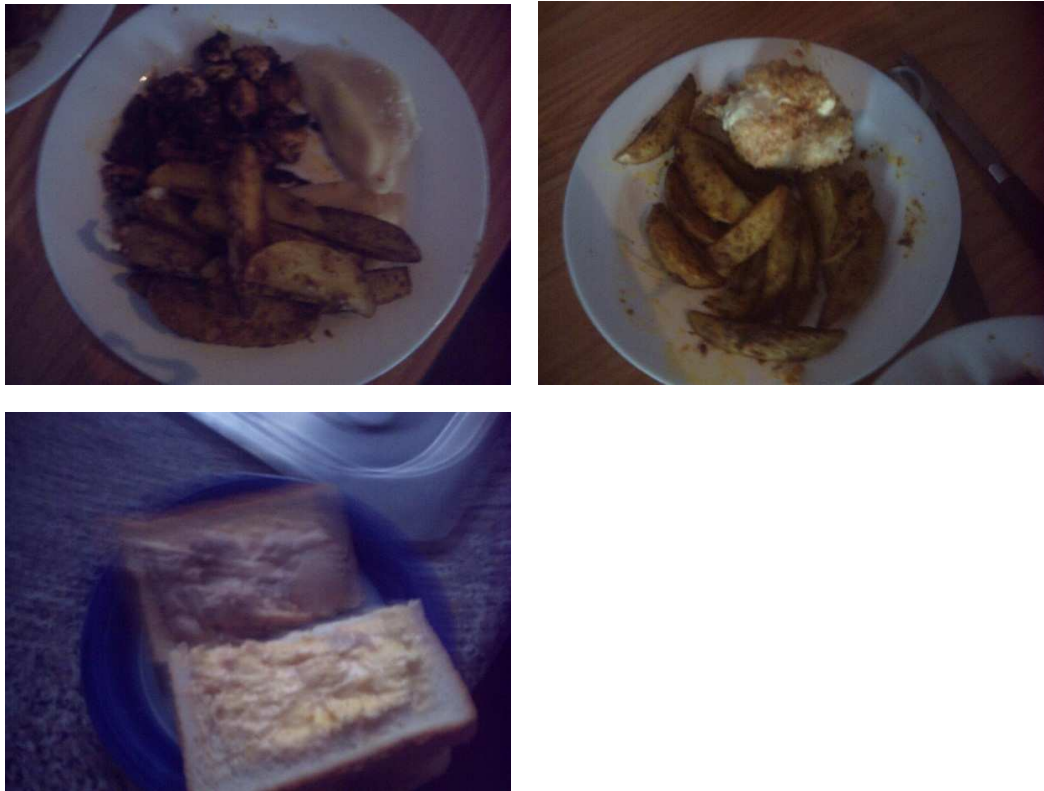
... ..

*Dave: Yeah ... That is chicken breast left from Thursday ... basically what that is indicating plates 6.17 and 6.18 ... that's chicken breast fried up, chopped up and put in mayonnaise*

**(Dave, aged 45. Extract from photovoice interview)**

Whilst talking me through his photo-diary, Dave explained how he used the same basic ingredients to make meals on Thursday and Friday. As can be seen (plates 6.16, 6.17 and 6.18), the meals he ate on those days were very similar. 'Regulated meals' routines-of-practice entailed a somewhat different approach to cooking and eating than those depicted in the previous sections (6.3.1 and 6.3.2). Although these participants talked of enjoying their food they rarely cited impulse or individual preferences as factors affecting their home food practices. They appeared to base their food choices on more pragmatic factors such as waste, time and cost.

**Plates 6.16, 6.17 and 6.18: Photographs by Dave from his food photo-diary**



The spectrum of approaches demonstrated by participants, in the sections above, varied in terms of agency, collectivism, individualism and in the interpretation and enactment of family meals. The home and family environment offers one of the most intriguing contexts in which to study food practices because it is the site of both individual and collective practices. The food practices performed in these sites play an important part in the production of identities and the negotiation of relationships (Valentine 1999b).

## **6.4 Identity and eating practices**

Food practices can be used to construct and maintain identities. Food related identities can be described as the use of consistent narrative to explain food and eating practices (Bisogni et al. 2002). Many of the participants explicitly

labelled themselves in relation to their eating practices; they adopted and performed food-related identities. These identities were underpinned by specific discourses, values, preferences and practices. In some cases the identities described were highly performative, inconsistent or context specific. For example, five of the participants had, at some point, been vegetarians and all of them constituted 'being' a vegetarian in slightly different ways. Three of the participants observed religious dietary practices (one Sikh, one Hindu and one Muslim). In passing, participants often described having a 'sweet tooth' or being a 'snacker' or 'picker'. Although a variety of food related identities were talked about, including being a 'food lover' or an 'easy eater', two particular and detailed identities emerged from participant's descriptions: 'fussy (or 'picky') eaters' and 'healthy eaters'. These identities compelled or rationalised certain behaviours and beliefs and had both positive and negative connotations for participants.

It is important to note that these identities were discursively constructed. They do not necessarily indicate consistent food practices; rather, they are based upon consistent *narratives* of food practice. Therefore, an individual identifying themselves as a 'healthy eater' may not necessarily maintain a 'healthy' diet, rather they consistently talked about their food practices as being 'healthy', regardless of what they actually involve. Participants frequently described food practices that changed depending on the context they were performed in. However, they rationalised them within consistent narratives about their food related identities. Returning to the example of self-identified 'healthy eaters', these individuals often explained away their consumption of high energy and convenience foods as exceptions to an otherwise healthy diet or as being nullified by other healthful behaviours. Food practices and narratives can be used to construct and maintain identities. In which case, identity is a process, a matter of external negotiations between oneself and others (Smit and Fritz 2008). Accounts and rationalisations of food behaviours that are framed within particular identities, such as that of being a 'fussy' or 'healthy eater', are a way

of making sense of varied and disparate practices and providing continuity (Smit and Fritz 2008). They are also a means of positioning oneself in relation to discourse (Edley 2001).

#### 6.4.1 'Fussy Eaters'

'Fussy eater' identities were talked about by nine of the participants, four of which ascribed this identity to themselves; Lauren, Diane, Tracy and Caroline. 'Fussy eaters' were characterised by numerous, exacting and even severe dislikes for certain foods, properties of foods such as texture and smell, methods of cooking, and portion sizes. As Tracy reveals in the extract below:

*Tracy: That's the thing ... because I don't eat salads or many vegetables ... the only vegetables I really like is potatoes and carrots. That's it, so I'm very limited in what I can have and it's just because I just don't like them or textures as well, some textures. Like eggs, put an egg in my mouth I can physically ... eurgh. But then I'll have something and people will think 'well, you'll eat that!' Like I'll have mint sauce with anything but lamb (laughs). Only cos I don't like lamb. So, I am very strange when it comes to eating.*

... ..

*CT: What other things?*

*Tracy: Erm ... it would be things like lettuce and them type of things. If I do have vegetables like carrots they have to be really well done because I can't stand crunchy.*

(Tracy, aged 33. Extract from photovoice interview)

Here, Tracy describes her dislikes in very strong terms. Just talking about eating eggs provoked a physical response from her and she mimicked retching as she said '*I can physically ... eurgh*'. Lauren, in the extract below, spoke of her food dislikes in similar terms, talking of how drinking water could make her feel physically sick if it was not cold enough.

*CT: Do you ever drink water?*

*Lauren: No ... it makes me feel sick. I can only ... I can only drink water if it's virtually just come out the freezer and it's not frozen. Ice cold ... and I'll only drink that in the summer and I'll think 'oh, ice cold glass of water' and then I'm like give me the juice, give me the pop. Weird. I can't drink still.*

(Lauren, aged 23. Extract from go-along interview)

Similarly, during her go-along interview at Warley Woods Golf Café, Diane told me that she could only eat cooked food when it was hot. As soon as it started to cool it 'turned' her stomach. During the course of the interview she ordered and then ate egg on toast. However, she did not finish this meal (plate 6.19) because it had gone cold, as she explains below:

*Diane ... and another thing I do ... I eat fast as well. I eat really fast because I don't like it when it goes cold. This is really strange isn't it? I don't like hot food when it goes cold ... turns me off it.*

*CT: Even toast?*

*Diane: No, not when it goes cold ... .. turns my stomach ... yeah ... weird.*

... ..

*Diane: I'm finished now ... It's got cold and greasy I won't touch it now.*

***The participant pushes away her plate (see plate 6.19)***

(Diane, aged 48. Extract from Go-along interview)

**Plate 6.19: Photograph of Diane’s unfinished meal (by CT)**



All of these participants gave quite vivid accounts about the texture of foods they did not like and their physical reaction to them, often expressing their dislike by making retching noises or holding their hands up to their mouths and throat as they spoke about eating unpleasant foods. They described very intense or sensitive visceral experiences of food, in that the tastes, texture and aromas of food had intense and sometimes emotional affects (Longhurst et al. 2009). The reactions observed in and described by Diane, Lauren and Tracy are very physical in nature, most especially the retching and feelings of sickness. Dovey and colleagues, however, explain that although food neophobia and picky/fussy eating are often used interchangeably to describe highly selective eating practices, they are not the same. Food neophobics are reluctant to eat new foods or avoid them altogether. Picky or fussy eaters, by contrast, tend to consume an inadequate variety of foods through a rejection of a substantial amount of foods that are familiar *and* unfamiliar to them (Dovey et al. 2008). The participants quoted above were extremely selective about the temperature and texture of the foods they ate. Their preferences and dislikes were much more complex than a straight forward matter of rejecting new foods. An example of this can be seen in Caroline’s account below, in which she described herself and her children as ‘fussy eaters’. She gave a detailed account of the family’s various dislikes for certain vegetables, especially her strong physical reaction to cucumber and tomatoes.

*Caroline: ... .. but I'm like that with certain foods. I don't like the texture. If I don't like the texture eurgh, I can't eat it. I hate cucumber, the smell, the taste. Find it slimy ... oh yeah. Tomatoes, the seeds in tomatoes eurgh, and yet I'll eat pizza which has got like puree. I'll eat spag bol, which I've tried desperately to get J--- (son) to eat and I've even tried putting mushrooms and carrots and celery in to get T--- (son) to have veg, but he sussed me out and he wouldn't eat it. So I've done everything, but erm ... yeah, there's certain things. What else don't I like? Erm ... oh, there's something I really don't like, don't like the texture of ... I don't like mashed potato.*

(Caroline, aged 52. Extract from photovoice interview)

The foods most commonly described as unpalatable by participants were various fruits and vegetables. Cheese, processed potato products, bread and cereals, on the other hand, were constituted as dietary staples. However, participants differed in how they perceived their identity as a 'fussy eater'. Diane and Tracy both expressed a sense of resignation and even regret about their very specific likes and dislikes. In the extract that follows Diane talks about the problems her taste in food caused her:

*CT: Does your mum eat the same sort of food as you?*

*Diane: No. She's pretty ... she'll have a cooked dinner at tea time and a sandwich lunch time, yeah. Cos I ... I don't very often have potatoes and stuff like that. She gets ... I've sort of noticed that she gets in a habit of not bothering cos it's not fair you know. So I do feel I let her down sometimes, but I don't really like that sort of food.  
... ..*

*CT: .... Where do you think it comes from, how you are with food?*

*Diane: I don't really know. It's just a pattern I've had. Well, I'm 48 now so I'm not going to be able to change am I, really? I'd like to think I could change it but I know as soon as I start eating healthy it just goes back to being*

*what I like and what I fancy. You've got to really look ... you've got to have that craving for something haven't you ... I ain't got it, only for junk.*

(Diane, aged 48. Extract from photovoice interview)

Diane explained that her cravings and preferences always disposed her towards eating 'junk' foods and this prevented her from eating regularly with her mother. Tracy depicted a similar need and preference for certain foods, which, as can be seen below, she reported having little control over:

*CT: Is there anything you could change about your diet what would it be?*

*Tracy: Well, I'd like to eat fruit and salad because I just think it looks healthy and it does look good. I just wish I could eat it but I just can't ... .. It is things like chocolate. I mean I can't even say it's crisps because I'll have crisps then I'll be satisfied with crisps. Whereas if I have a chocolate I'll always need more, do you know what I mean ... .. Oh gosh, I can eat a whole bar if I wanted to. You have to try and restrict yourself. But it is ... I can go a day without eating it, but as soon as I put some in my mouth that's it then I get the taste and I just want more then.*

(Tracy, aged 33. Extract from photovoice interview)

She went on to explain how her parents had tried to broaden the variety of foods in her diet, but that she remained unable to eat them:

*Tracy: I know ... they tried, but I mean I used to get physically sick if I had something that I didn't like ... It would be things like the eggs ... cos I did used to eat them at one point and then it got to a point where I just couldn't. They did try to get me to eat things because of it being good for you, this, that and the other. But I just ... just couldn't.*

(Tracy, aged 33. Extract from photovoice interview)



Both participants positioned themselves as somehow powerless over their food preferences and practices. They both talked about how they would like to have similar food practices and tastes as the rest of their households. Diane even felt guilty about not having the same habits and practices as her mother.

In contrast, Lauren and Caroline did not express any such concerns. They both described themselves as picky or fussy, but there were no negative or emotional connotations to this label. Lauren explained, below, that she ate quite differently from the rest of her family without voicing any regrets or concerns about it:

*CT: Is there anything in your personal history, in your family, that makes you make certain food choices?*

*Lauren: Er ... I'm kind of opposite to my family cos ... they love curry, spicy food, hot food and I ... I can't stand it, I can't eat it. When I was little I used to live on cheese and tomato pizzas ... .. .*

*.... I don't know. Like I say I'm ... I don't like a lot of the stuff that they (family) like so I'm on my own. I can like, I'll eat whatever's there sort of thing.*

(Lauren, aged 23. Extract from photovoice interview)

Caroline went further and stated that she had a very positive relationship with food. She spoke with great affection and enthusiasm, at times, about cooking for her family and eating out in restaurants. She enjoyed cooking and eating.

*Caroline: ... I'm ... I'm constantly ... cos my reading matter is nearly always about food. I'm obsessed with food, I love food ... Well I buy cookery books or magazines, and if I go shopping I do go ... clothes shopping ..... . Yeah, if I do clothes shopping I will do so much but then I will always end up in the supermarket. Just having a look at what I can do maybe ... different at all 'oh, I'll try that'.*

(Caroline, aged 52. Extract from photovoice interview)

In contrast, Diane articulated a completely different relationship with food, one that was at best indifferent and that she repeatedly described as problematic. She was disinterested in food itself and in most aspects of cooking and eating:

*Diane: No. I'm not interested in cooking at all, I hate it. I can't be bothered. That's why I have such a problem I think with food and how I look (laughs) ... I'd rather ... if somebody came, some scientist came up with a pill for breakfast, a pill for dinner, a pill for tea I would quite happily live on 3 pills a day. It'd just fill you up.*

*CT: You don't enjoy eating?*

*Diane: I don't know. It doesn't bother me at all, it's just I have to eat cos I'm hungry and I just reach for the junk.*

(Diane, aged 48. Extract from photovoice interview)

The traits and practices of those that labelled themselves 'fussy eaters' were relatively similar. They all had strong dislikes of certain foods, especially various fruits and vegetables, and preferred bread, cereals and processed potato products. This is also consistent with the descriptions that participants made of family members that were 'fussy eaters'. They all spoke about their dislikes in very strong and definite terms with frequent and animated references to their physical reaction to certain foods. However, the ways in which they perceived and evaluated themselves as 'fussy eaters' were quite varied. For some this implied a degree of powerlessness over their food practices and was a cause for regret. For others this identity was not treated as problematic and did not appear to stop them enjoying cooking and eating. Eating is a personal and embodied act. The construction of food-related identities, evaluations and preferences about food are discursive, in that they are built through interaction (Wiggins 2004) and therefore can vary according to the individual and the context. Each of the participants quoted above experienced and enacted being a 'fussy eater' in a slightly different way. For all of them, the home and family environment was a key context in which the identity was negotiated. For participants such as

Caroline the home food environment accommodated and recognized the personal preferences of ‘fussy eaters.’ For Diane, by contrast, her identity as a ‘fussy eater’ served to alienate her somewhat from her mother, and it was a source of guilt and regret that she could not fully participate in family meals.

#### **6.4.2 ‘Healthy Eaters’**

The other most frequently described and detailed food-related identity which emerged from participants’ accounts is that of ‘healthy eater.’ It is important to note that the term ‘healthy’ was discursively constructed by participants and used to characterize their eating practices. ‘Healthy’, in this context has no objective or consistent meaning. It is presented here as participants constructed and deployed it. All of the participants made at least brief comments about trying to eat healthily, with most referencing the 5-a-day guidelines. They often explained their food choices and eating practices in terms of health concerns for themselves and especially for their children. Five went as far as to explicitly label themselves as ‘healthy eaters’; Catherine, Lawrence, Clifton, June and James.

Compared with the ‘fussy eaters’, the ‘healthy eaters’ were a much less homogeneous group in terms of values and practices. Individuals had widely differing interpretations of what constituted healthy food. Some were relatively uncritical of their diets while others were embarrassed about eating foods that they deemed to be unhealthy. As previously stated, ‘healthy’ had no fixed meaning across participants. James, a Sports Science student, explained how he came to be a ‘healthy eater’ and described his lapse in healthy eating after an injury:

*James: When I was ... er ... about 11 or 12 I used to fight for Great Britain for Judo so I was put on loads of different diet plans and I got a fetish for eating healthy foods anyway. You wouldn't ever ever see me eat a fatty substance or something like that. So that ... as I grew up and er started like actually reading into why they get you to eat all this ... it actually clicked that its making me*

*healthier and making a real change to the way I live. But then ... when I got injured ... cos I dislocated my elbow ... shattered by elbow bone. It ... that ..... ..*

*... yeah ... its about 4 years ago when I was 14. That ... er I started like 'I don't need to go to the gym then cos I won't be able to go back, blah, blah, blah'. That's when I started eating like fatty foods again, but still keeping in mind that eating healthy food is better than stuffing yourself with fatty substances all the time. So ...*  
... ..

*CT: So you're back on your healthy eating kick now?*

*James: Yeah. It's all back now.*

(James, aged 18. Extract from photovoice interview)

Being healthy and active came up frequently in this interview as James described himself as a 'sports fanatic' and talked about his Judo competitions and the Sports Science course he was enrolled on. He explained that the crisps, chocolate, chips and fizzy drinks that were recorded in his food photo-diary were not typical of his eating practices, as can be seen in the extract below:

*James: the recording fell on the day that I had my prom and I got like asked to go to the party on the Friday and I had my girlfriend's Dad's 40<sup>th</sup> on the Saturday and Sunday was like ... you have Sunday dinner on Sundays anyway so it was like the unhealthiest four days of my life basically.*

*CT: So this isn't typical of you*

*James: No.*

(James, aged 18. Extract from photovoice interview)

He went on to describe the health benefits of some foods that are not widely regarded as healthy:

*James: I mean my mum walks past Iceland or anything she'll just jump in and get my chicken. Cos I've got a fridge drawer that's dedicated to my chicken.*

*CT: Have you? Explain that .... Why have you got a fridge, freezer drawer rather ...*

*James: Cos ... like ...if there's sometimes. Sometimes I just sit in my house and get an addictive craving for chicken because chicken's like ... a protein food and it just builds my energy.*

*... .. Chicken's ... Yeah I've got like southern fried chicken then I'll have spicy chicken and I'll have chicken dippers. I'll have chicken nuggets. I'll have chicken drumsticks. And chicken strips and everything like that in there.*

(James, aged 18. Extract from photovoice interview)

James identified himself as a healthy, active person, as a 'healthy eater'. It is this that shaped his narrative about food. All food choices and practices were described from this perspective, meaning that all the foods he ate were described as either healthy or rare exceptions to an overall healthy diet. The food related identity he presents is more pervasive than the actual practices that underpin it. The self-imposed label of 'healthy eater' served as a way of making sense of and giving meaning to his food practices. The practices James describes above inherently contradict the 'healthy' label he uses to describe them.

Contradictions between narrative and practice were very common in participants' accounts of food-related identities. Clifton, for example, described himself as a 'health freak'. He took a variety of supplements and vitamins on a daily basis. He explained the health benefits to me:

*Clifton: It probably just gives you good ... good strong bones. Er ... just give you some of the required ... you know 5 a day. They say you need your 5 a day. If I'm not ... if I'm not eating like an apple or an orange every day or whatever then I think like this is like my substitute to say well I'm not eating my fruit and vegetable but at least I'm getting vitamin A and C this way. It's not like I'm being really unhealthy, like drinking too much beer, too*

*much hamburgers. And besides, when you do eat hamburgers and drink knowing that you know, you know ... knowing that you've done something healthy anyway.*

(Clifton, aged 43. Extract from photovoice interview)

Clifton uses the supplements as a 'substitute', as a way of compensating for potentially unhealthy practices. As with James, the account he gave was shaped by his self-identification as a 'healthy eater' and all his practices were described from that perspective, as this extract demonstrates:

*Clifton: Erm ... I like ... yeah I like ... I like chocolates. I buy chocolates for my tenants.*

*CT: I remember you saying when we went to Tesco's the other day ... ..*

*Clifton: But now and again I'll say this one's out of date now and I couldn't ... couldn't possibly give that to the tenant. What would my tenants think about me if I gave them out of date chocolates. I'll damn well have to eat them myself. I can't give them to anybody (laughs).*

*CT: So you have the occasional treat then?*

*Clifton: Oh yes ... .. and then there's afters. But I'll just have it because I'm ... I'm a health freak it ... it doesn't matter. But after a while ... erm ... it can absorb that. You can absorb a bit of unhealthiness in your ... you've got to ... ..*

(Clifton, aged 43. Extract from photovoice interview)

Potentially unhealthy food practices, like eating chocolate, did not threaten his identity as a 'healthy eater' and he talked about the incident with humour. Because he is a 'health freak' he can 'absorb a bit of unhealthiness'. James and Clifton gave very confident accounts of themselves as 'healthy eaters'. They explained away or rationalised the consumption of foods that could be regarded as unhealthy and presented very consistent narratives about their food-related identities, even if these were clearly contradicted by their actual practices.

For other participants, being a 'healthy eater' was much more conflicted and complex, as demonstrated here by Catherine. Catherine described herself repeatedly as a 'healthy eater'. She spoke at length about how hard she and her husband, also labelled a 'healthy eater', had worked to instil healthy eating habits into their nursery-aged daughter:

*Catherine: Yeah, I think she (daughter) eats really well cos when I was a child I was dreadful. I didn't used to eat any you know fruit and I used to eat cooked vegetables, but no salad or anything and she loves all that. So yeah ...*

*CT: Why do you think that is?*

*Catherine: I think it's the way we've fed her to be honest. We've been really strict at the beginning ... we're not now ... but we were in the beginning. Well, she would never have any crisps or chocolate or biscuits or anything you know. The first piece of chocolate was ... I remember, her first birthday. Her cake was chocolate and a cousin, without me knowing, gave her some chocolate and I was like 'oh', you know like mortified that she was eating chocolate cake at ... you know ... and really just loads of fresh you know food so she doesn't I suppose look on crisps and chocolate as being part of her diet. It's just a treat but it's not part of her diet.*

(Catherine, aged 37. Extract from photovoice interview)

Catherine and her husband were very concerned with setting an example for their daughter, to the extent that they would wait until their daughter had gone to bed before eating foods that they deemed unhealthy, as she explains:

*Catherine: Er ... try to be healthy, try to do 5 portions of fruit and veg a day. But of an evening then I'll hit the biscuit tin and eat and eat and eat until I can't eat anymore (laughs).*

... ..

*CT: Do you and your husband have dessert as well?*

*Catherine: We do, yeah. Not as in like a pudding, but we always have chocolate or biscuits. Yeah, definitely. We tend to have it later on actually when she goes to bed, so she doesn't see. And I went to kiss her goodnight once and she'd woken up ... she wanted water or something and I came in and I'd been eating chocolate and I kissed her and she sort of looked at me ... and I thought she can smell the chocolate on me. I bet she knows now that's what I do of an evening. I just sit and eat chocolate (laughs).*

(Catherine, aged 37. Extract from photovoice interview)

The couple went to some lengths to prevent their daughter even seeing them eating chocolate, and the participant expressed concern over her daughter finding-out about her mother's eating habits. This attitude towards being a 'healthy eater' is both more critical and more performative than those depicted by James and Clifton. Catherine acknowledged that some of her eating practices were unhealthy and dealt with this by indulging them in private. To an extent being a 'healthy eater' is a preformed identity for her. In another example of the potential performativity of this identity, June, a retired nurse, explains below how she tried to set an example for one of her friends, who she described as having a particularly poor diet:

*June: OK. Well, some of my friends are, specifically V----- (friend). I tend to eat more obviously healthy food in the hope that she might take the hint. I know it sounds ever so snobbish, but when you know she's diabetic and I see her eating these dreadful greasy things and not even a pea in sight, let alone any cabbage or carrots and things like that I do get a bit er ... you know.*

(June, aged 69. Extract from photovoice interview)

Once again this is a conscious performance of healthy eating for the benefit of another, in this case June's friend. Discourses and identities around healthy eating are numerous and varied. The different interpretations and performances of 'healthy eater' demonstrated by participants here can be further explored with reference to Chrysochou and colleagues (2010) study of healthy



eating discourses. The authors identified the types of approaches that people adopted when constructing identities around discourses of healthy eating. 'Pragmatists' tended to express resigned or even indulgent attitudes towards their practices, encompassing less 'healthy' practices into their discourses of health (Chrysochou et al. 2010). This category might easily describe the approach taken by Clifton and James, as they tended to frame *all* of their practices as healthy. 'Common' was, as the name suggests, the most frequent approach, and describes individuals that tended to veer, depending on context, between idealist and pragmatist approaches (Chrysochou et al. 2010). This category could be employed to describe Catherine's inconsistent, performative and contextually dependent food practices as a 'healthy eater'.

The only self-labelled 'healthy eater' who rationalized and explained his healthy eating practices in any great detail was Lawrence, who could quite comfortably be described, according to Chrysochou and colleagues' categories, as taking an 'idealist' approach. 'Idealists' typically exercised a great deal of self-control and consistency to their eating habits and tended to have the most objectively 'healthy' eating practices. Having recently finished an extended meal-replacement diet and having lost a lot of weight he was very critical and exacting about his eating habits, as can be seen below:

*Lawrence: of I have something outside ... something More interesting, it's a treat rather than the norm. And the norm is fairly simple. Its potatoes, vegetables and some protein based thing. Erm ... it's actually dead easy ... .. and I consciously avoid foods that are very high calorie for my foods, except occasionally erm ... except as a treat really. Cos I know that to have one thing loaded with calories makes the rest of the day a bit of a nonsense, you know. So chocolate and stuff like that is gone really, yeah. Maybe ... occasionally I do have it occasionally but I'm just far more controlled. But I'm not ... I'm enjoying having it, probably more than I was before and just not going to a kebab shop once a week or the chip shop once a week or take away once a week. The only time I think*

*you know ... you think 'Oh, God. I'll just get that.' But before you know it you're there 3 times in the week and ... yeah. So yeah, yeah ... I am at the moment.*

(Lawrence, aged 43. Extract from photovoice interview)

Lawrence appeared to demonstrate highly regular and consistent practices and values across contexts. His photovoice interview revealed highly organized, planned and considered food practices. In order to eat 'healthily' he planned his meals, took packed-lunches to work and carefully monitored what he consumed with his own food diary. Some of his practices are described in the extract below:

*Lawrence: ... ..Yeah ... at work I just don't have time. I get in, have my breakfast and then there isn't really time. If I do stop and have lunch ... I take a packed lunch, yeah ... .. I've planned and I take a ... I take the porridge, I take a packed lunch box which has ... well I'll go through that in a minute, what I have in there. Erm ... 2 or 3 pieces of fruit and then and maybe one of these snack bars like cereal bars and unless people bring food into the office I don't eat anything else in the office. I work right by Tescos so it's kind of too easy to go and buy stuff. But I just find the time isn't there. I have enough time to just grab those foods and before I know it the day is gone. So I don't tend to look for food and stuff.*

(Lawrence, aged 43. Extract from photovoice interview)

For Lawrence, maintaining his identity as a 'healthy eater' was achieved through considerable effort and required a good deal of self-control. For the participants in this study, self-identifying as a 'healthy eater' did not imply a consistent set of food practices or values. In fact, some of their accounts were riddled with contradictions that were explained, by participants, in terms of context or exception. Food practices are dependent on which context they are performed in (Buckser 1999), as demonstrated by the complex and contradictory behaviours that participants weaved into narratives of food-related identities.

## 6.5 Summary

Food and meals are embedded in complex physical, social and cultural contexts (Mikkelsen 2011). The home, especially, is a site of individual, collective, family and consumption practices. Participants made decisions about eating and cooking in the context of often fraught home food practices and established identities and roles within the family. The pressures and conflicts presented by trying to provide family meals are well documented and can result in complex and contradictory practices. Blake and colleagues reported that most parents interviewed for their qualitative study expressed dissatisfaction over how they handled household food, eating, work and family roles (Blake et al. 2009).

Participants developed and deployed a range of approaches to resolve these conflicts. 'Erratic' routines-of-practice are characterised by highly individualized ways of thinking about food and, by either choice or force of circumstance, lack both planning and co-ordination with other family members. At the other end of the scale, a 'regulated meals' approach entailed more collective and co-ordinated practices. Family members tend to eat the same foods at the same times with very little choice offered to individuals. These participants took a very pragmatic view of cooking and eating, typically positioning cost and effort above enjoyment and individual preferences. They also seemed very concerned with passing on 'good' eating habits to their children and took a very different view of individual tastes and preferences than those who deployed 'what we fancy' routines-of-practice.

'What we fancy' represents the most fraught and complex approach to food practices. In these families the mother took responsibility for catering to individual needs and preferences whilst trying to ensure that the family ate together at meal times. Participants comment that this routine is very labour-intensive and can often prove to be very expensive. Family members, especially

children, are ascribed a high degree of agency over their individual eating practices and enjoyment of food is central to this approach. A variety of meals often has to be cooked for one sitting and a wide variety of foods bought and stocked at home.

The food-related identities that were formed and performed in home and family settings were varied. Some of the participants clearly and explicitly positioned themselves in relation to food consumption. Religious dietary practices, vegetarianism and restricted diets due to medication or chronic conditions were all discussed and referenced. Two identities in particular recurred frequently in the accounts given by participants. Being a 'fussy eater' or a 'healthy eater' were very well defined subject positions for these individuals. As would be expected, being a 'healthy eater' had overwhelmingly positive connotations. But it could also lead to complex social performances with individuals eating 'unhealthy foods' in private or 'healthy foods' very overtly in public to maintain this identity. 'Fussy eaters' described many of the same, or at least very similar, visceral likes and dislikes. Some participants seemed quite concerned and even regretful about their status as 'fussy eaters' because it prevented them from engaging in certain collective food practices. Others treated it neutrally and unproblematically.

Discursive identities, in relation to food consumption, provide individuals with a way of making sense of and narrating their individual practices. Food related identities exist in a reciprocally determinant relationship with eating practice, they shape each other (Bisogni et al. 2002). Self-identifying as a 'healthy' or 'fussy' eater influences both eating practices and narratives about eating practices. These discursive identities do not, however, indicate consistent or even always rational food practices, as demonstrated by the contradictory accounts and practices of participants. The next chapter will examine these contradictions in more detail and explore exactly how practices are shaped by, and compare across, particular contexts.

## **Chapter 7:**

# **The contextual pressures of consumption and home spaces**

## **7.1 Overview**

This chapter examines the specific contexts in which food routines-of-practice were investigated for this study: the consumption space and the home. It explores the ways in which these environments influence the food practices performed within them by drawing upon, and further developing, the findings presented in chapters four, five and six.

The routines-of-practice described in sections 5.3 and 6.3 describe the context-specific habitual behaviours that individuals adopt in certain spaces and when performing certain tasks. They characterise participants' food practices and describe how these are shaped by the physical and social environment. As discussed in chapters four, five and six, individual participants often gave inconsistent and context specific accounts of their food practices. They observed certain dietary practices in some contexts and not in others. Narratives of food related practices were riddled with contradictions and complex considerations. In part, these inconsistencies can be explained by the influence of place, by the social and physical context in which they are performed. This chapter will build upon the accounts of these contexts given in sections 5.2 and 6.2 and go on to illustrate how consumption and home spaces influence food practices

The supermarket environment was described and experienced by participants primarily as a consumption space. And, as such, participants are encouraged to behave and position themselves as consumers when interacting with the supermarket food environment. Consumption spaces are designed to

facilitate a pleasurable shopping experience and thereby increase purchases, even for utilitarian purposes such as food shopping (Howard 2007). These spaces promote shopping as a leisure activity, especially in large-scale corporate supermarkets, which are totalising environments of consumption (Everts and Jackson 2009, Jackson and Holbrook 1995, Gregson et al. 2002). The pervasive nature of these shopping environments profoundly affects the practices and identities that are performed within them.

Home spaces were explicitly described by participants as sites of privacy and family (see section 6.2). They were also, more implicitly, constructed as the sites of sometimes fraught, contested and complicated food practices. The home food environment is the major setting for instilling and shaping child dietary behaviour (Rosenkranz 2008), and it is parents who provide and maintain this environment (Birch and Davidson 2001). Parents enacted this responsibility by privileging and managing either collective or individualistic family food practices.

The role of place in shaping, dictating and constraining food choice will be explored by looking at the agency, planning and individuality of food practices across different contexts. This chapter will use data from both the go-along and the photovoice interviews to draw together and develop material discussed in earlier chapters and will specifically address the following research questions:

- How do consumption (supermarket) and home environments influence food-related behaviours?
- How do participants experience and perceive these environments and behaviours?
- How do food routines-of-practice and identities compare across contexts?

## 7.2 Summary of food related routines-of-practice and identities

This section presents a summary of observed and reported food-related behaviours across contexts. The table below (7.1) shows a participant-by-participant breakdown of food shopping routines-of-practice, home routines-of-practice, and any other identities or behaviours described in relation to food. As stated in sections 5.3 and 6.3 these routines-of-practice are not exclusive and participants often deployed a mixture of approaches. This table shows those that participants talked about most frequently and consistently and the ways in which they self-identified in relation to food and eating.

**Table 7.1: Summary of food related routines-of-practice and identities**

<b>Case by case summary of food related routines-of-practice and identities</b>			
<b>Participant</b>	<b>Food shopping routines-of-practice</b>	<b>Home routines-of-practice</b>	<b>Self-reported food related identities and other reported food behaviours</b>
Dave	Price promotion	Regulated meals	Reported that he used to be a chef
Melissa	Item by item / Working around the store.	Erratic	None
Lauren	Chaotic and reactive / Price promotion	Erratic / 'What we fancy'	Fussy Eater
Sue	Item by item	'What we fancy' / Regulated meals	None
Collette	Price Promotion	'What we fancy'	Reported having to severely restrict her diet due to medical condition(s) Vegetarian
Pamela	Chaotic and reactive	Erratic	Reported that she did not really enjoy food

Janet	Price Promotion / Working around the store	Regulated Meals / 'What we fancy'	Reported having to severely restrict her diet due to medical condition(s)
Pat	Working around the store / Item by item	Erratic / Regulated meals	None
Adam	Chaotic and reactive	Erratic	None
Jayanti	Working around the store	Regulated meals	Observed some Hindu dietary practices depending on context and which family members were present
Hasan	****Did not conduct a go-along	Regulated meals	Observed Halal dietary practices
Clifton	Price Promotion	Regulated meals	Healthy Eater
Brian	Item by Item	Regulated meals / 'What we fancy'	Reported having to severely restrict his diet due to medical condition(s)
June	Working around the store	Regulated meals	Reported having to severely restrict her diet due to medical condition(s).
James	Working around the store	Regulated / 'What we fancy'	Healthy Eater
Lawrence	Restricted and budgeted	Regulated meals	Healthy Eater. Reported losing 3 stones on a meal replacement diet.
Alan	Item by item / Working around the store	Regulated meals	Describes himself as a 'Food lover'
Diane	*** Go-along was conducted in a café.	What we fancy / Erratic	Fussy Eater. Reported that her mother did all the food shopping. Used to be a vegetarian
Lisa	Restricted and budgeted / Item by item	Regulated meals	None
Catherine	Working around the store	'What we fancy' / Regulated meals	Healthy Eater Vegetarian
Poppy	Item by item	Regulated meals / 'What we fancy'	Vegetarian 'Ethical' consumer
Tracy	Chaotic	'What we fancy' / Regulated meals	Fussy Eater Frequently diets to lose weight. Was dieting whilst participating
Caroline	Working around the store	'What we fancy'	Fussy Eater



Jaspreet	****Did not conduct a go-along	Regulated meals	Sikh dietary practices Vegetarian
Hollie	Restricted and budgeted	Regulated meals / 'What we fancy'	Participant was pregnant at the time of interview and reported that her diet had become significantly more healthily as a result.
Simon			Participant reported that he had latterly made substantial effort to ensure his partner (Hollie) ate healthily since she become pregnant.

The sites of home and the supermarket are not unrelated spaces for participants. They buy food at the supermarket to take home and eat. Needs, demands, habitual preferences and lists are brought from the home to the supermarket and enacted through purchases. Both sites are integral to individual and family food practices. Yet, as can be seen in the table above, there are varying degrees of consistency across cases. A participant may have described a very ordered and planned approach to eating in the home yet behaved in a rather passive and chaotic manner when in-store. While other participants such as Lisa, Lauren, Lawrence and Pamela had fairly consistent high or low-agency approaches in both spaces. The remainder of this chapter will examine these spaces in more detail, explore how they influence practice and see how these practices vary across contexts at the individual level.

### 7.3 Consumption spaces

As outlined in section 2.3, when shopping for food, food can be regarded as a consumer good like any other. By implication, the food environment is also a consumption environment. The supermarket, as a large retailing institution, is the dominant site of the contemporary shopping experience (Bowlby 1997). People experience and perceive these sites in very particular ways. Participants described the supermarket environment in terms of the two context-specific

characteristics of an extended range of choice and interaction with price promotions (see section 5.2). These features were frequently and explicitly used to define the shopping experience and as criteria for assessing and evaluating different stores. The supermarket environment prompted certain actions and responses, such as engaging in purchasing decisions that the extended range of choice offered. Without planning and agency these environments proved so pervasive that participants acted as passive consumers, being guided around the store by offers and displays (see the low agency routines-of-practice described in sections 5.3.1, 5.3.2 and 5.3.3).

The supermarket, as a consumption site, is a very structured and designed space that is intended to facilitate certain trajectories and patterns of movement. There is a well-established schema for shopper travel behaviour within a supermarket. The typical shopper is assumed to travel up and down the aisles, stopping at various category locations, deliberating over products, making a choice and then continuing in a similar manner until the path is complete (Larson et al. 2005). Marketing techniques such as end-of-aisle displays and the strategic placement of familiar brands to increase aisle ‘traffic’ are designed to both perpetuate and most effectively exploit this trajectory (Larson et al. 2005). This is clearly reflected, for the participants of this study, in the ‘working around the store’ routine-of-practice depicted in section in 5.3.3

### **7.3.1 Shopping for leisure and pleasure**

In addition to guiding the movements and decision making of customers, supermarkets are designed to make shopping, even for everyday items, as pleasurable and engaging as possible. The idea of shopping for pleasure and as a leisure activity has been discussed in sections 2.3, 5.2.1, 5.3.1 and 5.3.2. Shopping has both pragmatic and pleasure-seeking dimensions, which become intermingled within the *practice* of shopping. For example, shopping is

pleasurable because it can involve leisurely spending time away from the spheres of home or work and being free to enjoy the activity (Turo-Kimmo and Mäenpää 1997). Part of this enjoyment is derived from looking around at the range of products and the spectacle of lighting, colour and displays that characterise these spaces (Bowlby 1997, Leach 1984). Howard (2007) points out that any kind of shopping may give pleasure to some people and that some individuals seek the pleasurable outcomes of shopping more than others. Further, different store environments can influence emotions and perceptions (Howard 2007). In this vein, shopping for food can be almost a means of entertainment for individuals and many of the participants reported that they enjoyed shopping for food as an activity, as demonstrated below:

*CT: Do you think how you shop has changed since you've had P----?(daughter)*

***Poppy: Yes, definitely. I don't enjoy it as much. I love shopping really but I don't enjoy it as much ... not with her ... and I just do it much quicker.***

**(Poppy, aged 43. Extract from go-along interview)**

Poppy explained that since having her daughter, now nursery aged, she could not take her time over food shopping as she used to. The pleasure she derives from the act of shopping for food in the supermarket space is affected by her family context. Caring for her daughter and managing her behaviour means that she cannot fully interact with the shopping environment. Alan, on the other hand, a retired volunteer-worker, does have the time to enjoy food shopping and interacting with the features of that environment. Below, he described how he liked to take time over his food shopping and found the experience pleasurable:

*CT: How often do you normally do your food shopping?*

***Alan: Once a week. I always go, I always go ... I always go food shopping once a week.***

*CT: Is that normally the week or the weekend?*

*Alan: Er ... during the week yeah ... I try and avoid them, supermarkets; at the weekend if I can do ... I ... I enjoy shopping I must admit. I do ... I love erm ... what ... in the morning ... I like it to be stress free ... If ... if ... I'm one of those people, I don't know about you ... if I ... I can't get parked anywhere ... erm ... stress levels go up and it's busy. I think shopping should be pleasurable.*

(Alan, aged 51. Extract from go-along interview)

Both Poppy and Alan enjoyed their planned, regular food shopping. As can be seen in table 7.1, both employed relatively high agency approaches to food practices. In fact, they both used shopping lists and made relatively few unplanned purchases. Yet they still enjoyed the practice of shopping and the consumption environment of the supermarket. For both of these participants, the supermarket environment was a pleasurable one in which they enjoyed looking around at their leisure. Other participants reported deriving pleasure from *unplanned* food shopping trips and *unplanned* purchases. This is demonstrated in the quote from Adam below, where he describes a trip to Asda with one of his friends:

*CT: What's this? indicating plate 7.1*

*Adam: (laughs) This is my favourite thing from Asda. Caramel shortcake ... its lovely ... 46p! I ate it in the car*

*CT: Do you drive?*

*Adam: No. J---- (friend) drives. He lets me drive his car sometimes... but ... not legally (laughs). I've got a provisional, but he's gonna put me on his insurance soon as a learner as a learner driver anyway.*

*CT: Does he normally take you shopping if you ask him?*

*Adam: Yeah. I don't like ask him "come over and take me shopping" but if he comes out then we'll probably go to Asda .... And a can of pop indicating plate 7.2*

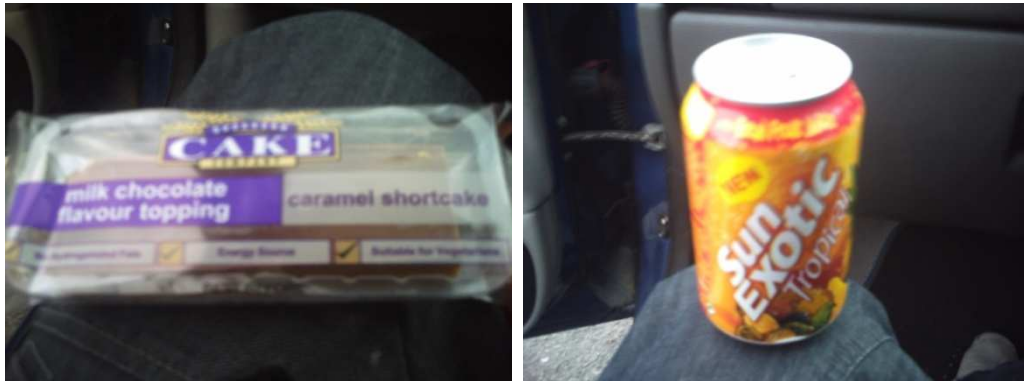
*CT: How much do you think you spent in Asda that day?*

*Adam: Well ... That was 39p (drink) and that was 46p (shortcake)! I didn't buy any shopping ...we were just driving around ... ..*

*Adam: ... .. If James comes up we'll go for a drive in his car ... just to get out of here ... somewhere, like we'll go to Asda.*

(Adam, aged 18. Extract from photovoice interview)

**Plates 7.1 and 7.2: Photograph by Adam from his food photo-diary**



As discussed in sections 5.3.1, 6.2 and 6.3.1, Adam managed on a limited income from social security benefits and reported that he had little to spend on food. During the go-along interview he described the difficulty and confusion he experienced when trying to buy enough food to last until he next received his benefits (see section 5.3.1). Yet, in the extract above he described food shopping for recreational purposes, as something to do while he and his friend were 'driving around'. Although he bought and spent very, little he described shopping as a leisure activity. This is very different from the way he spoke about food shopping when we were in the same store, Asda, during the go-along interview a few weeks later. He gave at times quite a bleak account of his food shopping practices during the go-along interview, as can be seen below:

*Adam: Yeah. I always sort of get the same things. And ...erm ... I have things I want to buy and I can't. Like cereal and that. I can't ... cereal's quite expensive ... and then buying milk as well ... I don't really buy milk at all ...*

(Adam, aged 18. Extract from go-along interview)

Both the go-along interview and the outing described in the photovoice interview above were food shopping trips and both happened in the same place, Great Bridge Asda. However, these trips differed in that they served contrasting purposes. The go-along was a semi-regular food-shop that Adam did when he could afford it and after receiving his benefits. The shopping trip with his friend, by contrast, was recreational. In the latter he was describing the supermarket explicitly as a consumption space and, therefore, as a leisure space in which he could buy his *'favourite thing'* rather than *'shopping'*. Howard (2007) describes this as *'leisure shopping'*, as differentiated from *'utilitarian shopping'* (Howard 2007) or *'provisioning'* (Miller et al. 1998) which is undertaken to purchase everyday necessities as and when they are needed.

### **7.3.2 Identity and the consumption space**

Shopping is a significant realm of *'public behaviour'* and a predominant aspect of people's lives in general (Falk and Campbell 1997). As such, it can be used to express identity, values, aspirations and belonging. Put simply, what we buy can be an expression of who we are and who we would like to be. (Jackson 1999). One of the ways in which the supermarket environment does influence purchasing decisions is through opportunities and encouragement to express identity through the act of consuming. Within marketing and consumer research there is an established view that through consumption people are empowered, to an extent, to *'make up'* their identity or pursue aspirational identities (Shankar et al. 2009). For Poppy, both her home and food shopping practices were a vital part of her identity as an ethical person. She frequently talked about food

practices in the context of animal welfare and environmentalism, as can be seen in the extract below:

*CT: Your sister is vegetarian as well?*

*Poppy: My whole family apart from my dad. I was the one that sort of told them ... you know I was in to oh ... all sorts of animal aid and things, anti-hunting and everything and er ... I converted them all apart from my dad.*

.....

*CT: So why the soya? Do you not eat dairy?*

*Poppy: No. For similar reasons I used to live ... I went to school where there were dairy cows opposite and I heard the baby ones cry... They all cry for each other cos they're taken away from the mothers so that we can have the milk and they're ... that just upset me and I thought 'Right, I'm not drinking milk anymore.' I'm too sensitive.*

.....

*Poppy: I don't eat anything made by Nestle because er ... they test on animals. I'm just trying to think ... in some of their products they probably test ... I can't remember now ... I have these things stuck in my mind from when I stopped eating it ... they're big companies that test on animals and things ... all my toiletries are not animal tested.*

(Poppy, aged 43. Extract from photovoice interview)

Poppy enacted her identity and values as an ethical person in the supermarket. As can be seen in this extract from her go-along interview a few weeks later:

*Poppy: I use different supermarkets depending on what I want. For fresh fruit and veg I go to Sainsbury's in Black Heath, just because it's not all packaged in plastic bags. Everything that tends to be packaged is in ... er compostable bags. Erm ... yeah, the main reason really. I always take my plastic bags and refill those.*

(Poppy, aged 43. Extract from go-along interview)

And then later:

***The participant stops by the soya produce and selects chocolate soya milk (plate 7.3).***

... ..

***The participant puts 6 cartons into the trolley. Then she picks up the ordinary organic soya milk (plate 7.4) and puts four cartons in the trolley.***

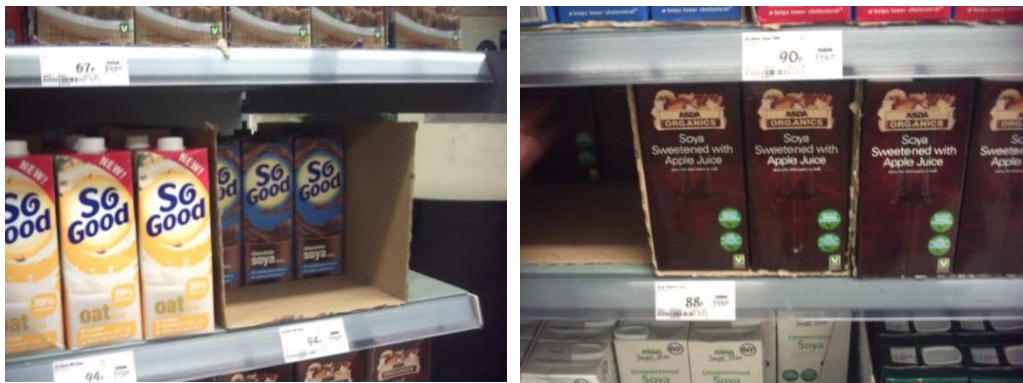
***Poppy: I never look at the price but it has gone up a lot. It used to be 70 (pence), now it's 88.***

***CT: Do you look at the prices generally when you go shopping?***

***Poppy: Er ... not for things that matter to me like organic stuff. I sort of compare prices for that chocolate stuff because they sell that in lots of ... you know lots of shops that I go to.***

(Poppy, aged 43. Extract from go-along interview)

#### Plates 7.3 and 7.4: Photographs of soya milk displays (by CT)



For Poppy, the food that she bought helped constitute her values and beliefs. At some points her concern to consume ethically even took precedence over factors such as cost and convenience, as demonstrated above. The organic products on offer and the range of brands to choose from, in the supermarket, meant that she could make purchasing decisions that validated her beliefs. The extended range



of choice that characterised the supermarket environment for participants (see section 5.2) contained products of ‘distinction and difference’ (Bauman 1988) (p.808), that could be purchased in order to perform an ethical identity. Modern identities are, in part, constructed through the symbolic world of consumption and enacted through highly individualised ‘lifestyle’ choices such as purchasing decisions (Jackson 1999).

## **7.4 Home**

While the supermarket was consistently treated as a consumption space by participants, home, by contrast, was often depicted as a private and/or family space. As discussed in section 6.2, home spaces afforded individuals the opportunity to eat away from the gaze of others and to temporarily escape the constraints of social eating (Roth et al. 2001). Participants reported that, when eating in the home, they could really enjoy their food and eat at their leisure. The privacy and control that home spaces provided often allowed participants greater scope to express and indulge their personal food preferences and food related identities.

Implicitly, home was also constructed as a site of responsibility, especially by those with children, which is unsurprising given the moral discourse that surrounds family food behaviours (O’Doherty Jensen and Holm 1999). Home is the place in which the ritual of family meals is performed. As outlined in section 2.4.1, family environments are the key contexts for the development of children’s food preferences, patterns of food intake, and eating styles (Birch and Davidson 2001). Aspects of the family food environment have been associated with dietary outcomes likely to promote overweight and obesity in children (Campbell et al. 2006, Campbell and Crawford 2001, MacFarlane et al. 2009). Regular family meals have been associated with the appropriate socialisation and development of children (Fulkerson et al. 2006b). Parents

create food environments for children's early eating experiences with food and eating (Kral and Rauh 2010). Parents, in this study, reported that they encouraged family meals and tried to set an example with their own eating practices. The theme of responsibility for the home food environment was a consistent feature of parents' narratives. The remainder of this chapter will examine the different ways that participants interpreted and enacted responsibility for family food practices. While some parents performed responsibility by regulating their children's food practices and the home food environment, others sought instead to take responsibility for managing and accommodating their family's individual preferences. These two quite different interpretations of responsibility are explored in the sections that follow.

#### **7.4.1 Responsibility and regulation**

How children were fed and what they were allowed to eat at home was an important and sometimes sensitive topic for parents. They consistently positioned themselves as responsible parents and discursively constructed home food practices in line with this. As discussed in section 6.4.2, Catherine described herself as a 'healthy eater', she explained going to some lengths to ensure that her nursery-aged daughter developed healthy eating habits and did not see her parents eating take-aways or sweets. At the beginning of the photovoice interview the participant seemed embarrassed that her daughter had gone to MacDonald's and was quick to contextualise the visit as a very rare treat:

*Catherine: What was I doing? I think I was ... That's it. My husband took K--- (daughter) out. He took her to MacDonald's, that's really bad ... in, er ... a study like this (laughs)*

*CT: No, no (laughs).*

*Catherine: We don't normally. She's been to MacDonald's 3 times in her life and she's 3 (laughs).*

*But erm ... yeah, he took her to MacDonald's, then the park ... or the Woods ... wherever it was ... cos I had an application form to fill out for an interview.*

(Catherine, aged 37. Extract from photovoice interview)

Catherine tried to set a good example for her daughter by establishing healthy home food practices. She went on to describe socialising with other parents who held similar attitudes towards their children's diets:

*Catherine: ... .. But I think it is ... definitely makes it easier, the fact that we're all quite similar. We'll all put fruit out as well for the kids. When we get together and they'll be a packet of biscuits but there'll be fruit as well. Sometimes they might bring round a punnet of strawberries or something like that.*

.....

*CT: Is that part of what makes your friendship group work ... shared attitudes?*

*Catherine: Yeah, I think so yeah. It would help towards it definitely because it would make it more relaxed then when you are together and it doesn't become an issue and you don't feel like I suppose ... that anyone's being judgmental about you, cos if anyone's very, very strict you know that would be difficult as well because you know if I'm allowing her to have a biscuit and things like that it's probably be quite difficult to be with someone who doesn't allow any of that. You know you might feel like you was being judged a little bit.*

(Catherine, aged 37. Extract from photovoice interview)

Snack foods such as biscuits, chocolates and crisps were often talked about by parents in quite a contradictory way. Some parents, including Catherine, were quick to stress that 'snacks' or 'treats' were not part of their children's overall diet.

*Catherine: ... .. so she (daughter) doesn't I suppose look on crisps and chocolate as being part of her diet. It's just*

*a treat but it's not part of her diet.*

***The participant's daughter comes back out into the garden to talk to her mum.***

***Catherine: She sees it (snacks) as a little treat and it's something ... you know er ... something nice to have ... cos I think if you limit too much then they just go absolutely mad for it then when they do get hold of it. But, erm ... yeah she does sort of er ... she definitely does eat more junk food now than she used to, but not too much I think ... .. So ... yeah, it's sort of every day that way she does have something.***

(Catherine, aged 37. Extract from photovoice interview)

Although her daughter ate some 'junk' everyday Catherine maintained that it was not part of her diet. Similarly, Jayanti spoke in a comparable way about the foods her children ate.

*CT: Do they (children) ever have dessert after dinner?*

***Jayanti: Sometimes ... er ... They don't really have dessert dessert. If we have anything it'll be a cup of tea and a cake. We don't have dessert dessert. They eat ice cream in the summer and stuff. Or else ... I make banoffee pie and things like that, they'll eat that. But they don't really have dessert dessert.***

*CT: Do they have much of a sweet tooth ... the kids?*

***Jayanti: They do. When I say that ... They don't not eat chocolate. They do eat chocolate. I might buy 2 packs to last. You know you get the 4 packs or whatever, that's between 4 of them. That's got to last them the week. So, apart from that, they don't really ... They do have biscuits (laughs). But apart from that they don't really eat that much cake.***

(Jayanti, aged 45. Extract from photovoice interview)

Like Catherine, Jayanti's narrative is somewhat contradictory. She describes the confectionery that her children eat after meals, but is loathed to describe them as 'desserts'. She appears keen to construct home food practices

as 'healthy' despite the regular inclusion of confectionary. Her discursive positioning of family food practices is further illustrated in the extract below, in which she explains that the family rarely eat food prepared outside the home:

*CT: And do you eat out a lot?*

*Jayanti: Er ... Maybe once a month*

*CT: And where would you go?*

*Jayanti: Nandos is the kid's favourite. They love Nandos. We went there Sunday actually. It's my niece's birthday. So my sister and her kids and me and my kids we all went Nandos. Birthdays we all go out. Special occasions really to be honest. We don't just ... don't really go out. We do sometimes ... just for the sake of it. But it's normally a special occasion, yeah.*

(Jayanti, aged 45. Extract from go-along interview)

A few weeks later, during the go-a long, her husband unwittingly contradicted this narrative and the couple had a short disagreement about how much take-away food their children ate:

*CT: So what do you find you buy more of when they're off (from school)?*

*Jayanti: Stuff for their lunch because normally they have sandwiches or whatever ... cos I've been off at home. I've been coming home to 'I've got nothing to eat' this week. It's like they've been starved.*

*Husband: I end up taking them to take-aways.*

*Jayanti: We don't have take away that often.*

*Husband: Oh, well they've had it lately ... a lot (laughs)*

*Jayanti: They have not*

*Husband: Since they've been off.*

*CT: What's a lot?*

*Jayanti: We normally try to limit to once a month*

*Husband: Yeah once a month*

*Jayanti: But I think sometimes when they are off, we probably will just go and nip in and get a pizza or something. No, the other week because I went out, cos he (husband) didn't want to cook so he took .... He gave them a take-away because he couldn't be bothered to cook, that's why. That's why it's been more (laughs) ...*

(Jayanti, aged 45. Extract from go-along interview)

Food practices in the home and discursive accounts of food practices in the home, like the extract above, were governed by issues of responsibility and intertwined with constituting an identity as a 'good' parent. Moral discourses surrounding healthful family meals are reproduced and perpetuated in the accounts of these participants. A key way in which participants described managing their home food environment and, thereby, enacting their responsibility in these spaces was by regulating their children's diets. For example, Lisa and her husband described very rigid values and practices when I asked if they ever allowed any of the children to eat different evening meals from everyone else:

*Lisa: But I hate doing that. I ... I don't allow my children to do that. If we're having beef that's what we're having. So if his (husband's) brother comes over and we do separately for him then it's a bad message for my kids. "Oh, S----- (brother)'s not eaten it."*

*CT: Do you have him over for dinner a lot?*

*Lisa: No (laughs)*

*Husband: No*

*Lisa: Or if we do you know we won't do beef we'll do chicken or something else*

***Husband: We'll do chicken or something so it doesn't look like we've given in.***

(Lisa, aged 38. Extract from photovoice interview)

In the quote above the participant and her husband explain how they dealt with the disruption of the husband's brother coming over to dinner, as he had very particular tastes. They did not like the 'message' it sent to their children or that it might look as if they had 'given in' by allowing individual demands to dictate what was cooked. It was important that they were in control of family food practices and that everyone ate the same at meal times (see section 6.3.3). For these participants, controlling and regulating what and when their children ate was central to instilling appropriate eating behaviours and habits into their children. Lisa, Jayanti and Catherine all deployed the 'regulated meals' routine-of-practice, a high agency approach. Yet, only Lisa also adopted a high-agency and planned approach to food shopping (see table 7.1), further demonstrating the lack of consistency in participants' behaviour across contexts.

#### **7.4.2 Responsibility and individuality**

While regulation of the home food environment was described by the participants in the previous section as a means of enacting responsibility, other participants described quite a different performance of responsibility. For these individuals, home was a space in which personal tastes and food related identities could be expressed. Instead of fostering a healthy home food environment by regulating their children's food choices and practices, these parents express their responsibility and relationships by indulging and accommodating the personal preferences of family members. Food is a powerful metaphor for love and care within families and family meals provide opportunities for communication between parents and children (Story 2005). In particular, the participants who adopted 'what we fancy' routines-of-practice explained that they worked very hard to accommodate individual preferences at

meal times, and derived much satisfaction from successfully catering to everyone's needs (see section 6.3.2).

The expression and accommodation of individual food practices were central to many accounts of food practices in the home. Individualism, in cultural terms, means placing the individual at the centre of a framework of norms and beliefs and emphasising personal freedom and choice (Eckersley 2006). This is particularly evident for participants who described themselves as 'fussy eaters' (see section 6.41.). They all explained how their food preferences made them unique. Also, the home was the only site in which these identities could be performed comfortably. Tracy, in the extract below, quite cheerfully commented that she doubted if I'd ever met anyone like her before:

*Tracy: ... .. I will eat a cottage pie but you know sometimes when you put a lot of onions in ... I tend to pick bits out (laughs).*

*CT: Does that go down well indoors?*

*Tracy: Yeah, they know what I'm like. They're used to me now (laughs). I mean it does sound like I'm really strange, but when I go home it's really normal. You know you just ... yeah ... yeah ... I bet you've never come across anyone like me before (laughs)*

(Tracy, aged 33. Extract from photovoice interview)

While Tracy reported that her eating practices were 'very limited' and 'strange' (see section 6.4.1), at home they are 'really normal', and readily accepted by her family. Similarly, Caroline explained how her and her family's eating habits made them unique:

*Caroline: ... So it's not, you know ... we went away with some friends and we were a nightmare cos they said 'I've never known a family ...*

*CT: All of you?*



***Caroline: The whole family, cos we went away to America and they said 'I can't believe everything you asked for something had to be taken off or added.' You know it was like 'can I not have mine with that ... can you take that off mine'***

**(Caroline, aged 52. Extract from photovoice interview)**

As Caroline describes in the extract above, outside of the home setting (in this case on holiday), these individualised practices become problematic and difficult to maintain. In the home these preferences can be 'managed' but managed in a very different way to those described in the previous section. As discussed in section 6.3.2, the parents who deployed a 'what we fancy' approach to household food practices took responsibility for ensuring that their family enjoyed the meals they prepared, which often resulted in preparing multiple meals 'on demand'.

Parents helped to reinforce and even celebrate the individualism expressed by their children in accepting and catering for complex sets of likes and dislikes. The home was a site in which these like and dislikes could be fully expressed and performed. As discussed in section 2.4.1, there is an ever increasing range of food types and sources to choose from, and food eating practices are becoming progressively more individualised (Warde 1999, Murcott 1997). Wills and colleagues argue that parents preparing meals 'on demand' reflects the increasingly flexible nature of contemporary lifestyles and relationships between family members (Wills et al. 2008b). In a further example of this, Lauren explains below that her mother would typically cook her 'whatever' she wanted for dinner:

*CT: ... How do you decide what to eat?*

***Lauren: Usually whatever I can be bothered to do or just like ... if I say 'I'll have this', my mum will make it for me***

**(Lauren, aged 23. Extract from photovoice interview)**

As can be seen in table 7.1 (and discussed in section 6.4.1) Lauren was a self-identified fussy eater. She had a very specific list of preferences and practices and her mother, as she states above, would cook Lauren meals ‘on demand’. Outside of her home environment, however, Lauren’s ‘fussy eater’ identity was less clear and she was more willing to eat a wider range of foods, as she explains below:

*CT: Do you eat more when you go over to your Aunty S----?*

***Lauren: Yeah, probably ... yeah.***

*CT: How is it different from what you eat indoors?*

***Lauren: usually more rice, a lot of rice cos her husband’s Jamaican ... and peas ... So it’s like there’s usually rice, but whatever you have there’s always usually carrots on it and you think ‘that’s a bit of an odd mix.’ But it always goes. It’s gorgeous.***

***The participant breaks off to speak to the children in her care.***

*CT: Do you think where you are and who you’re with affects what you eat?*

***Lauren: Erm ... if we go out for something to eat cos wherever we go I’ll have a cooked dinner. I love my cooked dinners that much. But if I’m round somebody’s house then I’d have whatever they give me, so it probably would. Wouldn’t necessarily be something I’d choose ...***

*CT: So when you say you’re a fussy eater is that a fussy eater all the time and everywhere?*

***Lauren: Erm ... no. Sometimes, if I’m at somebody’s house and I don’t like something I won’t eat it but normally if it’s ‘I don’t like that’ ... if somebody gives me it on a plate in somebody’s house, I’ll eat it.***

*CT: Can you give me an example of that?*

***Lauren: Pasta. I like pasta, but you know some days you***

*just think 'Oh, I hope I ain't got pasta.' And Auntie S---- does this salmon and spinach pasta and I've gone round there and thought 'Oh, I couldn't eat'. Like it's something I couldn't eat and then it gets dished up and I think 'Yeah, I'll eat it, no problem.' I'll eat that (laughs). Whereas if I get home and I got pasta I'll think 'Oh, I don't want it. I'll have it later.' And then I probably won't.*

(Lauren, aged 23. Extract from photovoice interview)

When away from her own home and her mother (who cooked most of her meals), Lauren reports that she was much more likely to simply eat the food she was given. Her identity as a fussy eater was, to an extent, context specific. The level of individuality and personal choice she expressed in the home was not reproduced in other settings.

Home was implicitly constructed as a site of responsibility by parents. For participants such as Lisa, Jayanti and Catherine this responsibility was enacted by regulating and monitoring the family food environment and providing structured and collective eating practices. For others, such as Caroline, they enacted responsibility by managing and accommodating their children's food preferences. Lauren and Tracy, both of whom lived with their parents, had their complex likes and dislikes fully accommodated and accepted in the home setting. These contrasting enactments of responsibility demonstrate the complex and conflicting demands that shape home food practices. Home is a site of both collective and individual practices (Valentine 1999b).

## **7.5 Comparing behaviours across the contexts of home and the supermarket**

As mentioned in section 7.2, there are varying degrees of consistency across the contexts of home and the supermarket. A high agency approach in the home did not necessarily translate into a high agency food shopping routine-of-practice.

Although narratives and enactments of responsibility, like those discussed above, featured heavily when participants spoke about home, they were much less prominent in the supermarket environment. Participants who regulated their family's food practices in the home sometimes took a less structured approach when food shopping. This section will examine how these inconsistencies and contradictions revealed themselves at the individual level.

As highlighted in section 7.4.1, Jayanti's food related narratives and behaviours were somewhat contradictory. She reported a regulated, collective and planned approach to cooking and eating in her household (see sections 6.3.3 and 7.4.1 and table 7.1). The family ate regular shared meals that she planned and cooked. In the supermarket, however, Jayanti and her family displayed a much more individualistic approach to food practices (see section 5.3.3). When in the supermarket she consistently asked her son and husband what foods they wanted and sent her son to go and choose confectionary and savoury snacks, as can be seen below:

*Jayanti: Got bacon? Want more bacon?*

*Husband: Yeah*

And then later:

*Jayanti: ... .. Get 2 of those for yourself, not those ones (to son, referring to sweets).*

*He holds up a packet of sweets for approval*

*Jayanti: ... .. go on then (to son as he puts them in the trolley).*

... ..

*3L: Do we need any biscuits? (to son) Go and pick your biscuits what you want*

*Son walks back down confectionary aisle*

(Jayanti, aged 45. Extract from go-along interview)

Although their home food practices were ordered and collective, in the supermarket she allowed their son to express a degree of agency and choice over the snacks purchased for the family. The supermarket, with its extended range of choice, provides a space in which individual food preferences and desires can be met. As can be seen in the quotes above Jayanti frequently asked her son to ‘go and pick’ something for himself or go and ‘get those for yourself’. Yet, when she spoke about this in her photovoice interview she described a more moderate and regulated approach:

***Jayanti: Er ... They do eat chocolates but not loads cos I buy some at the weekend and that's got to last them the week, the chocolate. That's it they've got to make it last. Same with the crisps, but I think they're more savoury to be honest. They love their crisps.***

**(Jayanti, aged 45. Extract from photovoice interview)**

Her food practices appear contradictory across these two different contexts. In her photovoice interview Jayanti talked about buying a limited amount of sweets and crisps for the family at the weekend and that it had to ‘last them the week’. Once in the supermarket, however, she allowed her son to choose, suggest and negotiate the purchase of confectionary and savoury snack foods. Also, the go-along shopping trip did not take place at the weekend, but on a Friday. This particular go-along was both one of the most difficult to conduct and was also peppered with contradictory statements, disagreements between participants and unanswered interview questions. This could be attributable to the pervasive nature of the supermarket environment and the extent to which Jayanti and her family chose to interact with it. As discussed in section 5.3.3, she employed the relatively low-agency food shopping routine-of-practice of ‘working around the store’, in which they were engaging with price promotions and purchasing on impulse. Both Jayanti and her husband enjoyed shopping as an activity in and of itself:

**Jayanti:** *My daughter was saying that, 'do online shopping', but it doesn't appeal to me.*

**CT:** *Why's that?*

**Jayanti:** *I don't know. I think it's what you're used to isn't it?*

**CT:** *Yeah.*

**Husband:** *I think she probably finds it therapeutic*

.... ....

**Husband:** *I mean, my brothers don't like it. I don't mind. To me it's relaxing, so ... it doesn't bother me.*

(Jayanti, aged 45. Extract from go-along interview)

Throughout the trip the Jayanti's son constantly approached his mother with a variety of products to see if she would let him add them to the trolley. All three family members present were exercising individuality in this way, by selecting items based on personal preference and impulse. Jayanti was quite critical of her husband's purchasing decisions and commented that she always bought more when he went shopping with her, as can be seen in this extract:

**CT:** *So what might you end up buying if your husband comes shopping that you wouldn't if it wasn't here?*

**Jayanti:** *I just get what we need. He puts in extra*

**Husband:** *I put extra what I need*

**Jayanti:** *What he needs for himself. Normally if I do shopping I just put in what we need.*

**CT:** *What stuff do you end up with that you don't need?*

**Jayanti:** *He buys a lot of tinned stuff. What I call rubbish. He buys like stews and things and ... ..*

.... ....

**Jayanti:** *Dog meat, as I call it (laughs)*

(Jayanti 3L, aged 45. Extract from go-along interview)

This individualism and disagreement is quite different from her descriptions of home food practices as collective and highly planned, as demonstrated in her account of planning and cooking meals for the family:

*Jayanti: Er ... .. So on Saturday I'll cook a curry, like a lamb curry, and put a pot for her (daughter). Sunday, we have a roast normally on a Sunday. My son don't like roasts. That's another thing*

*CT: Your eldest?*

*Jayanti: Yeah. There's meat in there but he doesn't like roast dinners. But everyone else'll love it. Er ... then Monday, I do try and do fish on a Monday. Try and do it every week*

... ..

*... Tuesday's is veggie day so I'll just cook a vegetarian curry.*

(Jayanti 3L, aged 45. Extract from photovoice interview)

The contradictory narratives and inconsistencies in behaviour can be partly explained by the influence of context. As discussed in section 7.3.1, shopping environments can be sources of pleasure both by encouraging relatively carefree purchasing choices and by providing social interaction as part of the shopping experience (Jackson and Holbrook 1995). Jayanti and her family interacted with the supermarket environment and, in choosing items on impulse and based on personal preference, expressed a degree of individuality that did not appear in Jayanti's descriptions of the home food environment. Context is an important factor in shaping food practices, even if people are not always aware of it. Supermarket spaces are highly designed and can influence behaviours and decision making in a myriad of subtle and interweaving ways, as described in chapter five.

In a further example of inconsistencies across contexts, Dave, who managed on a very limited budget, demonstrated low agency routines-of-behaviour in the supermarket and yet a very ordered approach to cooking and eating at home (see table 7.1). Like Jayanti and her husband, Dave reported enjoying the supermarket environment and the activity of food shopping. In the quote below he describes how he likes to ‘look round’ food shops and seek-out novel products:

*CT: So you don't come out with a list?*

***Dave: I have been known to carry 26 bags back. I just went shopping and I thought well I got to get this, I got to get that. It was almost like ... I find retail therapy very therapeutic.***

*CT: You like shopping?*

***Dave: But I'm not keen on clothes shopping or anything like that. I like to look round food shops and see what's new on the market. I do that quite regular, see if there's any new stuff or that on the market and I'll buy it to have a look at it. Or I'll walk round utensils shops a lot and I think I haven't seen one of them before, I'll look at them.***

**(Dave, aged 45. Extract from go-along interview)**

Dave was quick to point out that it was food shopping specifically, as opposed to shopping for any other type of product, that he found enjoyable. As can be seen in the quote above, he reported that he sometimes bought much more than he needed. By contrast, in his photovoice interview he described a very carefully planned approach to cooking and eating at home. He was fastidious about not wasting food and often ate similar meals for consecutive days to avoid doing so (see section 6.3.3 and plates 6.16, 6.17 and 6.18). Being frugal with food was central to his home food practices, as can be seen in the quote below:

*CT: Why did you take a packed lunch when you went round there (to his daughter's house) on the Friday?*



*3A: Because I'd already made the sandwiches. I'd made them and she phoned and says 'Dad, I need you now.' She said E--- (son in law) will be with you any second.' She phoned me and said he was just getting some petrol from the garage, which is only just here. So I said OK. So that was it, I just put it into a sandwich bag and took it to my daughter's and thought I'll eat it when I get there.*

*... ..Yeah. If I've already made something I won't throw it away.*

**(Dave, aged 45. Extract from photovoice interview)**

This high-agency and careful approach to food is not consistent with his low-agency food shopping behaviour. As can be seen in table 7.1 and section 5.3.2, Dave employed relatively passive and contextually-driven food shopping routine-of-practice ('price promotion'), and based his purchasing decisions on special offers and reductions. For Dave, the context and environment in which food practices were performed had a considerable impact upon his perception and performance of them. The very pervasive environment of the supermarket encouraged shopping as a leisure activity, rather than as a domestic or health related practice. In the supermarket Dave behaved like a consumer and derived pleasure from consuming and, specifically, from interacting with special offers.

As discussed in section 7.3.2, just as consumption can foster expressions of identity, it can also challenge them. Consumption spaces are, after all, designed to promote and increase purchases. Participants encountered frustrations when their identities or lifestyles dictated that they *not* purchase certain products. Falk and Campbell (1997) point out that the relationship between consumption and identity is not a one-sided process. People do not uncritically engage in self construction by a process of acquiring commodities. Consumption also challenges and problematises the identities and values that individuals hold. For example, Janet, when interviewed at home, reported

having to adhere to a very restrictive diet for health reasons and described, in detail, the consequences of exceeding these restrictions:

*Janet: ... .. If you don't eat a lot of food you're alright. But if you just eat ... something more than you should do the tablets don't work properly. And you take them at night, every 8 hours and they're very painful. If you ... if you think ... if you think you can get a good night's sleep ... cos I have to take Amitriptyline as well ... that's ... well they give it to you for anti-depressant. But they found, about 20 years ago, they give it people who've got leukaemia and that. It's got a mild erm ... pain relief in it and if you can get to sleep straight away, you'll sleep over that pain. But if you wake up ... and 3 'o' clock ... that's about the time my bowels are starting to move ... and you won't sleep again. I haven't slept for 2 nights. It's ridiculous, yeah. It's a nightmare it really is.*

(Janet, aged 63. Extract from photovoice interview)

Yet, when eating in social situations, she regularly exceeded these restrictions (see section 4.4.1.2). In a social context the food she ate became a secondary consideration. By contrast, when food shopping she explained how the supermarket environment, specifically her expectation of a wide range of choice (see section 5.2), made purchasing decisions highly problematic. Janet became quite annoyed and upset when talking about the lack, and expense, of gluten-free and lactose-free products in her local supermarkets, as can be seen below:

*Janet: ... .. No I think It's really unfair they don't sell ... .. Even Sava (centre), they've got nothing for me. I went to get my fish fingers and they were £3.14 for 6 fish fingers. I said 'J--- (partner), just take them back I'll do without.' But that's just so unfair isn't it?*

(Janet, aged 63. Extract from go-along interview)

During both the go-along and photovoice interviews Janet explained how it made her feel when she could not buy from the range of foods that were available to 'everyone else':

*Janet: ... .. But if I've got to buy in stuff for me it can be quite expensive. I mean it can come to 30 quid just for stuff I can eat like ice cream and stuff like that. I've got to have something ... cos I feel really neglected. You know what I mean?*

(Janet, aged 63. Extract from go-along interview)

And also:

*Janet: ... I'm sick of the gluten free chocolate cos there's no taste in it. It's so expensive. And people ... everyone else has chocolates for Mother's Day. I have flowers. I want chocolates, I want lots of chocolates but I don't get them. People only buy them for you Christmas cos they're so expensive to buy ... Only from Thornton's, they do gluten free chocolate ...*

(Janet, aged 63. Extract from photovoice interview)

As the extracts demonstrate, Janet was frustrated at having to buy expensive substitutes and at not having the range of choice and availability that she wanted. She had quite an emotional response to the conflict that arose from trying to adhere to her restricted diet whilst also wanting to fully engage with the consumption environment. Janet said that she found herself upset and angry when she could not buy, or be bought, the foods she wanted to. In order to alleviate this, and to avoid feeling 'neglected', she often bought and ate foods which her restrictive diet prohibited. To illustrate, whilst shopping for food during the go-along interview Janet was actively trying to adhere to her dietary restrictions. She sought-out lactose and gluten free products (see below):

***We stop by the free-from selection (see plate 7.5)***

*Janet: I mean I had one of those the weekend (pointing to the soya custard – see photographs), but its 43 for J--- (partner) normally and its 87 (price) because its dairy free. It's ridiculous isn't it? Absolutely ridiculous. Never mind.*

*CT: What stuff would you normally buy in the free-from?*

*Janet: Er ... I have salad cream, this is the flour that we*

*use ... you see you can buy gluten free everything ... baking powder, that's the flour I use. Erm ... these are truly horrible (pointing at soya yoghurts), oh they are horrible ... they're terrible, they're horrible ...*

(Janet, aged 63. Extract from go-along interview)

**Plate 7.5: Photograph of 'free-from' aisle (by CT)**



At the same time Janet was also engaging in the relatively low-agency 'price promotion' food shopping routine-of-practice (see table 7.1 and section 5.3.2). As previously discussed, this approach is driven by engaging with special offers and promotions. Having a restricted diet meant that many of the foods on special offer were not suitable for her. Yet in many instances she bought them anyway, as can be seen in the following:

***Participant stops to look at quiches on special offer***

*CT: What are these?*

***Janet: These are quiches***

*CT: Is that something you can eat?*

***Janet: A little bit ... I do, otherwise I have nothing do I? You know what I mean. So I do erm ... I do have er something, even if it's only a little bit.***

*CT: And they're 2 for £3?*

*Janet: Yeah ... definitely*

**(Janet, aged 63. Extract from go-along interview)**

In this extract Janet decided to buy quiches on special offer, despite the fact that she could not eat gluten or dairy. Price promotions are part of the experience of supermarket shopping. The extended range of choice that characterises the shopping experience (see section 5.2.1) is not available in gluten-free and lactose-free products, as Janet comments, and those products that are available are very expensive.

Janet's conflicting practices and narratives can be explained, in part, by contextual influences. In consumption spaces, like supermarkets, individuals are encouraged to behave as consumers. A wide range of products in-store to choose from has been consistently identified as a key consideration for consumers (Oppewal et al. 1997, Timmermans 1982, Babin et al. 1994). The supermarket environment brings a range of influences to the food shopping practices that participants performed within them. They are sites of choice and leisure, but also of expense and temptation. Some participants, such as Janet, found it difficult at times to balance the pervasive influence of the supermarket against their own values and needs, even if this had a detrimental effect on her health. Once again, this is very different to the careful, disciplined and planned approach to food she talked about in her home (see table 7.1). In the extract below she explains how she plans her and her partner's meals:

*Janet: I have to know what meat I'm having, which is chicken normally every day. But some days I will just have salad and I might just have like the gluten ... the gluten free ham and cheese on my salad or something. I think there's one of those a bit later on (indicating photographs). But normally mine is chicken, all the time. Chicken and vegetables or salad or blah, blah, blah.*

*CT: Do you plan J---'s(partner) meals separately?*

*Janet: Yeah ... he just says 'anything you want' when we go shopping. I'll have this, I'll have that and he just has all his and I just ... I have chicken (laughs).*

**(Janet, aged 63. Extract from photovoice interview)**

For Janet, the supermarket environment was difficult. It provided a range of temptations and features that she wanted to interact with, but which would result in her buying foods outside of her dietary restrictions. The ordered, if not very enjoyable, high-agency approach in the home was challenged in the supermarket. Physical and social contexts constantly challenge the accounts and narratives individuals use to construct identities and rationalise behaviours. Enacting stable and consistent food practices was problematic for some participants. The pressures of particular contexts, such as the supermarket or occasions of social eating, could be conflicting and frustrating. For example, Janet, Diane and Tracy regularly described their food practices in a negative way, problematizing them in terms of health, effort, expense or enjoyment. Home, unlike the supermarket, was a place that these pressures could be managed more effectively and comfortably (see section 7.4.2). Home was a private space in which individual needs could be catered for and temptations and social pressures removed (see section 6.2). Lawrence explained that even working near to a supermarket could be a constant source of temptation:

*Lawrence: ... Most people actually do eat at work, cereal or just something to take to work ... people tend to come in and have their breakfast there ... ... we work literally upstairs from Tesco's and so ... to be honest with you I tend to go down and grab food. That's part of the problem I think. If you are bored at work ... people buy boxes of biscuits, bits of cakes and stuff like that. If you get bored you get tempted to be drawn into this you know.*

*CT: Do you often end up eating it?*

*4C: I used to. I don't now. I might have a biscuit, but I tend to ... I do, I do participate in it. Partly because it's just social eating really. But I don't as much as I did. People at one point were buying endless boxes of sweets, especially at Christmas you know when the offers are on at Tescos. You buy 2 great big tins of sweets for 10 quid and everyday there'd be somebody buying this stuff, and it is tempting if you like chocolate and stuff.*

(Lawrence, aged 43. Extract from photovoice interview)

Yet for one participant, Caroline, home itself was a site of temptation. She explained that she would rather eat at the primary school where she worked, as she thought it was healthier and more 'regimented'.

*Caroline: ... Well, when I'm at home you see I don't tend to eat like I do here (school). I'm ready for my lunch when I'm here. At home I could maybe go to till 3 'o' clock and I'll suddenly think 'oh, I haven't eaten anything.' Whether it's because I'm preoccupied doing something else or because I'm shopping or whatever. But ... but er here ... your times are regimented if you like so you know, you tend to follow them. And I ... I probably think I eat healthier at school than I do when I'm at home.*

CT: Why's that?

*Caroline: Well, there's less ... less temptation. Unless people bring in tins of chocolates. I mean there are biscuits at school, which I don't eat at home. I don't touch them. But erm ... if I was at school now ... no ... if I was at home in the day, rather than have a balanced meal I might snatch a bag of crisps or the chippy across the road. If I was hungry or ... I may well have a biscuit or something. So ... or not have a proper meal. I'll just graze all day really. Which I think isn't good.*

(Caroline, aged 52, Extract from photovoice interview)

As discussed in section 7.4.2, Caroline adopted a 'what we fancy' routine-of-practice in the home and described making a great deal of effort to cater to her

family's individual needs and preferences. She also employed a somewhat passive 'working around the store' routine when shopping for food (see table 7.1). Yet, curiously, it is the '*regimented*' nature of set meals and fixed meal times at the school that appealed to her, which is at odds with her somewhat complicated and individualised home food environment.

## 7.6 Summary

Some participants, such as Alan and Poppy, demonstrated highly planned routines-of-practice across contexts. Others, like Pamela and Adam, described comparatively low agency routines-of-practice in both the home and the supermarket. Interestingly, a number of participants, namely Dave, Janet, Jayanti, James, June and Clifton, demonstrated *inconsistent* food practices across contexts. They undertook highly collective and organized approaches in the home but low agency and unplanned approaches in the supermarket. It is especially these participants who can help show how context shapes food practices.

The supermarket is a consumption environment that facilitates both shopping as a leisure activity and the expression of identity and aspirations through purchases. The pervasive nature of these environments and their cues to consume can be hard to ignore. The pleasure that shopping can give also meant that some participants did not want to resist the consumption cues and marketing devices, they enjoyed engaging with these features and behaving as consumers. However, for some participants such as Janet, the supermarket environment could be problematic

The home environment presented very different pressures and influences on food practices. Home is a private and family space, and one which parents consistently described being responsible for. This responsibility included that of



providing an appropriate home food environment. Within the home setting, parents interpreted and enacted responsibility in two distinct ways. While some aimed to regulate the home food environment, others embraced and supported individualised food practices. The influence of environment on food practices can clearly be seen in the discrepancies in food related behaviour between home spaces and supermarket spaces. Even those participants who enacted responsibility for the home food environment in terms of collective and regulated food practices still responded to the individualism, range of choice and cues to impulsively consume that characterised the supermarket environment.

Expressions of individualism, in relation to food practices, were referenced by participants in both home and supermarket spaces. Each environment fostered expressions of individuality in different ways. Individualism is perhaps most pertinently expressed through exercising personal choice and freedoms (Eckersley 2006). However, choices about food are not entirely reducible to individual considerations. Choice is a matter of collective judgements, collaborative decisions and social processes (Murcott 1998). Home could be a site of privacy and acceptance, a safe space in which to exercise personal preferences and individualised practices. Supermarket environments facilitated expressions of individuality through choice and the opportunity to use symbolic purchasing decisions to help construct and maintain identities and lifestyle choices, as Poppy did.

Food choices and behaviours are heavily constrained and influenced by context. Symbolic interactionism posits that it is not possible to separate social action from the context in which it occurs. The social world we inhabit affects our practices and, in turn, our practices shape the social world we live in (Rock 2001). Therefore, in order to understand routine food practices we must explore the contexts and environments in which they are performed. The next chapter concludes this thesis and identifies the broader relevance and implications of studying food routines-of-practice.

## **Chapter 8:**

### **Conclusion**

This chapter concludes the thesis by discussing how and to what extent the research aims outlined at the end of the literature review have been addressed by the methodology, data analysis and interpretation of findings presented here. The limitations of the study, most specifically the data collection, are reflected upon and, lastly, possible avenues for future research and intervention will be outlined.

As stated in section 2.5, this thesis had three key aims:

- 1) To explore and describe how people perceive and interact with the micro food environment.
  
- 2) To investigate how routine food behaviours are performed in, and shaped by, home and food shopping contexts.
  
- 3) To examine how food related practices and identities interrelate across home and food shopping spaces.

In chapter three I argued that investigation of these aims was made feasible by the observational, interactional and context-specific nature of data generated by photovoice and go-along methods. This approach meant that I spent extended amounts of time with a relatively small number of participants while they specifically performed and talked about food-related behaviours. By combining go-alongs and photovoice methods I was able to examine food practices across contexts. The go-along interviews facilitated interactions and observations of food practices as they unfolded in real space and time, which contributed

significantly to the depth of the data collected. The photovoice exercise uncovered the less obvious aspects of eating behaviours and highlighted contradictions and context specific behaviours. Food practices are social, performative and situated. In line with this, a symbolic interactionist ethnography assumes that human group life is intersubjective, activity-based, negotiable and relational (Tan et al. 2008). Therefore, on a practical level, the research aims could only be adequately explored through ethnographic methods. The stated research aims will be addressed in turn in the sections that follow:

## **8.1 How do people perceive and interact with the micro food environment?**

The first aim has been addressed by examining participants' perceptions of their local food environment (see sections 4.4 and 5.2) and the behaviours they employ when shopping for food (see section 5.3). As outlined in section 2.3.2 of the literature review, there is very little observational or ethnographic research on how people shop for food (Gram 2010) and, thereby, interact with their local food environment. Although the Sandwell food environment has been extensively researched (see chapter four), this body of research is overwhelmingly quantitative. There is an absence of work on how Sandwell residents perceive and use the local food environment. The participants of this study characterised and engaged with aspects of the Sandwell food environment in quite specific ways.

Although eat-in establishments were not originally intended to be a major focus of this study, a significant amount of interview and observational data on these food environment sites were collected. These spaces were often used by me and the participants as places to meet or as venues for the photovoice interviews (see table 4.2). Eat-in spaces were perceived and used by participants primarily as social spaces. Behaviour in these spaces illustrated the influence of

environment on food practices and highlighted that eating is both a social activity and very much dependent upon context-specific practices. Eating in social spaces often involved abandoning health-related dietary restrictions and departures from regular and more healthful eating practices (see sections 4.4.1.2 and 4.4.1.3)

In terms of shopping for food, 'local' shops were described as resources for everyday and additional purchases to supplement more regular 'big shops' or 'main shops' at supermarkets. Discount stores were used by participants on an impromptu basis. With the notable exception of Poppy, participants did not plan to go to these stores and would often engage in impulsive or unplanned purchases once there. Supermarkets themselves were core to the food shopping practices of all participants. Although food shopping behaviours within supermarkets varied considerably (see section 5.3), participants gave relatively consistent accounts of how they experienced and viewed these sites. Supermarkets were described by participants as large-chain branded stores (such as those listed in the 'supermarket' section of table 4.1), and characterised by an extended range of choice and an array of special offers and promotions (see section 5.2). Although some participants described these spaces more critically than others, they all consistently emphasised these same features as significant.

This study took an ethnographic approach to investigating how participants used the food environment. As previously mentioned, although rare, this approach has been employed before. Notably, Furst and colleagues conducted an ethnographic study of food choice in supermarkets. The researchers accompanied and interviewed shoppers whilst they were food shopping, interrogating their purchasing decisions as they made them, just as I did. From these data they developed a conceptual model of the food choice process people deployed when shopping for food. The influences on food shopping choices identified were: ideals; personal factors; resources; social framework; and food context. 'Food context' refers to the context in which the

food choices were made, which included the physical environment of the store. The authors commented that some respondents allowed the food context to be a very important influence on their food choices, and were often sensitive to price reductions (Furst et al. 1996). This thesis builds upon and adds to these findings by focusing explicitly on the influence of ‘food context’ of both the home and the supermarket.

## **8.2 How are routine food behaviours performed in, and shaped by, home and food shopping contexts?**

The second aim has been addressed by exploring how participants performed food practices in the specific environments of the home and the supermarket and the influences that characterised these environments (see sections 4.4.1.3, 5.3, 6.3, 7.3 and 7.4). As stressed in section 2.5, food stores and home spaces are the two main sites in which food practices are both shaped and performed.

Responsibility emerged as a key influence on home and family food practices (see section 7.4). For some participants of this study, family meal rituals were a symbolic performance of responsibility and family relationships. As described in section 7.4, while some participants enacted this responsibility through uniform and collective food practices (see section 6.3.3 ‘Regulated meals’), others accommodated individual agency and choice at meal times (see section 6.3.2 ‘What we fancy’). The ‘what we fancy’ routine-of-practice is characterised by intensive labour, on the part of the parents, in order to meet the needs of individual family members. A range of different meals and foods were regularly prepared for family meals.

This particular finding resonates with social science literature on the diversification and individualisation of eating behaviours. The capacity to provide choice and variety ‘on demand’ (Wills et al. 2008a), in the way

described for 'what we fancy' routines-of-practice, is made possible by convenience foods and 'hypermodern convenience devices' (Warde 1999). These are devices, such as freezers and microwave ovens, which have changed strategies for the storage and reconstitution of domestic food. 'Hypermodern convenience devices' and convenience foods make it possible for households to store a wide selection of foods that take a relatively short time to prepare, meaning that ever more complex and individualised eating practices can be accommodated. Warde further argues that the use of convenience foods and devices is a functional response to the de-routinization of everyday life and the progressively more complex set of negotiations required to achieve a meeting around the table for a family meal (Warde 1999).

The symbolic importance and practice of family meals has not decreased (Murcott 1997), but the ways in which they can be enacted has become much more diverse. It is now possible to express individuality through food practices and accommodate very specific likes and dislikes within the home, as a wide range and choice of foods can be stored and prepared in domestic settings. Contemporary Western society has an extended range of choice, products and availability of goods for consumption (Eckersley 2006).

As previously stated, extended choice is a feature of supermarkets and the shopping experience (see section 5.2). When in supermarket spaces individuals are not just purchasing food for themselves and their family, they are also consumers and, therefore, perceive foods as consumer goods. For consumers, choice is now so diverse and multifaceted that the necessity and functionality of the goods on offer becomes obscured. The abundance of promotions, special offers and superficial variations among goods make it more difficult for consumers to know what to buy and to make sense of the choices they are presented with (Ilmonen 2001). Shopping for food is, in part, an act of consumption and this thesis proposes that it should be studied as such (see sections 2.3, 5.2 and 7.3).

If the food environment is to be studied as a consumption environment, then insights from sociological work on routines of consumption can inform the way we conceptualise food choice. Ilmonen comments that, despite the growing and overwhelming range of choice, consumers are still ‘condemned’ to choose. Individuals respond to extended choice by seeking to minimise uncertainty and ease decision making through routines. Once individuals develop a routinized approach they stop noticing and critically thinking about what they are doing, it becomes automatic (Ilmonen 2001). His description of routine responses to overwhelming consumer choice very much characterises the food shopping experiences and behaviours of some participants of this study (see sections 5.3.1 ‘Chaotic and reactive’ and 5.3.2 ‘Price promotion’).

Extended choice and expectations of choice were also features of home food practices. The individualisation of food practices is personified in the construction and maintenance of food related identities. This was most evident in the ‘fussy eaters’ (see section 6.4.1), the varied interpretations of being a ‘healthy eater’ (see section 6.4.2), and some of the restricted medical diets that proved to be highly context specific (see sections 4.4.1.2, 4.4.1.3 and 7.3.2). The home is the site in which these identities and highly individualised practices can most easily be expressed and accommodated (see section 7.3). Home food practices, therefore, were shaped by expressions and discourses of responsibility, health, individuality and care. The most effective way to examine how these various influences interrelated was to qualitatively investigate exactly how participants went about food practices on a day to day basis.

Bisogni and colleagues (2007) examined eating routines and food choice in just such a manner. Participants of their study reported, and were subsequently qualitatively interviewed, about what, where, when, and with whom they ate over a period of seven days. This is a somewhat similar approach to the one I took with the photovoice interviews (see sections 3.5.1 and 3.5.2). From these data the authors developed a framework for characterising and

situating 'eating episodes'. The framework comprises eight inter-connected dimensions: food/drink; time; location; activities; social setting; mental processes; physical conditions; and recurrence. Participants described their routine eating practices with reference to these dimensions and they also attached great importance to their repetitive and 'routine' food behaviours (Bisogni et al. 2007). Such an approach encourages a view of nutrition behaviours that takes into account how people's eating practices are both intertwined and embedded with other parts of their lives and also result from their need for predictability and stability (Jastran et al. 2009).

The importance of understanding routine and habitual food practices has been stressed in the literature (Jastran et al. 2009, Blake et al. 2008, Blake et al. 2009, Bisogni et al. 2007). As discussed in section 2.4, Jastran and colleagues argue that eating routines are a pertinent issue for health because recurring eating behaviours influence nutrition and health outcomes. Routines can be understood as strategies of decision making that simplify daily activities and tasks (Jastran et al. 2009). Ilmonen (2001) points out that although routines play a fundamental part in our everyday life, they have attracted little attention in the social sciences. Probably because routinization is a long process and a difficult one to research, as routines are often tacit and uncritical (Ilmonen 2001). In the context of home, individuals construct categories of practice and identities they draw upon repeatedly when undertaking recurring food practices, such as family meals (Blake et al. 2008). This scholarship positions food 'routines' as an intersection of structure and agency. Choice is routinized into sets of practices and approaches that can be deployed in specific situations and for specific tasks. They are an expression of agency because they enact choice, but these routines are also constrained by the contexts and structures in which they are performed.

In addition to the sub-discipline of time-geography and the more recent development of non-representational theories described in section 5.3, geographers have theorised the routine and repetitive in terms of habit. Work in



human geography on habit is much more sensitive to environment and embodiment than the literature referenced above. The Deleuzian theory of ‘individuation’ has been adopted and further deployed by geographers to explain habitual and mundane behaviours (Dewsbury 2011). Individuation refers to the processes whereby the undifferentiated can become individual. Undifferentiated activities such as driving a car, riding a bike or making a bed facilitate material connections to the social world. These tasks are performed repeatedly and become deeply and implicitly familiar to the individual. Performing these everyday activities requires constant enactment and repetition, whereby ways of ‘doing’ and ‘moving’ are established. The particular ways in which individuals ‘do’ them become habits and it is through habits that people understand and reinforce their place in the world and, at the same time, understand how that world works (Dewsbury 2011).

Habits arise from particular practices and activities, once established they can become something quite separate from the original intentional practice. Such a description could be applied to the shopping routines-of-practice depicted in section 5.3, in which individuals formed particular ways of moving about the store, interacting with the environment and ‘doing’ shopping. In some cases these routines became quite separate from the tasks of obtaining appropriate foods for the home and family meals or of purchasing foods that adhered to restricted dietary requirements (see sections 5.3.1, 5.3.2, 5.3.3 and 7.3).

Geographers have not yet applied the concept of embodied habits to food practices. Further, while ‘routine’ behaviours have been studied in relation to consumption practices and food behaviours at home, they have not yet been examined in public health research. Jastran and colleagues highlight this by observing that nutrition professionals are very much aware of the influence of recurring food practices on dietary health, yet food and eating patterns remain under researched (Jastran et al. 2009). These gaps in the literature can be partly addressed by a more developed and context-sensitive theory of routine food

behaviours. This thesis aims to extend the study of food routines by focusing on *behaviour*, rather than the discrete factors that influence decision making in particular situations. It conceptualises routine food practices by building upon theories of both routine consumption and routine food behaviours, and by introducing the term '*routines-of-practice*'. The notion of routines-of-practice was then applied to the core spaces of home and the supermarket.

As discussed in sections 5.3, 6.3 and 7.2, the concept of routines-of-practice was used, in this thesis, to characterise context-specific food practices. It was used in chapter five to categorise the ways in which participants went about food shopping in supermarkets. In chapter six (section 6.3) the concept was used to typify habitual household cooking and eating practices. Individuals draw on context specific and habitual routines-of-practice when performing food practices. These routines can be regarded as part of clusters or bundles of knowledge, values and behaviour that individuals draw upon as necessary and appropriate. The routines-of-practice described in this thesis include some descriptions of decision making, but incorporate these within the broader aim of characterising *behaviours* in different food contexts. Food shopping routines-of-practice (see section 5.3) are not straight-forward models of decision making because they do not assume food choices in the supermarket are necessarily rational and calculated (Gram 2010). Purchasing decisions, in these contexts are often tacit, chaotic and uncritical reactions to the consumption environment (see sections 5.3.1, 5.3.2 and 5.3.3).

People segment their daily routines and practices into 'brackets' (Takashashi et al. 2001) of related activities focused on specific contexts and identities. In doing so they are acting to place temporal and spatial order on their routines (Takashashi et al. 2001). This thesis has been informed by theories of repetitive behaviours such as 'habits' (Dewsbury 2011); 'routines' (Jastran et al. 2009); 'episodes' (Bisogni et al. 2007); and 'brackets' (Takashashi et al. 2001). The concept of routines-of-practice has been introduced to explore how food

practices can be characterised in terms of behaviour, agency and the influence of environment.

### **8.3 How do food related practices and identities interrelate across home and food shopping spaces?**

The third aim has been addressed by comparing the ways in which participants routinely behaved in home and shopping spaces (see section 7.2), and by interrogating the specific contextual influences of these spaces (see sections 7.3, 7.4 and 7.5). This research aim is perhaps the least well addressed of the thesis and also offers, potentially, the most scope for further research.

The participants in this study did not demonstrate consistently high or low agency behaviours in both the supermarket and the home. Some participants described very ordered and planned routines-of-practice in the home and engaged in more reactive and disorganized behaviours in the supermarket. This can be explained, in part, with reference to the context-specific influences of these spaces. In a way, the supermarket was a much more simple space to investigate than the home. It is designed for a purpose: facilitating and maximising consumption. However numerous, subtle and multi-faceted the marketing features of those environments might be, they serve the same purpose: to increase purchases. As a physical and symbolic site, the supermarket is intimately tied to cultural constants of consumerism, individualism and materialism (Bowlby 1997). It is unsurprising then that people find these spaces pleasurable and pervasive, but also frustrating and tempting. They are monolithic sites that can be engaged with, resisted, or enjoyed.

People go to the supermarket with a purpose: to buy food. Individuals bring needs and expectations from the home to the supermarket. Individuals shop both for themselves and on behalf of others. They then take their food

purchases back home to the home food environment to be used and shared, or, sometimes, to be wasted or thrown away. This thesis does not go far enough in examining how food products and related, values, needs and practices are taken and shaped from context to context, and why some participants engaged so much more with the supermarket.

One possible explanation is that some people seemed to position food shopping as a somewhat isolated activity. Rather than being merely a resource to replenish the home food environment, the supermarket environment adds new decisions, dilemmas and dimensions to food practices. The supermarket space is not a neutral site. It has features and prompts, such as special offers (see sections 5.2 and 5.3.2) that position food purchasing decisions very much in the context of the supermarket and away from that of the home. Engaging with special offers, promotional displays and new products shifts the emphasis of decision-making from what may be needed or wanted to what is cheap, new or only available for a limited time. These context specific and temporal marketing devices can serve to override or overshadow the process of food shopping as a simple task of restocking for the home. In which case, a carefully planned approach to food in the home does not necessarily translate into an organized approach to food shopping. However, as has been discussed (see sections 5.3 and 7.3), the participants of this study were not unwilling or unaware subjects of these marketing devices. They consistently identified the more effective marketing features of supermarkets (see section 5.2) and many enjoyed interacting with them, to the extent that some regularly went food shopping with no list and allowed the consumption space to guide their purchases. The reasons *why* some people chose to engage with the supermarket in this way, and others did not, has not been addressed in the course of this study, and would be a rich topic for further study.

Home, by contrast, proved to be a much more complex and elusive site to investigate. Unlike the supermarket, it is not part of the commercial or regional

food environment. Home is a private space and one that can be difficult to research (Allan and Crow, 1989). It is the point where individual and collective practices intersect (Valentine 1999b) and also the site where cultural, religious, socio-economic and temporal influences on food behaviours are played out. In the home we have both more control over food and, conversely, more sources of pressure and influence. This study revealed some of the factors that shaped food practice in the home. In particular, the theme of responsibility was central to accounts of family food practices (see section 7.4). As summarised in section 8.2, responsibility was interpreted and enacted by parents in very different ways. Once again, the reasons *why* some participants chose to privilege individualism in their enactment of parental responsibility for food, while others sought to inhibit it, is unclear. As are the ways in which this might be related to behaviours and expressions of individualism in the supermarket. Choice and Individualism are cultural-constants in contemporary society (Eckersley 2006); and evident in ever more individualised and flexible approaches to food consumption (Wills et al. 2008b, Warde 1999). Cultural values have a powerful effect on psychological wellbeing and, as a consequence, health related behaviours such as food practices. How this interrelates and varies across home and supermarket contexts is another possible avenue for further research.

## **8.4 Summary of key findings**

The sections above explored how, and to what extent, each of the three main research aims has been addressed and the findings they have generated. The key findings are summarised in the points below:

- The food environment can be perceived and used as a consumption environment, which has implications for the ways in which individuals interact with that environment and shop for food.

- Home is the site in which people can most comfortably express and accommodate increasingly individualistic eating behaviours, which has implications for the ways in which people enact responsibility and, therefore, perform household meals.
- The concept of routines-of-practice, introduced in this thesis, builds upon and extends existing work on routine (food) practices by applying global descriptions of approaches and behaviour rather than focusing solely on choice.
- The routines-of-practice identified and described demonstrate the importance and influence of context in shaping food behaviours
- Behaviours and approaches to food practice are not always consistent across contexts, illustrating the situated nature of food practices.
- Routine food behaviours have yet to be studied in public health research on the food environment, and introducing this concept could help us better understand *how* people interact with the food environment at the individual level.

## **8.5 Study limitations**

There are theoretical and methodological issues that should be considered in relation to this study. Ethnographic knowledge does not claim to be immeasurably wiser or more sophisticated than that of the participants it studies. What is offered here is an interpretation of the ways that participants explained their surroundings and actions (Rock 2001). These findings are not replicable or easily comparable with those of other studies. As Ball and colleagues point out, there is little consensus as to the most appropriate approaches for defining and investigating environmental influences on diet. Further, that observational research, such as that presented here, does not provide strong evidence as to the temporal or causal nature of associations of environmental factors with health behaviours (Ball et al. 2006).

The richness, quality and validity of the data collected could have been improved upon in some areas. Additionally, the scope and methodology of the study did not adequately address certain aspects of participant's food practices or the factors that may have shaped them. The fieldwork was concentrated in a six-month period. As outlined in section 3.6.2.1, I met with each participant four or five times and spent around three to four hours, in total, with each of them. I only went on one food shopping trip with each participant (even though it may have been to multiple sites, see table 4.1), which meant that I was unable to observe or interrogate the temporal and changing nature of food practices. I obtained a snap shot of people's lives and practices, albeit a very detailed one.

Although somewhat outside the funding and time constraints of the study, a second wave of data collection would have been hugely beneficial. By conducting several go-along interviews or a series of food-photo-diaries I could have examined the consistency of practices that participants deployed. Some participants, in particular, described very changeable diets. Tracy, for example, talked about following a range of weight-loss diets and eating plans (see section 6.4.1), whereas as Lawrence explained that his food practices has changed drastically in recent months after an extended period on a meal-replacement plan (see sections 3.4.2 and 6.4.2). Returning to these participants again would have enriched the data collected and generated more data on temporal aspects of food practice.

As discussed in section 8.3, the home food environment was problematic to study because it was a point of convergence for a range of influences and practices. Photovoice helped to uncover some of these influences and to prompt participants into reflecting on less-obvious aspects of their home food practices. However, the depictions of home and home food-routines-of-practice (see sections 6.3 and 7.4) are based largely upon the descriptions and interpretations of only one family member. It could be that other members would disagree with

their interpretation or characterise it in a different way. Aside from a handful of couples and children who also contributed to interviews, the data presented here do not capture these possibly varied viewpoints and experiences, which could result in rather a one-dimensional picture of the home food environment.

As stated in section 2.5 and evaluated in section 8.3, one of the aims of this study was to examine how food related practices and identities interrelate across home and food shopping spaces. In both my study design and data collection, the home and supermarket were treated as separate sites, and this is reflected in the limited conclusions I have been able to draw about how behaviour may interrelate across these sites (see section 8.3). More could have been done to compare and link practices across contexts at the data collection stage. One possible method to achieve this would be to conduct the go-along interviews *first*; and then track how the food bought during the shopping trips is consumed and used in the home via the photovoice food diary and interviews.

## **8.6 Implications for policy and research**

Shopping for food in supermarkets is one of the primary means through which people interact with their food environments and, therefore, one of the principle contexts in which decisions about diet are made. Understanding how people make decisions when food shopping, and the contextual factors that shape them, necessitates a more nuanced understanding of in-store behaviours, routines and perceptions. Much epidemiological and quantitative research relies on a simple model that suggests that increasing food access improves diet, and that all contexts will affect people equally (Macintyre 2007). The results of this study indicate that individual responses to similar kinds of food environment vary despite participants having similar social and economic backgrounds. These findings highlight the need to focus on the factors that mediate interactions with the food environment and thereby shape food and dietary practices.



As discussed in section 2.2.3.2, many current policy initiatives that focus on the physical environment determinants of food practices seek to tackle ‘food deserts’. These schemes are focused on structural interventions that increase physical access to food in low-income communities. The findings reported here suggest that a uniform structural policy solution may not always be effective, as not all individuals within a community respond in the same way to the same food environment. Policies aimed at changing the food environment are likely to have varying effects on food practices depending on the consumption characteristics of individuals interacting with those environments. Individuals have differing responses to, and perceptions of, the food environment.

The findings of this study provide empirical support for the idea that food-shopping behaviours are not straight-forward matters of proximity, cost and ‘rational’ economic decision making. This study explores and examines shopping for food as a consumption-related behaviour, in addition to being a health-related behaviour. In which case, incorporating insights from the social science literature on consumption and marketing can help health researchers explore how the neighbourhood food environment may affect individual diet by helping to generate a more nuanced understanding of the multifaceted nature of individual responses and practices.

Individuals adopt habitual routines-of-practice in specific places and contexts, such as shopping in supermarkets or preparing meals in the home. Conceptualising eating behaviours as a series of rational decisions about what and when to eat or buy is unhelpful in seeking to understand the complex negotiations and demands that influence food practices, especially in the home. People perform food behaviours in the home that are often uncritical and habitual, deployed to simplify the increasingly complex nature of everyday life. While participants demonstrated an understanding and acceptance of healthy eating messages and promotions, these messages were often taken up as discourses, rather than behaviour change, and incorporated into self-narratives,

as exemplified by ‘healthy eaters’ (see section 6.4.2). Changing habitual food behaviours is more than a simple case of educating and advising people. Not least of which because routine behaviours are *uncritical habits* (Ilmonen 2001) and because people tend to rely on them in times of stress and uncertainty, even if they are not ‘healthy’ (Jastran et al. 2009).

In the supermarket it is clear that food is positioned as a consumer good and that people shop for food within a consumption environment characterised by an extended range of choice (see section 5.2). However, choice and individual preferences are also a big deciding factor in some home settings as well (see sections 6.3.1 and 6.3.2). It would be possible to infer that the increasing commodification of food (Warde 1999) *across* home and supermarket settings can have negative implications for the way we perceive and consume food and which are potentially damaging to health. It is perhaps the way that food and food environments are marketed and designed that need attention, in addition to effective public health messages about food aimed at the individual and household level. The need to work across contexts and focus on both the food environment *and* health promotion is perhaps best summarised by Sandwell PCT itself. In 2007, Sandwell PCT’s Joint Policy Unit examined the case for increasing supply of, and demand for, healthier food in Sandwell, concluding that:

*Health inequalities and food poverty are unlikely to be changed appreciably by addressing retail access alone. Neither will advice and information change eating habits. Shops do not on their own dictate eating habits; these are part of social, cultural and family patterns. Health promotion could generate the desire for healthier food, but only if that desire can be visible and possible in everyday life. People make decisions about food, planners make decisions about the environment. Maybe policy designed to “tackle” health inequalities and food poverty should re-evaluate reliance on short-term projects and encourage joined-up thinking.*

(p.470-471) (Kyle and Blair 2007)

As Kyle and Blair argue above, planners make decisions about the food environment, but it is individuals who make decisions and choices about food. In an ever more complex and 'hypermodern' (Warde 1999) socio-cultural environment, individuals are confronted on a daily basis with vast array of choices, too many to deal with in any great detail or even necessarily to make sense of (Eckersley 2006).

People respond to these conditions by relying on routine behaviours that short-cut decision making and simplify daily activities and choices (Ilmonen 2001, Jastran et al. 2009). These habitual routines are context and task specific schemas that we step-into as necessary and often uncritically (Blake et al. 2008). The concept of routines-of-practice offers a way to examine how everyday responses and solutions to complexity and overwhelming choice are played-out in food practices. Rather than trying to identify all the factors that shape food choice, this approach aims instead to characterise the *overall approach* taken by people to underpin their food practices in specific contexts. Such an aim is somewhat of a departure from models of choice and decision making processes that have already been developed in relation to routine food practices (Blake et al. 2008, Bisogni et al. 2007, Devine et al. 2009, Furst et al. 1996). However, it does serve to highlight the situatedness of food practices as performances that cannot be separated from the context in which they are performed. Further, that food practices can be both uncritical behaviours *and* intentional activities.

## Bibliography

- Abercrombie, L. C., Sallis, J. F., Conway, T. L., Frank, L. D., Saelens, B. E. and Chapman, J. E. (2008) 'Income and racial disparities in access to public parks and private recreation facilities', *American Journal of Preventive Medicine*, 34(1), 9-15.
- Ali, S., O'Callaghan, V., Middleton, J. D. and Little, R. (2007) 'A prospective mini health impact assessment of the 'Towards 2010' programme in Sandwell and West Birmingham in the West Midlands', *Public Health Nursing*, 121(6), 469-481.
- Allan, G. and Crow, G. (1989) 'Introduction' in Allan, G. and Crow, G., eds., *Home and Family: Creating the Domestic Sphere*, Basingstoke: Macmillan.
- Anderson, A. and Hunt, K. (1992) 'Who are the healthy eaters? Eating patterns and health promotion in the West of Scotland', *Health Education Journal*, 51, 3-10.
- Anderson, A. S., Bush, H., Lean, M., Bradby, H., Williams, R. and Lea, E. (2005) 'Evolution of atherogenic diets in South Asian and Italian women after migration to a higher risk region', *Journal of Human Nutrition and Dietetics*, 18(1), 33-43.
- Anderson, B. and Harrison, P. (2010) 'The promise of non-representational theories' in Anderson, B. and Harrison, P., eds., *Taking-place: non-representational theories and geography*, Farnham: Ashgate.
- Andrews, G. J. and Evans, J. (2008) 'Understanding the reproduction of health care: towards geographies in health care work', *Progress in Human Geography*, 32(6), 759-780.
- Apparicio, P., Cloutier, M. S. and Shearmur, R. (2007) 'The case of Montreal's missing food deserts: evaluation of accessibility to food supermarkets', *International Journal of Health Geographics*, 6(1).
- Araya, R., Dunstan, F., Playle, R., Thomas, H., Palmer, S. and Lewis, G. (2006) 'Perceptions of social capital and the built environment and mental health', *Social Science and Medicine*, 62(12), 3072-3083.
- Aree, P., Tanphaichitr, V., Suttharangsi, W. and Kavanagh, K. (2004) 'Eating behaviors of elderly persons with hyperlipidemia in urban Chiang Mai', *Nursing and Health Science*, 6(1), 51-7.

- Aronson, J. (1994) 'A pragmatic view of thematic analysis', *The Qualitative Report*, 2(1) available: <http://www.nova.edu/ssss/QR/BackIssues/QR2-1/aronson.html> [accessed November 2011].
- Auchincloss, A. H., Diez Roux, A. V., Brown, D. G., Raghunathan, T. E. and Erdmann, C. A. (2007) 'Filling the gaps: spatial interpolation of residential survey data in the estimation of neighborhood characteristics', *Epidemiology*, 18(4), 469-78.
- Babin, B. J., Darden, W. R. and Griffin, M. (1994) 'Work and/or Fun: Measuring Hedonic and Utilitarian Shopping Value', *Journal of Consumer Research*, 20(4), 644-656.
- Backett-Milburn, K. C., Wills, W. J., Gregory, S. and Lawton, J. (2006) 'Making sense of eating, weight and risk in the early teenage years: Views and concerns of parents in poorer socio-economic circumstances', *Social Science and Medicine*, 63(3), 624-635.
- Bailey, D., Kobayashi, S. and MacNeill, S. (2008) 'Rover and out? Globalisation, the West Midlands auto cluster, and the end of MG Rover', *Policy Studies*, 29(3), 267-279.
- Balfour, D., Moody, R., Wise, A. and Brown, K. (1996) 'Food choice in response to computer-generated nutrition information provided about meal selections in workplace restaurants', *Journal of Human Nutrition and Dietetics*, 9(3), 231-237.
- Ball, K., Timperio, A. F. and Crawford, D. A. (2006) 'Understanding environmental influences on nutrition and physical activity behaviors: Where should we look and what should we count?', *International Journal of Behavioural Nutrition and Physical Activity*, 3(1).
- Ball, S. J. (1990) 'Self-doubt and soft data: social and technical trajectories in ethnographic fieldwork', *International Journal of Qualitative Studies in Education*, 3(2), 157-171.
- Banwell, C., Hinde, S., Dixon, J. and Sibthorpe, B. (2005) 'Reflections on expert consensus: a case study of the social trends contributing to obesity', *European Journal of Public Health*, 15(6), 564-8.
- Batty, G. D., Deary, I. J. and Macintyre, S. (2007) 'Childhood IQ in relation to risk factors for premature mortality in middle-aged persons: the Aberdeen Children of the 1950s study', *Journal of Epidemiology and Community Health*, 61(3), 241-7.
- Bauman, Z. (1988) *Freedom*, Milton Keynes: Open University Press.

- Bell, C. and Cooper, M. J. (2005) 'Socio-cultural and cognitive predictors of eating disorder symptoms in young girls', *Eating and Weight Disorders*, 10(4), e97-e100.
- Bell, D. and Valentine, G. (1997) *Consuming Geographies: we are where we eat*, London: Routledge.
- Birch, L. (1999) 'Development of food preferences', *Annual Review of Nutrition*, 19, 41-62.
- Birch, L. L. and Davidson, K. K. (2001) 'Family environmental factors influencing the developing behavioral controls of food intake and childhood overweight.', *Pediatric Clinics of North America*, 48(8), 893-907.
- Bisogni, C. A., Connors, M., Devine, C. M. and Sobal, J. (2002) 'Who We Are and How We Eat: A Qualitative Study of Identities in Food Choice ', *Journal of Nutrition Education and Behaviour*, 34(3), 128-139.
- Bisogni, C. A., Falk, L. W., Madore, E., Blake, C. E., Jastran, M. and Sobal, J. (2007) 'Dimensions of everyday eating and drinking episodes', *Appetite*, 48(2), 218-231.
- Black Country Consortium (2011a) 'Town Profile - Smethwick', *Sandwell Physical Activity Board - Performance Management*, available: <http://www.the-blackcountry.com/images/Sport%20files/Smethwick.pdf> [accessed November 2011].
- Black Country Consortium (2011b) 'Town Profile - West Bromwich', *Sandwell Physical Activity Board - Performance Management*, available: <http://www.the-blackcountry.com/images/Sport%20files/West%20Bromwich.pdf> [accessed November 2011].
- Black, J. L. and Macinko, J. (2008) 'Neighborhoods and obesity', *Nutrition Reviews*, 66(1), 2-20.
- Blake, C. E., Bisogni, C. A., Sobal, J., Jastran, M. and Devine, C. M. (2008) 'How adults construct evening meals. Scripts for food choice', *Appetite*, 51(3), 654-662.
- Blake, C. E., Devine, C. M., Wethington, E., Jastran, M., Farrell, T. J. and Bisogni, C. A. (2009) 'Employed parents' satisfaction with food-choice coping strategies. Influence of gender and structure', *Appetite*, 52, 711-719.
- Blattberg, R. C. and Scott, A. N. (1990) *Sales promotion concepts, methods and strategies*, New Jersey: Prentice Hall.

- Blomberg, J., Giacomi, J., Mosher, A. and Swenton-Wall, P. (1993) 'Ethnographic Field Methods and Their Relation to Design' in Schuler, D. and Namioka, A., eds., *Participatory Design: Principles and Practices*, Hillsdale: Lawrence Erlbaum Associates.
- Booth, T. and Booth, W. (2003) 'In the frame: photovoice and mothers with learning difficulties', *Disability and Society*, 18(4), 431-432.
- Borrell, L. N., Kiefe, C. I., Williams, D. R., Diez-Roux, A. V. and Gordon-Larsen, P. (2006) 'Self-reported health, perceived racial discrimination, and skin color in African Americans in the CARDIA study', *Social Science and Medicine*, 63(6), 1415-27.
- Bove, C. F., Sobal, J. and Rauschenbach, B. S. (2003) 'Food choices among newly married couples: convergence, conflict, individualism, and projects', *Appetite*, 40(1), 25-41.
- Bowlby, R. (1997) 'Supermarket Futures' in Falk, P. and Campbell, C., eds., *The Shopping Experience*, London: Sage, 92-110.
- Boyatzis, R. (1998) *Transforming qualitative information: thematic analysis and code development*, London: Sage.
- Braun, V. and Clarke, V. (2006) 'Using thematic analysis in psychology', *Qualitative Research in Psychology*, 3(2), 77-101.
- Bremner, P., Dalziel, D. and Evans, L. (2006) *Evaluation of the 5 a day programme: Final Report*, London: Taylor Nelson Sofres (TNS Social).
- Bringer, J. D., Johnston, L. H. and Brackenridge, C. H. (2004) 'Maximizing transparency in a doctoral thesis: the complexities of writing about the use of QSR\*NVIVO within a grounded theory study', *Qualitative Research*, 4(2), 247-265.
- Brown, T. and Duncan, C. (2000) 'London's burning: recovering other geographies of health', *Health and Place*, 6(4), 363-375.
- Brown, T. and Duncan, C. (2002) 'Placing geographies of public health', *Area*, 33(4), 361-369.
- Buckser, A. (1999) 'Keeping kosher: Eating and social identity among the Jews of Denmark', *Ethnology*, 38(3), 191-209.
- Bush, H., Williams, R., Bradby, H., Anderson, A. and Lean, M. (1998) 'Family hospitality and ethnic tradition among South Asian, Italian and general population women in the West of Scotland', *Sociology of Health and Illness*, 20(3), 351-380.

- Business Voice WM (2009) *Textiles Sector and the Economic Downturn*, Birmingham: Business Voice West Midlands, Report for the Council of Regional Economic Advisers.
- Campbell, K. J. and Crawford, D. (2001) 'Family food environments as determinants of preschool-aged children's eating behaviours: implications for obesity prevention policy: A review', *Australian journal of nutrition and dietetics*, 58(1), 19-25.
- Campbell, K. J., Crawford, D. A. and Ball, K. (2006) 'Family food environment and dietary behaviours likely to promote fatness in 5-6 year-old children', *International Journal of Obesity*, 30, 1272-1280.
- Caplan, P. (1997) 'Approaches to the study of food, health and identity' in Caplan, P., ed. *Food, health and identity*, London: Routledge.
- Carpiano, R. M. (2009) 'Come take a walk with me: The "Go-Along" interview as a novel method for studying the implications of place for health and well-being', *Health and Place*, 15(1), 263-272.
- Carrigan, M., Szmigin, I. and Leek, S. (2006) 'Managing routine food choices in UK families: The role of convenience consumption', *Appetite*, 47(3), 372-383.
- Carter, M. A. and Swinburn, B. (2004) 'Measuring the 'obesogenic' food environment in New Zealand primary schools', *Health Promotion International*, 19(1), 15-20.
- Castro, P. B. and Lindbladh, E. (2004) 'Place, discourse and vulnerability - a qualitative study of young adults living in a Swedish urban poverty zone', *Health and Place*, 10(3), 259-272.
- Cattell, V. (2001) 'Poor people, poor places, and poor health: the mediating role of social networks and social capital', *Social Science and Medicine*, 52(10), 1501-1516.
- CCRI (2011) 'ESRC PhD CASE Studentships', available: <http://www.ccri.ac.uk/postgradstudies/ResearchDegrees/CaseDoc.pdf> [accessed November 2011].
- Chandon, P., Wesley Hutchinson, J., Bradlow, E. T. and Young, S. H. (2009) 'Does in-Store Marketing Work? Effects of the number and position of shelf facings on brand attention and evaluation at the point of purchase', *Journal of Marketing*, 73, 1-17.
- Chang, M. W., Nitzke, S., Guilford, E., Adair, C. H. and Hazard, D. L. (2008) 'Motivators and barriers to healthful eating and physical activity among low-income overweight and obese mothers', *Journal of the American Dietetic Association*, 108(6), 1023-1028.



- Charmaz, K. (2003) 'Grounded theory: Objectivist and Constructivist Methods' in Denzin, N. K. and Lincoln, Y. S., eds., *Strategies of Qualitative Enquiry*, Second ed., London: Sage.
- Charmaz, K. (2006) *Constructing Grounded Theory: a practical guide through qualitative analysis, Introducing Qualitative Methods*, London: Sage.
- Charmaz, K. and Mitchell, R. G. (2001) 'Grounded Theory in Ethnography' in Atkinson, P., Coffey, A., Delamont, S., Lofland, J. and Lofland, L., eds., *Handbook of Ethnography*, London: Sage.
- Charreire, H., Casey, R., Salze, P., Simon, C., Chaix, B., Banos, A., Badariotti, D., Weber, C. and Oppert, J. (2010) 'Measuring the food environment using geographical information systems: a methodological review', *Public Health Nutrition*, 13(11), 1773-1785.
- Charsley, S. (1997) 'Marriages, weddings and their cakes' in Caplan, P., ed. *Food, Health and Identity*, London: Routledge.
- Cheadle, A., Psaty, B. M., Curry, S., Wagner, E., Diehr, P., Koepsell, T. and Kristal, A. (1991) 'Community-level comparisons between the grocery store environment and individual dietary practices', *Preventive Medicine*, 20(2), 250-61.
- Chrysochou, P., Askegaard, S., Grunert, K. G. and Kristensen, D. B. (2010) 'Social Discourses of healthy eating. A market segmentation approach', *Appetite*, 55, 288-297.
- Clarke, D. (1996) 'The limits to retail capital' in Wrigley, N. and Lowe, M., eds., *Retailing consumption and capital*, Harlow: Longman.
- Clarke, I. (2000) 'Retail Power, Competition and Local Consumer Choice in the UK Grocery Sector', *European Journal of Marketing*, 34, 975-1002.
- Cleeren, K., Verboven, F., Dekimpe, M. G. and Gielens, K. (2010) 'Intra- and Interformat Competition Among Discounters and Supermarkets', *Marketing Science*, 29(3), 456-473.
- Cobb, C. J. and Hoyer, W. D. (1986) 'Planned versus impulse purchase behaviour', *Journal of Retailing*, 62(4), 384-409.
- Cohen, D. A. and Farley, T. A. (2008) 'Eating as an Automatic Behavior', *Preventing Chronic Disease: Public Health Research, Practice and Policy*, 5(1).
- Colls, R. (2002) 'Bodies out of bounds: fatness and transgression', *Gender, Place and Culture*, 9(2), 218-220.

- Colls, R. (2006) 'Outsize/Outside: Bodily bignesses and the emotional experiences of British women shopping for clothes', *Gender, Place and Culture*, 13, 529-545.
- Connell, C. L., Lofton, K. L., Yadrick, K. and Rehner, T. A. (2005) 'Children's Experiences of Food Insecurity Can Assist in Understanding Its Effect on Their Well-Being', *The Journal of Nutrition*, 135(7), 1683-1690.
- Cooper, R. S., Kennelly, J. F., Durazo-Arvizu, R., Oh, H. J., Kaplan, G. and Lynch, J. (2001) 'Relationship between premature mortality and socioeconomic factors in black and white populations of US metropolitan areas', *Public Health Reports*, 116(5), 464-473.
- Corti, L. (1993) 'Using diaries in social research', *Social Research Update*, (2)available: <http://sru.soc.surrey.ac.uk/SRU2.html> [accessed October 2010].
- Cox, A. D., Cox, D. and Anderson, R. (2005) 'Reassessing the pleasures of store shopping', *Journal of Business Research*, 58(3), 250-259.
- Coyne, I. (1997) 'Sampling in qualitative research: Purposeful and theoretical sampling: merging or clear boundaries?', *Journal of Advanced Nursing*, 26, 623-630.
- Crewe, L. (2000) 'Geographies of retailing and consumption', *Progress in Human Geography*, 24(2), 275-290.
- Crouch, M. and O'Neill, G. (2000) 'Sustaining identities? Prolegomena for inquiry into contemporary foodways', *Social Science Information*, 39(1), 181-192.
- Cummins, S., Curtis, S., Diez-Roux, A. V. and Macintyre, S. (2007) 'Understanding and representing 'place' in health research: a relational approach', *Social Science and Medicine*, 65(9), 1825-38.
- Cummins, S. and Macintyre, S. (2002a) "'Food deserts"--evidence and assumption in health policy making', *British Medical Journal*, 325(7361), 436-8.
- Cummins, S. and Macintyre, S. (2002b) 'A Systematic Study of an Urban Foodscape: The Price and Availability of Food in Greater Glasgow', *Urban Studies*, 39(11), 2115-2130.
- Cummins, S., Macintyre, S., Davidson, S. and Ellaway, A. (2005a) 'Measuring neighbourhood social and material context: generation and interpretation of ecological data from routine and non-routine sources', *Health and Place*, 11(3), 249-60.
- Cummins, S., Petticrew, M., Higgins, C., Findlay, A. and Sparks, L. (2005c) 'Large scale food retailing as an intervention for diet and health: quasi-experimental

- evaluation of a natural experiment', *Journal of Epidemiology and Community Health*, 59(12), 1035-40.
- Cummins, S., Petticrew, M., Sparks, L. and Findlay, A. (2005b) 'Large scale food retail interventions and diet', *British Medical Journal*, 330(7493), 683-4.
- Cummins, S. C., McKay, L. and MacIntyre, S. (2005d) 'McDonald's restaurants and neighborhood deprivation in Scotland and England', *American Journal of Preventive Medicine*, 29(4), 308-10.
- Curtis, S. (2004) *Health and Inequality: geographical perspectives*, London: Sage.
- Cutchin, M. P. (2007) 'The need for the "new health geography" in epidemiologic studies of environment and health', *Health & Place*, 13(3), 725-742.
- Dagevos, H. (2005) 'Consumers as four-faced creatures. Looking at food consumption from the perspective of contemporary consumers', *Appetite*, 45(1), 32-39.
- Dallos, R. and Denford, S. (2008) 'A qualitative exploration of relationship and attachment themes in families with an eating disorder', *Clinical Child Psychology and Psychiatry*, 13(2), 305-22.
- Davis, A. M., James, R. L., Curtis, M. R., Felts, S. M. and Daley, C. M. (2008) 'Pediatric obesity attitudes, services, and information among rural parents: A qualitative study', *Obesity*, 16(9), 2133-2140.
- Degeratu, A. M., Rangaswamy, A. and Wu, J. (2000) 'Consumer choice behaviour in online and traditional supermarkets: The effects of brand name, price and other search attributes', *International Journal of Research in Marketing*, 17, 55-78.
- Dennis, S. F., Jr., Gaulocher, S., Carpiano, R. M. and Brown, D. (2009) 'Participatory photo mapping (PPM): exploring an integrated method for health and place research with young people', *Health and Place*, 15(2), 466-73.
- Devine, C. M., Farrell, T. J., Blake, C. E., Jastran, M., Wethington, E. and Bisogni, C. A. (2009) 'Work Conditions and the Food Choice Coping Strategies of Employed Parents', *Journal of Nutrition Education and Behaviour*, 41(5), 365-370.
- Devine, C. M., Sobal, J., Bisogni, C. A. and Connors, M. (1999) 'Food Choices in Three Ethnic Groups: Interactions of Ideals, Identities, and Roles', *Journal of Nutrition Education*, 31(2), 86-93.
- Dewsbury, J. D. (2011) 'The Deleuze-Guattarian assemblage: plastic habits', *Area*, 43(2), 148-153.

- Dhar, S. K., Gonzalez-Vallejo, C. and Soman, D. (1999) 'Modeling the effects of advertised price claims: Tensile versus precise claims?', *Marketing Science*, 18(2), 154-177.
- Dibsdall, L. A., Lambert, N., Bobbin, R. F. and Frewer, L. J. (2003) 'Low-income consumers' attitudes and behaviour towards access, availability and motivation to eat fruit and vegetables', *Public Health Nutrition*, 6(2), 159-168.
- Dietz, W. H. (2001) 'The obesity epidemic in young children. Reduce television viewing and promote playing', *British Medical Journal*, 322(7282), 313-4.
- Diez-Roux, A. V. (1998) 'Bringing context back into epidemiology: variables and fallacies in multilevel analysis', *American Journal of Public Health*, 88(2), 216-22.
- Diez-Roux, A. V. (2000) 'Multilevel analysis in public health research', *Annual Review of Public Health*, 21, 171-92.
- Diez-Roux, A. V., Nieto, F. J., Caulfield, L., Tyroler, H. A., Watson, R. L. and Szklo, M. (1999) 'Neighbourhood differences in diet: the Atherosclerosis Risk in Communities (ARIC) Study', *Journal of Epidemiology and Community Health*, 53(1), 55-63.
- Diez Roux, A. V. (2002) 'Invited commentary: places, people, and health', *American Journal of Epidemiology*, 155(6), 516-9.
- Diez Roux, A. V., Borrell, L. N., Haan, M., Jackson, S. A. and Schultz, R. (2004) 'Neighbourhood environments and mortality in an elderly cohort: results from the cardiovascular health study', *Journal of Epidemiology and Community Health*, 58(11), 917-23.
- Do, D. P., Finch, B. K., Basurto-Davila, R., Bird, C., Escarce, J. and Lurie, N. (2008) 'Does place explain racial health disparities? Quantifying the contribution of residential context to the Black/White health gap in the United States', *Social Science and Medicine*, 67(8), 1258-68.
- DoH (2006) *Health Profile for Sandwell 2006*, NHS.
- DoH (2011) *PCT Cluster implementation Guidance*, Crown.
- Donnelly, J. E., Jacobsen, D. J., Whatley, J. E., Hill, J. O., Swift, L. L., Cherrington, A., Polk, B., Tran, Z. V. and Reed, G. (1996) 'Nutrition and physical activity program to attenuate obesity and promote physical and metabolic fitness in elementary school children', *Obesity Research*, 4(3), 229-243.

- Donovan, J. (1988) "When you're ill, you've gotta carry it" in Eyles, J. and Smith, D. M., eds., *Qualitative Methods in Human Geography*, Cambridge: Polity Press.
- Dovey, T. M., Staples, P. A., Gibson, E. L. and Halford, J. C. G. (2008) 'Food neophobia and 'pick/fussy' eating in children: A review', *Appetite*, 50(2-3), 181-193.
- Dowler, E., Blair, A., Donkin, A., Rex, D. and Grundy, C. (2001) *Measuring Access to Healthy Foods in Sandwell*, Warwick: Sandwell Health Action Zone,.
- Dunn, K. (2000) 'Interviewing' in Hay, I., ed. *Qualitative research methods in human geography*, Oxford: Oxford University Press.
- Dwyer, J., Needham, L., Simpson, J. R. and Heeney, E. S. (2008) 'Parents report intrapersonal, interpersonal, and environmental barriers to supporting healthy eating and physical activity among their preschoolers', *Applied Physiology, Nutrition and Metabolism*, 33(2), 338-346.
- Echeverria, S., Diez-Roux, A. V., Shea, S., Borrell, L. N. and Jackson, S. (2008) 'Associations of neighborhood problems and neighborhood social cohesion with mental health and health behaviors: the Multi-Ethnic Study of Atherosclerosis', *Health and Place*, 14(4), 853-65.
- Eckersley, R. (2006) 'Is modern Western culture a health hazard?', *International Journal of Epidemiology*, 35(2), 252-8.
- Edley, N. (2001) 'Analysing masculinity: interpretive repertoires, ideological dilemmas and subject positions' in Wetherell, M., Taylor, S. and Yates, S., eds., *Discourse as Data: a guide for analysis*, London: Sage.
- EFILWC (2004) 'The automotive cluster in the West Midlands', *European Foundation for the Improvement of Living and Working Conditions*, available: <http://www.eurofound.europa.eu/emcc/publications/2004/ef0493en2.pdf> [accessed November 2011].
- Egol, M. and Vollmer, C. (2008) 'Major media in the shopping aisle', *Strategy and Business*, 53 (Winter), 68-79.
- Elfhag, K. and Rasmussen, F. (2008) 'Food consumption, eating behaviour and self-esteem among single v. married and cohabiting mothers and their 12-year-old children', *Public Health Nutrition*, 11(9), 934-939.
- Ellaway, A., Kirk, A., Macintyre, S. and Mutrie, N. (2007) 'Nowhere to play? The relationship between the location of outdoor play areas and deprivation in Glasgow', *Health and Place*, 13(2), 557-61.

- Ellaway, A., Macintyre, S. and Kearns, A. (2001) 'Perceptions of place and health in socially contrasting neighbourhoods', *Urban Studies*, 38(12), 2299-2316.
- Evans, J. and Hall, S. (1999) 'What is visual culture?' in Evans, J. and Hall, S., eds., *Visual Culture: the reader*, London: Sage in association with The Open University.
- Evans, J. and Jones, P. (2011) 'The walking interview: methodology, mobility and place', *Applied Geography*, 31, 849-858.
- Everts, J. and Jackson, P. (2009) 'Modernisation and the practices of contemporary food shopping', *Environment and Planning D: Society and Space*, 27, 917-935.
- Experian (2009) *Defining the West Midlands functional geographies: retail and leisure*, Advantage West Midlands (AWM) West Midlands Regional Observatory (WMRO).
- Falk, P. and Campbell, C. (1997) 'Introduction' in Falk, P. and Campbell, C., eds., *The Shopping Experience*, London: Sage, 1-14.
- Farralles, L. L. and Chapman, G. E. (1999) 'Filipino women living in Canada: constructing meanings of body, food, and health', *Health Care for Women International*, 20(2), 179-94.
- Fereday, J. and Muir-Cochrane, E. (2006) 'Demonstrating Rigor Using Thematic Analysis: A Hybrid Approach of Inductive and Deductive Coding and Theme Development', *International Journal of Qualitative Methods*, 5(1), 80-92.
- Findholt, N. E., Michael, Y. L. and Davis, M. M. (2011) 'Photovoice Engages Rural Youth in Childhood Obesity Prevention', *Public Health Nursing*, 28(2), 186-192.
- Fine, B. (1995) 'From Political Economy to Consumption' in Miller, D., ed. *Acknowledging Consumption: a review of new studies*, London: Routledge.
- Fine, B., Heasman, M. and Wright, J. (1998) 'What we eat and why: social norms and systems of provision' in Murcott, A., ed. *The nation's diet: The Social Science of Food Choice*, Harlow: Addison Wesley Longman.
- Fischler, C. (1988) 'Food, self and identity', *Social Science Information*, 27(2), 275-292.
- Fone, D., Dunstan, F., Williams, G., Lloyd, K. and Palmer, S. (2007) 'Places, people and mental health: A multilevel analysis of economic inactivity', *Social Science and Medicine*, 64(3), 633-645.

- Forsyth, A. J. M., MacIntyre, S. and Anderson, A. (1994) 'Diets for disease? Intra-urban variation in reported food consumption in Glasgow.', *Appetite*, 22(2), 259-74.
- Franco, M., Diez Roux, A. V., Glass, T. A., Caballero, B. and Brancati, F. L. (2008) 'Neighborhood characteristics and availability of healthy foods in Baltimore', *American Journal of Preventive Medicine*, 35(6), 561-7.
- Franko, D. L., Thompson, D., Bauserman, R., Affenito, S. G. and Striegel-Moore, R. H. (2008) 'What's love got to do with it? Family cohesion and healthy eating behaviors in adolescent girls', *International Journal of Eating Disorders*, 41(4), 360-367.
- French, S. A., Story, M., Fulkerson, J. A. and Faricy Gerlach, A. (2003) 'Food Environment in Secondary Schools: À La Carte, Vending Machines, and Food Policies and Practices', *American Journal of Public Health*, 93(7), 1161-1168.
- Frohlich, K. L., Corin, E. and Potvin, L. (2001) 'A theoretical proposal for the relationship between context and disease', *Sociology of Health and Illness*, 23(6), 776-797.
- Fulkerson, J. A., Neumark-Sztainer, D. and Story, M. (2006a) 'Adolescent and Parent Views of Family Meals', *Journal of the American Dietetic Association*, 106(4), 526-532.
- Fulkerson, J. A., Story, M., Mellin, A., Leffert, N., Neumark-Sztainer, D. and French, S. A. (2006b) 'Family Dinner Meal Frequency and Adolescent Development: Relationships with Developmental Assets and High-Risk Behaviors', *Journal of Adolescent Health*, 39(3), 337-345.
- Furst, T., Connors, M., Bisogni, C. A., Sobal, J. and Winter-Falk, L. (1996) 'Food Choice: A Conceptual Model of the Process', *Appetite*, 26, 247-266.
- Gallegos, D., Dziurawiec, S., Fozdar, F. and Abernethie, L. (2011) 'Adolescent experiences of 'family meals' in Australia', *Journal of Sociology*, 47(3), 243-260.
- Gergen, K. (2001) 'Self-Narration in Social Life' in Wetherell, M., Taylor, S. and Yates, S., eds., *Discourse Theory and Practice: a reader*, London: Sage.
- Giskes, K., Kampbuis, C. B. M., van Lenthe, F. J., Kremers, S., Droomers, M. and Brug, J. (2007) 'A systematic review of associations between environmental factors, energy and fat intakes among adults: is there evidence for environments that encourage obesogenic dietary intakes?', *Public Health Nutrition*, 10(10), 1005-1017.

- Glaser, B. G. and Strauss, A. L. (1967) *The Discovery of Grounded Theory: strategies for qualitative research*, Chicago: Aldine.
- Glaser, B. G. and Strauss, A. L. (2007) *The Discovery of Grounded Theory: strategies for qualitative research*, New Brunswick: Aldine Transaction.
- Gofton, L. (1995) 'Convenience and the moral status of consumer practices' in Marshall, D., ed. *Food Choice and the Consumer*, Glasgow: Blackie, 152-181.
- Golan, M., Kaufman, V. and Shahar, D. R. (2006) 'Childhood obesity treatment: targeting parents exclusively v. parents and children', *British Journal of Nutrition*, 95(5), 1008-15.
- Gram, M. (2010) 'Self-reporting vs. observation: some cautionary examples from parent/child food shopping behaviour', *International Journal of Consumer Studies*, 34, 394-399.
- Green, J., Waters, E., Haikerwal, A., O'Neill, C., Raman, S., Booth, M. L. and Gibbons, K. (2003) 'Social, cultural and environmental influences on child activity and eating in Australian migrant communities', *Child Care Health and Development*, 29(6), 441-448.
- Gregory, D. (2000) 'Symbolic interactionism' in Johnston, R. J., Gregory, D., Pratt, G. and Watts, M., eds., *The Dictionary of Human Geography*, Fourth ed., Oxford: Blackwell Publishers Ltd., 816-817.
- Gregson, N., Crewe, L. and Brooks, K. (2002) 'Shopping, space and practice', *Environment and Planning D: Society and Space*, 20(5), 597-617.
- Gregson, N. and Rose, G. (2000) 'Taking Butler elsewhere: performativities, spatialities and subjectivities', *Environment and Planning D: Society and Space*, 18(4), 433-452.
- Greves, H. M., Lozano, P., Liu, L., Busby, K., Cole, J. and Johnston, B. (2007) 'Immigrant families' perceptions on walking to school and school breakfast: a focus group study', *International Journal of Behavioral Nutrition and Physical Activity*, 4, 9.
- Grewal, D., Krishnan, R., Baker, J. and Borin, N. (1998) 'The effect of store name, brand name and price discounts on consumers' evaluations and purchase intentions', *Journal of Retailing*, 74(3), 331-352.
- Grieshaber, S. (1997) 'Mealtime rituals: power and resistance in the construction of mealtime rules', *British Journal of Sociology*, 48(4), 649-666.
- Gustafsson, U. and Draper, A. (2009) 'The social aspects of food and nutrition', *The Journal of Human Nutrition and Dietetics*, 22, 87-88.



- Hagerstrand, T. (1975) 'Space, time and human conditions' in Karlquist, A., Lundquist, L. and Snickars, F., eds., *Dynamic allocation of urban space*, Farnborough: Saxon House Studies, Lexington Books.
- Halcomb, E. J. and Davidson, P. M. (2006) 'Is verbatim transcription interview data always necessary?', *Applied Nursing Research*, 19(1), 38-42.
- Hammersley, M. and Atkinson, P. (1995) *Ethnography*, second ed., London: Routledge.
- Haque, N. and Rosas, S. (2010) 'Concept mapping of photovoices: sequencing and integrating methods to understand immigrants' perceptions of neighbourhood influences on health', *Family and Community Health*, 33(3), 193-206.
- Harper, D. (2002) 'Talking about pictures: a case for photo elicitation', *Visual Studies*, 17(1), 13-26.
- Head, E. (2009) 'The ethics and implications of paying participants in qualitative research', *International Journal of Social Research Methodology*, 12(4), 335-244.
- Headland, T. N., Pike, K. L. and Harris, M. (1990) *Emics and etics, the insider/outsider debate.*, *Frontiers of anthropology* 7, California: Sage Publishers.
- Hearn, M., Baranowski, T., Baranowski, J., Doyle, C., Smith, M. and Lin, L. (1998) 'Environmental influences of dietary behaviour among children: availability and accessibility of fruits and vegetables enable consumption.', *Journal of Health Education*, 29(1), 26-32.
- Hebdige, D. (1988) *Hiding in the Light: On Image and Things*, London: Comedia and Routledge.
- Hemphill, E., Raine, K., Spence, J. C. and Smoyer-Tomic, K. E. (2008) 'Exploring obesogenic food environments in Edmonton, Canada: The association between socioeconomic factors and fast-food outlet access', *American Journal of Health Promotion*, 22(6), 426-432.
- Henderson, C., Diez Roux, A. V., Jacobs, D. R., Jr., Kiefe, C. I., West, D. and Williams, D. R. (2005) 'Neighbourhood characteristics, individual level socioeconomic factors, and depressive symptoms in young adults: the CARDIA study', *Journal of Epidemiology and Community Health*, 59(4), 322-8.
- Henderson Research (2011) 'Super supermarkets', *Think/UK Supermarkets*, (HG142652/0211)available:  
<http://www.propertyweek.com/Journals/44/Files/2011/3/24/Henderson%20R>

[esearch%20Think-UK%20Supermarkets%20March%202011.pdf](#) [accessed November 2011].

Hill, R. P. (1993) 'A primer for ethnographic research with a focus on social policy issues involving consumer behaviour', *Advances in Consumer Research*, 20, 59-62.

Horodyski, M. A. and Arndt, M. J. (2005) "'Eating-together" mealtimes with African-American fathers and their toddlers', *Applied Nursing Research*, 18(2), 106-109.

Howard, E. (2007) 'New shopping centres: is leisure the answer?', *International Journal of Retail and Distribution Management*, 35(8), 661-672.

Hunt, G., Fazio, A., MacKenzie, K. and Moloney, M. (2011) 'Food in the family. Bringing young people back in', *Appetite*, 56, 394-402.

Hyman, I., Guruge, S., Makarchuk, M. J., Cameron, J. and Micevski, V. (2002) 'Promotion of healthy eating among new immigrant women in Ontario', *Canadian Journal of Dietetic Practice and Research*, 63(3), 125-129.

IDEA (2011) 'Tackling Obesities: the Foresight Report', *Improvement and Development Agency*, available: <http://www.idea.gov.uk/idk/core/page.do?pageId=8267926> [accessed November 2011].

Ilmonen, K. (2001) 'Sociology, consumption and routine' in Gronow, J. and Warde, A., eds., *Ordinary Consumption*, London: Routledge, 9-24.

Ilmonen, K. (2004) 'The Use of and Commitment to Goods', *Journal of Consumer Culture*, 4(1), 27-50.

Inman, J. J., Winer, R. S. and Ferraro, R. (2009) 'The Interplay Among Category Characteristics, Customer Characteristics, and Customer Activities on In-Store Decision Making', *Journal of Marketing*, 73(5), 19-29.

Jackson, P. (1999) 'Consumption and identity: The cultural politics of shopping', *European Planning Studies*, 7(1), 25-39.

Jackson, P., del Auguila, R. P., Clarke, I., Hallsworth, A., de Kervenoael, R. and Kirkup, M. (2006) 'Retail restructuring and consumer choice 2. Understanding consumer choice at the household level.', *Environment and Planning A.*, 38, 47-67.

Jackson, P. and Holbrook, B. (1995) 'Multiple meanings: shopping and the cultural politics of identity', *Environment and Planning A.*, 27, 1913-1930.

- Jackson, P., Oliver, S. and Smith, G. (2009) 'Myths of the family meal' in Jackson, P., ed. *Changing families, changing food*, New York: Palgrave MacMillan, 131-145.
- Jackson, P. and Thrift, N. (1995) 'Geographies of Consumption' in Miller, D., ed. *Acknowledging Consumption: a review of new studies*, London: Routledge.
- Jastran, M. M., Bisogni, C. A., Sobal, J., Blake, C. and Devine, C. M. (2009) 'Routine and ritual elements in family mealtimes: Contexts for child well-being and family identity', *Appetite*, 52, 127-136.
- Jerome, N. W. (1976) 'On Determining Food Patterns of Urban Dwellers in Contemporary United States Society' in Arnott, M. L., ed. *Gastronomy: The Anthropology of Food and Food Habits*, Berlin: De Gruyter Mouton, 91-112.
- JMP Consultants (2009a) *Accessibility Standard for Healthy Food: Literature Review Report*, London: Department of Health for the West Midlands.
- JMP Consultants (2009b) *Developing a physical accessibility standard for healthy food in the West Midlands*, London: Department of Health for West Midlands.
- Kearns, R. (1993) 'Place and health: towards a reformed medical geography', *The Professional Geographer*, 46, 111-15.
- Kearns, R. and Moon, G. (2002) 'From medical to health geography: novelty, place and theory after a decade of change', *Progress in Human Geography*, 26(5), 605-625.
- Kitchin, R. and Tate, N. J. (2000) *Conducting research into Human Geography: theory, methodology and practice*, Harlow: Prentice Hall.
- Kral, T. V. E. and Rauh, E. M. (2010) 'Eating behaviors of children in the context of their family environment', *Physiology and Behavior*, 100(5), 567-573.
- Krall, J. S. and Lohse, B. (2009) 'Interviews with Low-Income Pennsylvanians Verify a Need to Enhance Eating Competence', *Journal of the American Dietetic Association*, 109, 468-473.
- Kratt, P., Reynolds, K. and Shewchuk, R. (2000) 'The role of availability as a moderator of family fruit and vegetable consumption.', *Health Education and Behavior*, 27(4), 471-482.
- Kristensen, S. T. (2000) 'Social and cultural perspectives on hunger, appetite and satiety', *European Journal of Clinical Nutrition*, 54(6), 473-478.

- Kristensen, S. T., Holm, L., Raben, A. and Astrup, A. (2002) 'Achieving "proper" satiety in different social contexts - qualitative interpretations from a cross-disciplinary project, *Sociomaet*', *Appetite*, 39(3), 207-215.
- Kusenbach, M. (2003) 'Street Phenomenology: the go-along as ethnographic research tool', *Ethnography*, 4(2), 455-485.
- Kyle, R. and Blair, A. (2007) 'Planning for health: generation, regeneration and food in Sandwell', *International Journal of Retail and Distribution Management*, 35(6), 457-473.
- Larson, J. S., Bradlow, T. E. and Fader, P. S. (2005) 'An exploratory look at supermarket shopping paths', *International Journal of Research in Marketing*, 22(4), 395-414.
- Latham, A. (2003) 'Research, performance, and doing human geography: some reflections on the diary-photograph, diary-interview method', *Environment and Planning A*, 35, 1993-2017.
- Laurier, E. and Lorimer, H. (2007) 'Other ways: landscapes of commuting', *Institute of Geography - University of Edinburgh, Geographical and Earth Sciences - University of Glasgow*, available: [http://web2.ges.gla.ac.uk/~elaurier/habitable\\_cars/texts/Laurier\\_otherways.pdf](http://web2.ges.gla.ac.uk/~elaurier/habitable_cars/texts/Laurier_otherways.pdf) [accessed November 2011].
- Lawton, J., Ahmad, N., Hanna, L., Douglas, M., Bains, H. and Hallowell, N. (2008) 'We should change ourselves, but we can't': accounts of food and eating practices amongst British Pakistanis and Indians with type 2 diabetes', *Ethnicity and Health*, 13(4), 305-319.
- Leach, W. R. (1984) 'Transformations in a Culture of Consumption: Women and Department Stores, 1890-1925', *The Journal of American History*, 71(2), 319-342.
- Lewins, A. and Silver, C. (2009) 'Choosing a CAQDAS Package', *QUIC - Qualitative Innovations in CAQDAS Project*, available: <http://eprints.ncrm.ac.uk/791/1/2009ChoosingaCAQDASPackage.pdf> [accessed November 2011].
- Lewis, D. L. (2012) *UK, West Midlands and Sandwell* sheet School of Geography, Queen Mary, University of London,
- Li, H., Kuo, C. and Russell, M. G. (1999) 'The Impact of Perceived Channel Utilities, Shopping Orientations, and Demographics on the Consumer's Online Buying Behavior', *Journal of Computer-Mediated Communication*, 5(2) available: <http://jcmc.indiana.edu/vol5/issue2/hairong.html> [accessed November 2011].

- Longhurst, R., Johnston, L. and Ho, E. (2009) 'A visceral approach: cooking 'at home' with migrant women in Hamilton, New Zealand. ', *Transactions of the Institute of British Geographers*, 34, 333-345.
- Lowe, M. (2002) 'Commentary - Taking economic and cultural geographies seriously', *Tijdschrift voor Economische en Sociale Geografie*, 93(1), 5-7.
- MacFarlane, A., Cleland, V., Crawford, D., Campbell, K. and Timperio, A. (2009) 'Longitudinal examination of the family food environment and weight status among children', *International Journal of Pediatric Obesity*, 4(4), 343-352.
- Macintyre, S. (2000) 'The social patterning of exercise behaviours: the role of personal and local resources', *British Journal of Sports Medicine*, 34(1).
- Macintyre, S. (2007) 'Deprivation amplification revisited; or, is it always true that poorer places have poorer access to resources for healthy diets and physical activity?', *The International Journal of Behavioural Nutrition and Physical Activity*, 4, 32.
- Macintyre, S., Ellaway, A. and Cummins, S. (2002) 'Place effects on health: how can we conceptualise, operationalise and measure them?', *Social Science and Medicine*, 55(1), 125-39.
- Macintyre, S., Macdonald, L. and Ellaway, A. (2008a) 'Do poorer people have poorer access to local resources and facilities? The distribution of local resources by area deprivation in Glasgow, Scotland', *Social Science and Medicine*, 67(6), 900-14.
- Macintyre, S., Macdonald, L. and Ellaway, A. (2008b) 'Lack of agreement between measured and self-reported distance from public green parks in Glasgow, Scotland', *International Journal of Behavioural Nutrition and Physical Activity*, 5, 26.
- Macintyre, S., McKay, L., Cummins, S. and Burns, C. (2005) 'Out-of-home food outlets and area deprivation: case study in Glasgow, UK', *International Journal of Behavioural Nutrition and Physical Activity*, 2, 16.
- Marsden, T. and Wrigley, N. (1995) 'Regulation, retailing, and consumption', *Environment and Planning A.*, 27(12), 1899-1912.
- Marshall, D. (2005) 'Food as ritual, routine or convention', *Consumption, Markets and Culture*, 8(1), 69-85.
- Marshall, D. W. and Anderson, A. S. (2002) 'Proper meals in transition: young married couples on the nature of eating together', *Appetite*, 39(3), 193-206.
- Marshall, M. N. (1996) 'Sampling for qualitative research', *Family Practice*, 13(6), 522-525.

- Marshall, P. A. (2006) 'Informed Consent in International Health Research', *Journal of Empirical Research on Human Research Ethics: An International Journal*, 1(1), 25-42.
- Mason, J. (1996) *Qualitative Researching*, London: Sage.
- May, T. (1997) *Social research : issues, methods and process*, Third ed., Buckingham: Open University Press.
- McDowell, L. (1999) *Gender, identity and place: Understanding feminist geographies*, Cambridge: Polity.
- McGoldrick, P. J., Betts, E. J. and Wilson, A. F. (1999) 'Modelling consumer price cognition: Evidence from discount and superstore sectors', *Service Industries Journal*, 19(1), 171-193.
- McIntosh, W. A., Kubena, K. S., Tolle, G., Dean, W. R., Jan, J. and Anding, J. (2010) 'Mothers and meals. The effects of mothers' meal planning and shopping motivations on children's participation in family meals', *Appetite*, 55, 623-628.
- McKinnon, R. A., Reedy, J., Morrissette, M. A., Lytle, L. A. and Yaroch, A. L. (2009) 'Measurement of the Food and Physical Activity Environments ', *American Journal of Preventive Medicine*, 36(4 (supplement)), S124-S133.
- Metsec Plc (2012) *Company website*, available: <http://www.metsec.com/products/plc/overview-structure-Metsec.asp> [accessed June 2012].
- Middleton, J. D. (1990) 'The healthy Sandwell bike ride - Health promotion or a revelation on transport policy', *British Medical Journal*, 300(6720), 339.
- Mikkelsen, B. E. (2011) 'Images of foodscapes: Introduction to foodscape studies and their application in the study of healthy eating out-of-home environments', *Perspectives in Public Health*, 131(5), 209-216.
- Miller, D. (1995) 'Consumption as the Vanguard of History' in Miller, D., ed. *Acknowledging Consumption: a review of new studies.* , London: Routledge.
- Miller, D. (1997a) 'Consumption and its consequences' in McKay, H., ed. *Consumption and Everyday Life*, London: Sage, 13-64.
- Miller, D. (1997b) 'How infants grow mothers in North London', *Theory, Culture and Society*, 14(4), 67-88.
- Miller, D. (1998) *A Theory of Shopping*, Cambridge: Polity Press

- Miller, D. (2001) *The Dialectics of Shopping*, Chicago: The University of Chicago Press.
- Miller, D., Jackson, B., Holbrook, B., Thrift, N. and Rowlands, M. (1998) *Shopping, Place and Identity*, New York: Routledge.
- Miller, H. J. (1991) 'Modeling Accessibility Using Space-Time Prism Concepts Within Geographical Information Systems.', *International Journal of Geographical Information Science*, 5(4), 287-301.
- Miller, H. J. (2005) 'A Measurement Theory for Time Geography', *Geographical Analysis*, 37(1), 17-45.
- Mintz, S. (1985) *Sweetness and Power: The place of sugar in modern history*, New York: Viking Press.
- Mitchell, R., Gleave, S., Bartley, M., Wiggins, D. and Joshi, H. (2000) 'Do attitude and area influence health? A multilevel approach to health inequalities', *Health and Place*, 6(2), 67-79.
- Moore, L. V. and Diez Roux, A. V. (2006) 'Associations of neighborhood characteristics with the location and type of food stores', *American Journal of Public Health*, 96(2), 325-31.
- Moore, L. V., Diez Roux, A. V. and Brines, S. (2008a) 'Comparing Perception-Based and Geographic Information System (GIS)-based characterizations of the local food environment', *Journal of Urban Health*, 85(2), 206-16.
- Moore, L. V., Diez Roux, A. V., Evenson, K. R., McGinn, A. P. and Brines, S. J. (2008b) 'Availability of recreational resources in minority and low socioeconomic status areas', *American Journal of Preventive Medicine*, 34(1), 16-22.
- Morland, K., Diez Roux, A. V. and Wing, S. (2006) 'Supermarkets, other food stores, and obesity: the atherosclerosis risk in communities study', *American Journal of Preventive Medicine*, 30(4), 333-9.
- Morland, K., Wing, S. and Diez Roux, A. (2002a) 'The contextual effect of the local food environment on residents' diets: the atherosclerosis risk in communities study', *American Journal of Public Health*, 92(11), 1761-7.
- Morland, K., Wing, S., Diez Roux, A. and Poole, C. (2002b) 'Neighborhood characteristics associated with the location of food stores and food service places', *American Journal of Preventive Medicine*, 22(1), 23-9.
- Murcott, A. (1996) 'Food as an expression of National Identity' in Gustavsson, S. and Lewin, L., eds., *The Future of the Nation State*, Oxford: Routledge.

- Murcott, A. (1997) 'Family meals - a thing of the past?' in Caplan, P., ed. *Food, Health and Identity*, London: Routledge.
- Murcott, A. (1998) 'Food choice, the social sciences and 'The Nation's Diet' Research Programme' in Murcott, A., ed. *The Nation's Diet: The Social Science of Food Choice*, Harlow: Addison Wesley Longman.
- Murcott, A. (2002) 'Nutrition and inequalities - A note on sociological approaches', *European Journal of Public Health*, 12(3), 203-207.
- Murdoch, J. (2005) *Post-Structuralist Geography: A Guide to Relational Space*, London: Sage.
- Murphy, E. and Dingwall, R. (2007) 'Informed Consent, Anticipatory Regulation and Ethnographic Practice', *Social Science and Medicine*, 65(11), 2223-2234.
- NHS (16.01.08) 'Obesity', [online], available: <http://www.nhs.uk/Conditions/Obesity> [accessed 29.3.09].
- NHS (2011) 'National Child Measurement Programme (NCMP), England. 2010/11 School Year', *The Information Centre for Health and Social Care*, available: [www.ic.nhs.uk/ncmp](http://www.ic.nhs.uk/ncmp) [accessed November 2011].
- Nicolson, P. and Anderson, P. (2003) 'Quality of life, distress and self-esteem: A focus group study of people with chronic bronchitis', *British journal of Health Psychology*, 8(3), 251-270.
- O'Doherty Jensen, K. and Holm, L. (1999) 'Preferences, quantities and concerns: socio-cultural perspectives on the gendered consumption of foods', *European Journal of Clinical Nutrition*, 53(5), 351-9.
- O'Reilly, K. (2009) *Key Concepts in Ethnography*, Sage Key Concepts, London: Sage.
- Oliffe, J. L., Bottorff, J. L., Kelly, M. and Halpin, M. (2008) 'Analyzing participant produced photographs from an ethnographic study of fatherhood and smoking', *Research in Nursing and Health*, 31(5), 529-539.
- Oppewal, H., Timmermans, H. J. P. and Louviere, J. J. (1997) 'Modelling the effects of shopping centre size and store variety on consumer choice behaviour', *Environment and Planning A.*, 29(6), 1073-1090.
- Parker, S. and Keim, K. S. (2004) 'Emic perspectives of body weight in overweight and obese white women with limited income', *Journal of Nutrition Education and Behavior*, 36(6), 282-289.



- Pearson, T., Russell, J., Campbell, M. J. and Barker, M. E. (2005) 'Do 'food deserts' influence fruit and vegetable consumption?--A cross-sectional study', *Appetite*, 45(2), 195-7.
- Practica (2007) 'DC Slim 315', [online], available: <http://www.practica-uk.com/pdf/DC%20Slim%20315.pdf> [accessed 15/06/07].
- Prasad, P. (2005) *Crafting qualitative research: working in the postpositivist traditions*, New York: M.E. Sharpe.
- Pred, A. (1984) 'Place as Historically Contingent Process: Structuration and the Time- Geography of Becoming Places', *Annals of the Association of American Geographers*, 74(2), 279-297.
- Prentice, A. M. and Jebb, S. A. (2003) 'Fast foods, energy density and obesity: a possible mechanistic link', *Obesity Reviews*, 4(4), 187-194.
- Prus, R. C. (1996) *Symbolic interaction and ethnographic research: intersubjectivity and the study of human lived experience*, Albany: State University of New York Press.
- QMREC (2005) 'Queen Mary Research Ethics Committee: Procedure of Obtaining Ethical Approval of Research Ethics Committee for Research Involving Human Participants', available: <http://www.qmul.ac.uk/qmul/research/ethics/docs/EthicsCommitteeGuidanceNotes.pdf> [accessed December 2008].
- Quigley, P. (2008) *The Black Country: An Historic Landscape Characterisation: First Report*, Black Country Archaeology Service.
- Ram, R., Jerrard, B. and Husband, J. (2002) 'West Midlands: Still Managing to Survive' in Rath, J., ed. *Unravelling the rag trade: immigrant entrepreneurship in seven world cities*, Oxford: Berg.
- Rao, A. R. and Sieben, W. (1992) 'The effect of prior knowledge on price acceptability and the type of information examined', *Journal of Consumer Research*, 19, 256-270.
- Reed, A. (2002) 'City of details: interpreting the personality of London', *Journal of the Royal Anthropological Institute*, 8, 127-141.
- Rex, D. and Blair, A. (2003) 'Unjust des(s)erts: food retailing and neighbourhood health in Sandwell', *International Journal of Retail and Distribution Management*, 31(9), 439-465.
- Rice, M. and Broome, M. E. (2004) 'Incentives for Children in Research', *Journal of Nursing Scholarship*, 36(2), 167-172.

- Roberts, J. M. and Sanders, T. (2005) 'Before, during and after: realism, reflexivity and ethnography', *The Sociological Review*, 53(2), 294-313.
- Rock, P. (2001) 'Symbolic Interactionism and Ethnography' in Atkinson, P., ed. *Handbook of Ethnography*, London: Sage.
- Roos, E., Sarlio-Lähteenkorva, S. and Lallukka, T. (2004) 'Having lunch at a staff canteen is associated with recommended food habits ', *Public Health Nutrition*, 7(1), 53-61.
- Rose, G. (1993) *Feminism and Geography: The limits of Geographical Knowledge*, Minneapolis: University of Minnesota Press.
- Rose, G. (1997) 'Situating knowledges: positionality, reflexivities and other tactics', *Progress in Human Geography*, 21(3), 305-320.
- Rosenkranz, R. R. (2008) 'Model of the home food environment pertaining to childhood obesity', *Nutrition Reviews*, 66(3), 123-140.
- Roth, D. A., Herman, C. P., Polivy, J. and Pliner, P. (2001) 'Self-presentational conflict in social eating situations: a normative perspective', *Appetite*, 36(2), 165-171.
- Rubin, H. J. and Rubin, I. S. (2005) *Qualitative Interviewing: the art of hearing data*, Second ed., California: Sage.
- RUHBC (2008) 'Food, health, exercise and weight: The experiences and concerns of young teenagers from higher socio-economic status families', *Research Findings - Research Unit in Health Behaviour and Change (RUHBC): University of Edinburgh*,
- Ryan, G. W. and Bernard, H. R. (2000) 'Data management and analysis methods' in Denzin, N. and Lincoln, Y., eds., *Handbook of Qualitative Research*, 2nd ed., California: Sage, 769-802.
- Sallis, J. F. and Glanz, K. (2009) 'Physical Activity and Food Environments: Solutions to the Obesity Epidemic', *The Milbank Quarterly*, 87(1), 123-154.
- Sampson, H. (2004) 'Navigating the waves: the usefulness of a pilot in qualitative research', *Qualitative Research*, 4(3), 383-402.
- Sandwell Council (2012) 'The history of Sandwell', available: [http://www.sandwell.gov.uk/info/200064/local\\_history\\_and\\_heritage/1045/the\\_history\\_of\\_sandwell](http://www.sandwell.gov.uk/info/200064/local_history_and_heritage/1045/the_history_of_sandwell) [accessed November 2012].
- Sandwell MBC (2010) *Local Economic Assessment for the Black Country Borough of Sandwell - Policy and Strategy Unit, Economic Regeneration and Skills*.

- Sandwell PCT (2008a) 'Review of health needs across Sandwell', *Joint Strategic Needs Assessment*, available: [www.webwell.org.uk/JSNA](http://www.webwell.org.uk/JSNA) [accessed October 2010].
- Sandwell PCT (2008b) 'Invest Well – Priorities for Health, Year 2 – Meeting the Challenge 2009/10', *Joint Strategic Needs Assessment*, available: <http://www.sandwell.nhs.uk/documents/publications/Strategic%20Plan%20Year%202.pdf> [accessed October 2010].
- Sandwell PCT (2010a) *Green well, Green recovery, Green dividend: The three greens for health: Public Health Annual Report 2009/10*.
- Sandwell PCT (2010b) 'Sandwell Trends June 2010', available: [www.sandwelltrends.info](http://www.sandwelltrends.info) [accessed November 2011].
- Saunders, P. (2001) 'Access to Retail Outlets of Fresh Fruit and Vegetables in the West Midlands', available: <http://webcache.googleusercontent.com/search?q=cache:wluQJ0dZGHAJ:www.obesitywm.org.uk/resources/FoodMappingDocument.doc+Access+to+Retail+Outlets+of+Fresh+Fruit+and+Vegetables+in+the+West+Midlands&cd=1&hl=en&ct=clnk&gl=uk&client=firefox-a> [accessed November 2011].
- Savage, C. L., Xu, Y., Lee, R., Rose, B. L., Kappesser, M. and Anthony, J. S. (2006) 'A case study in the use of community-based participatory research in public health nursing', *Public Health Nursing*, 23(5), 472-478.
- Scarpello, T., Poland, F. and Wakeman, T. (2009) 'A qualitative study of the food-related experiences of rural village shop customers', *Journal of Human Nutrition and Dietetics*, 22, 108-115.
- Shankar, A., Elliott, R. and Fitchett, J. A. (2009) 'Identity, consumption and narratives of socialization', *Marketing Theory*, 9(1), 75-94.
- Shatenstein, B. and Ghadirian, P. (1998) 'Influences on diet, health behaviours and their outcome in select ethnocultural and religious groups', *Nutrition*, 14(2), 223-230.
- Shaw, M., Dorling, D. and Mitchell, R. (2002) *Health, Place and Society*, Harlow: Pearson Education Limited.
- Shohaimi, S., Welch, A., Bingham, S., Luben, R., Day, N., Wareham, N. and Khaw, K. (2004) 'Residential area deprivation predicts fruit and vegetable consumption independently of individual educational level and occupational social class: a cross sectional population study in the Norfolk cohort of the European Prospective Investigation into Cancer (EPIC-Norfolk).', *Journal of Epidemiology and Community Health*, 58, 686-691.

- Shouls, S., Congdon, P. and Curtis, S. (1996) 'Modelling inequality in reported long term illness in the UK: combining individual and area characteristics', *Journal of Epidemiology and Community Health*, 50(3), 366-76.
- Smit, B. and Fritz, E. (2008) 'Understanding teacher identity from a symbolic interactionist perspective: two ethnographic narratives', *South African Journal of Education*, 28, 91-101.
- Sorensen, A. (2008) 'Use of QSR NVivo 7 qualitative analysis software for mixed methods research', *Journal of Mixed Methods Research*, 2(1), 106-108.
- Spinney, J. (2009) 'Cycling and the City: Movement and Method', *Geography Compass*, 3(2), 817-835.
- Stafford, M., Bartley, M., Mitchell, R. and Marmot, M. (2001) 'Characteristics of individuals and characteristics of areas: investigating their influence on health in the Whitehall II study', *Health and Place*, 7(2), 117-129.
- Stewart, A. and Rao, J. N. (2000) 'Do Asians with diabetes in Sandwell receive inferior primary care? A retrospective cohort study', *Journal of the Royal Society for the Promotion of Health*, 120(4), 248-254.
- Story, M. (2005) 'A perspective on Family Meals: Do They Matter?', *Nutrition Today*, 40(6), 261-266.
- Story, M., Kaphingst, K. M., Robinson-O'Brien, R. and Glanz, K. (2008) 'Creating healthy food and eating environments: policy and environmental approaches', *Annual Review of Public Health*, 29, 253-72.
- Suddaby, R. (2006) 'From the editors: what grounded theory is not', *Academy of Management Journal*, 49(4), 633-642.
- Svee, E. O., Sanches, P. and Bylund, M. (2009) *Time Geography Rediscovered: A Common Language for Location-Oriented Services*, translated by Boston: Association for computing machinery.
- Swinburn, B. and Egger, G. (2002) 'Preventive strategies against weight gain and obesity', *Obesity Reviews*, 3(4), 289-301.
- Takashashi, L. M., Wiebe, D. and Rodreiguez, R. (2001) 'Navigating the time-space context of HIV and AIDS: daily routines and access to care', *Social Science and Medicine*, 53, 845-863.
- Tan, M. T. K., Wang, X. W. and Zhu, L. (2008) 'Interactionist Ethnography Symbolic Interactionist Ethnography: Implications for Information Systems (IS) Research and Practice', *LSE*, available: <http://is2.lse.ac.uk/asp/aspecis/20030155.pdf> [accessed October 2010].

- Task Force on Childhood Obesity (2010) 'Let's Move', available: [www.letsmove.gov](http://www.letsmove.gov) [accessed November 2011].
- Think Sandwell (2012a) 'Sandwell Strengths', [online], available: <http://www.thinksandwell.com/our-economy/sandwell-strengths/> [accessed November 2011].
- Think Sandwell (2012b) 'Food Production', [online], available: <http://www.thinksandwell.com/our-economy/sandwell-strengths/food-production/> [accessed November 2011].
- Thorne, S. (2000) 'Data analysis in qualitative research', *Evidence Based Nursing*, 3, 68-70.
- Thornton, L. E., Crawford, D. A. and Ball, K. (2011) 'Who is eating where? Findings from the SocioEconomic Status and Activity in Women (SESAW) study', *Public Health Nutrition*, 14(3), 523-531.
- Thrift, N. (1977) 'An Introduction to Time Geography', *Concepts and Techniques in Modern Geography*, 13 available: <http://www.qmrg.org.uk/files/2008/11/13-time-geography.pdf> [accessed November 2011].
- Thrift, N. and Dewsbury, J. D. (2000) 'Dead geographies and how to make them live', *Environment and Planning D: Society and Space*, 18, 411-432.
- Timmermans, H. J. P. (1982) 'Consumer choice of shopping centre: an information integration approach', *Regional Studies*, 16(3), 171-182.
- Turo-Kimmo, L. and Mäenpää, P. (1997) 'Shopping in the East Centre Mall' in Falk, P. and Campbell, C., eds., *The Shopping Experience*, London: Sage, 136-165.
- Valentine, G. (1999a) 'A corporeal geography of consumption', *Environment and Planning D-Society and Space*, 17(3), 329-351.
- Valentine, G. (1999b) 'Eating in: home, consumption and identity', *Sociological Review*, 47(3), 491-524.
- Vivitar (2010) 'ViviCam 5018', [online], available: <http://www.vivitar.com/products/1/digital-cameras/19/vivicam-5018> [accessed 15/06/07].
- Von Korff, M., Koepsell, T., Curry, S. and Diehr, P. (1992) 'Multi-level analysis in epidemiologic research on health behaviors and outcomes', *American Journal of Epidemiology*, 135(10), 1077-82.
- Voordouw, J., Cornelisse-Vermaat, J. R., Yiakoumaki, V., Theodoridis, G., Chryssochoidis, G. and Frewer, L. J. (2009) 'Food allergic consumers'

- preferences for labelling practices: a qualitative study in a real shopping environment', *International Journal of Consumer Studies*, 33, 94-102.
- Wanat, C. L. (2008) 'Getting Past the Gatekeepers: Differences Between Access and Cooperation in Public School Research', *Field Methods*, 20(2), 191-208.
- Wang, M. C., Gonzalez, A. A., Ritchie, L. D. and Winkleby, M. A. (2006) 'The neighborhood food environment: sources of historical data on retail food stores', *International Journal of Behavioural Nutrition and Physical Activity*, 3(1).
- Wanjek, C. (2005) *Food at work: workplace solutions for malnutrition, obesity and chronic diseases*, Geneva: International Labour Office.
- Wansink, B. (2004) 'Environmental factors that increase the food intake and consumption volume of unknowing consumers', *Annual Review of Nutrition*, 24, 455-79.
- Waq, G. and Mavo, H. (2006) 'Sociocultural factors influencing the food choices of 16-18 year-old indigenous Fijian females at school', *Pacific Health Dialog*, 13(2), 57-64.
- Warde, A. (1999) 'Convenience food: space and timing', *British Food Journal*, 101(7), 518-527.
- Warin, M., Turner, K., Moore, V. and Davies, M. (2008) 'Bodies, mothers and identities: rethinking obesity and the BMI', *Sociology of Health and Illness*, 30(1), 97-111.
- Wesley, S., LeHew, M. and Woodside, A. G. (2006) 'Consumer decision-making styles and mall shopping behavior: Building theory using exploratory data analysis and the comparative method', *Journal of Business Research*, 59, 535-548.
- Whan Park, C., Iyer, E. S. and Smith, D. C. (1989) 'The effects of situational factors on in-store grocery shopping behaviour: the role of store environment and time available for shopping', *Journal of Consumer Research*, 15, 422-433.
- Wiggins, S. (2004) 'Talking about taste: using a discursive psychological approach to examine challenges to food evaluations', *Appetite*, 43(1), 29-38.
- Willets, A. (1997) '*Bacon sandwiches got the better of me*' Meat-eating and vegetarianism in South-East London' in Caplan, P., ed. *Food, Health and Identity*, London: Routledge.
- Williams, L., Ball, K. and Crawford, D. (2010) 'Why do some socioeconomically disadvantaged women eat better than others? An investigation of the

personal, social and environmental correlates of fruit and vegetable consumption.', *Appetite*, 55, 441-446.

Williams, T. (1985) 'Behavioral characteristics of the recreational shopper and implications for retail management ', *Journal of the Academy of Marketing Science*, 13(3), 307-316.

Wills, W., Appleton, J. V., Magnusson, J. and Brooks, F. (2008a) 'Exploring the limitations of an adult-led agenda for understanding the health behaviours of young people', *Health and Social Care in the Community*, 16(3), 244-252.

Wills, W., Backett-Milburn, K., Gregory, S. and Lawton, J. (2005) 'The influence of the secondary school setting on the food practices of young teenagers from disadvantaged backgrounds in Scotland', *Health Education Research*, 20(4), 458-465.

Wills, W., Backett-Milburn, K., Gregory, S. and Lawton, J. (2008b) 'If the food looks dodgy I dinnae eat it': Teenagers' accounts of food and eating practices in socio-economically disadvantaged families', *Sociological Research Online*, 13(1-2).

Wills, W., Backett-Milburn, K., Roberts, M. and Lawton, L. (2011) 'The framing of social class distinctions through family food and eating practices', *The Sociological Review*, 59(4), 725-740.

Wills, W. J., Backett-Milburn, K., Lawton, J., Mackinon, D. and Roberts, E. M. (2009) *Parents' and Teenagers' Conceptions of Diet, Weight and Health: Does Class Matter?*, Centre for Research in Primary and Community Care.

Wilson, N., Thomson, G. and Jenkin, G. (2007) 'More evidence for action on New Zealand's obesogenic school environment and food pricing', *New Zealand Medical Journal*, 120(1248), U2397.

WMPHO (2010) 'Access by walking to locations selling healthy food in Sandwell', *West Midlands Public Health Observatory: Access to Food West Midlands Mapping* [online], available: [http://www.foodwm.org.uk/panlinks.aspx?id=FOOD\\_ACCSS\\_FOOD\\_WM\\_MAPPING](http://www.foodwm.org.uk/panlinks.aspx?id=FOOD_ACCSS_FOOD_WM_MAPPING) [accessed November 2011].

WMRO (2008) 'West Midlands Regional Economic Assessment: Sandwell', [online], available: [http://www.wmro.org/resources/res.aspx?p=/CmsResource/resourceFilename/2245/RIEA-Sandwell\\_v3.0\\_Report\\_SH.pdf&r=b8JLurR7hc](http://www.wmro.org/resources/res.aspx?p=/CmsResource/resourceFilename/2245/RIEA-Sandwell_v3.0_Report_SH.pdf&r=b8JLurR7hc) [accessed September 2010].

Woodruff, S. J. and Hanning, R. M. (2008) 'A review of family meal influence on adolescents' dietary intake', *Canadian Journal of Dietetic Practice and Research*, 69(1), 14-22.

- Woodruffe-Burton, H., Eccles, S. and Elliott, R. (2006) 'Towards a theory of shopping: A holistic framework', *Journal of Consumer Behaviour*, 1(3).
- Woodward, I. (2007) *Understanding Material Culture*, London: Sage.
- Wrigley, N. (1992) 'Anti trust regulation and the restructuring of grocery retailing in Britain and the USA', *Environment and Planning A.*, 24(5), 727-749.
- Wrigley, N. (1997) 'British food retail capital in the USA - Part 1: Sainsbury and the Shaw's experience', *British Food Journal*, 99(11), 412-426.
- Wrigley, N., Branson, J., Murdock, A. and Clarke, G. (2009) 'Extending the Competition Commission's findings on entry and exit of small stores in British high streets: implications for competition and planning policy', *Environment and Planning A.*, 41, 2063-2085.
- Wrigley, N. and Marston, S. A. (2002) 'Guest Editorial', *Tijdschrift voor Economische en Sociale Geografie*, 93(1), 3-4.
- Wylie, J. (2005) 'A single day's walking: narrating self and landscape on the South West Coast Path', *Transactions of the Institute of British Geographers*, 30(2), 234-247.
- Wylie, J. (2009) 'Landscape, absence and geographies of love', *Transactions of the Institute of British Geographers*, 34(3), 275-289.
- Yannakouli, M., Papanikolaou, K., Hatzopoulou, I., Efstathiou, E., Papoutsakis, C. and Dedoussis, G. V. (2008) 'Association between family divorce and children's BMI and meal patterns: The GENDAI Study', *Obesity*, 16(6), 1382-1387.
- Zehle, K., Wen, L. M., Orr, N. and Rissel, C. (2007) "'It's not an issue at the moment" - A qualitative study of mothers about childhood obesity', *American Journal of Maternal-Child Nursing*, 32(1), 36-41.
- Zenk, S., Schultz, A., Israel, B., Kames, S., Bao, S. and Wilson, M. (2005) 'Neighborhood racial composition, neighborhood poverty, and the spatial accessibility of supermarkets in metropolitan Detroit. ', *American Journal of Public Health*, 95(4), 660-667.
- Zenk, S. N., Schultz, A. J., Israel, B. A., James, S. A., Bao, S. and Wilson, M. L. (2006) 'Fruit and vegetable access differs by community racial composition and socioeconomic position in Detroit, Michigan.', *Ethnicity and Disease*, 16, 275-280.



Ziebland, S. and McPherson, A. (2006) 'Making sense of qualitative data analysis: an introduction with illustration from DIPex (personal experiences of health and illness)', *Medical Education*, 40, 405-416.

## Appendix

### 3.1: Recruitment materials

#### a) Poster for display



## b) Information sheet with return-slip for study participation

### Food and food shopping in your local neighbourhood



#### Information for participants

We would like to invite you to be part of this research project, if you would like to. You should only agree to take part if you want to, it is entirely up to you. If you choose not to take part there won't be any disadvantages for you and you will hear no more about it.

Please read the following information carefully before you decide to take part; this will tell you why the research is being done and what you will be asked to do if you take part. Please ask if there is anything that is not clear or if you would like more information. If you decide to take part you will be asked to sign the attached form to say that you agree. You are still free to withdraw at any time and without giving a reason.

This study looks at factors that affect food choices and behaviours. I am interested in exactly what foods you buy, prepare and eat, and how you make decisions about food.

If you agree to take part in this study you will be asked to participate in the following activities:

- Take a digital camera around with you for four days and photograph the food you eat.
- Be interviewed about the photographs and your general food practices for about an hour or so. These interviews will be anonymous and can be conducted in your own home or any other community space at a time that is appropriate for you.
- Lastly, we would like to actually go with you when you buy food and ask you why and how you choose what to buy. Ideally, a researcher will accompany you on a trip to the supermarket or a walk to your local take away.

The information provided will be kept safely and confidentially. You will be able to see the final study when it is written up. At the end of the study you can keep the camera, we just need the memory card back.

It is up to you to decide whether or not to take part. If you are willing to take part please provide your contact details and I will be in touch shortly. Alternatively, you can email me at [c.thompson@qmul.ac.uk](mailto:c.thompson@qmul.ac.uk)

Please tear off this part, fill it in and post it to **Claire Thompson, Department of Geography, Queen Mary, University of London, Mile End Road, London E1 4NS. Tel: 020 7882 8200**

Name	
Address	
Phone Number(s)	
Email (optional)	

### 3.2: Participant pack

## Food and food shopping in your local neighbourhood

A study into the factors affecting food choices.

## PARTICIPANT PACK

Information, resources and contact details for participants



### FOOD AND FOOD SHOPPING IN YOUR LOCAL NEIGHBOURHOOD

Claire Thompson,  
Department of Geography,  
Queen Mary, University of London,  
Mile End Road,  
London E1 4NS.

Phone: 020 7862 6300  
E-mail: c.thompson@qmul.ac.uk



## Participant pack

### Food and food shopping in your local neighbourhood



#### Information for participants

We would like to invite you to be part of this research project, if you would like to. You should only agree to take part if you want to, it is entirely up to you. If you choose not to take part there won't be any disadvantages for you and you will hear no more about it.

Please read the following information carefully before you decide to take part; this will tell you why the research is being done and what you will be asked to do if you take part. Please ask if there is anything that is not clear or if you would like more information. If you decide to take part you will be asked to sign the attached form to say that you agree. You are still free to withdraw at any time and without giving a reason.

This study looks at factors that affect food choices and behaviours. I am interested in exactly what foods you buy, prepare and eat, and how you make decisions about food.

If you agree to take part in this study you will be asked to participate in the following activities:

- Take a digital camera around with you for four days and photograph the food you eat.
- Be interviewed about the photographs and your general food practices for about an hour or so. These interviews will be anonymous and can be conducted in your own home or any other community space at a time that is appropriate for you.
- Lastly, we would like to actually go with you when you buy food and ask you why and how you choose what to buy. Ideally, a researcher will accompany you on a trip to the supermarket or a walk to your local take away.

The information provided will be kept safely and confidentially. You will be able to see the final study when it is written up. At the end of the study you can keep the camera, we just need the memory card back.

## Food and food shopping in your local neighbourhood

Page 1



 Queen Mary  
University of London

### Instructions for food photo-log

Thank you for agreeing to undertake the food photo-log exercise. The researcher issuing you with the digital camera should ask you to sign for it and explain to you how it works.

The aim of giving out the cameras is for you to photograph what you eat and drink, where and with whom. We would like to understand why and how you make choices about food.

#### What do I take pictures of?

For the next **4 days** we would like you to take a photograph of everything you eat and drink, where you eat it or buy it from, and who is with you.

We don't need you to write anything down, unless of course you want to, just take pictures.

Remember, every time you eat we are interested in:

**What**

**Where**

**Who with?**

For example, a typical day might include things like .....

A breakfast of toast and cereal and tea, eaten on your own in your kitchen



## Participant pack

### Food and food shopping in your local neighbourhood

Page 2



A fizzy drink for a snack, bought on the way to work with a friend



A takeaway meal in the evening with your partner, eaten at home



Remember, we would like you to take photographs every time you eat. We will provide a memory card and batteries with the camera because, as you can imagine, this likely to involve a lot of photographs. On completion of the activity we will collect the memory card and arrange a time to talk about the photographs.

During the food photo-log exercise we will ring you to check on how it is going and answer any queries. If you have any questions or problems during the activity please contact:

**Claire Thompson on 020 7882 8200**  
or email [c.thompson@qmul.ac.uk](mailto:c.thompson@qmul.ac.uk)

## Participant pack

### Food and food shopping in your local neighbourhood



#### Using a digital camera


Using a digital camera is just like taking photographs with an ordinary camera, just without the film. The basics remain the same:

- **Point the camera**
- **Press the button**



The digital camera has a little screen at the back, called **the LCD screen**, that shows you what you are pointing the camera at. After you have pressed the button this screen will show you what your photograph looks like.

Once you have taken the photograph it is stored in the camera. If you don't like it or you think you have missed something out you can simply delete it and take another.

- We will provide you with some batteries, as digital cameras use a lot of power and you will need to change them regularly.
- We will also put a memory card in the digital camera for you. When you have finished the food photo-log exercise we will take the memory card back and leave you with the camera. 
- You will be given your own printed copy of your food photographs at the interview.

**If you experience any difficulties please contact Claire Thompson at address / email / phone number provided.**



## Participant pack

### Food and food shopping in your local neighbourhood



#### Contact Information Card

Participant Code .....

If you have any questions about the research or would like to recommend someone to participate please contact:

Claire Thompson  
Department of Geography,  
Queen Mary, University of London,  
Mile End Road, London E1 4NS.  
Tel: 020 7882 8200

[c.thompson@qmul.ac.uk](mailto:c.thompson@qmul.ac.uk)



## Participant pack

### Food and food shopping in your local neighbourhood



#### Photo-log note sheets

You may find, when doing the food photo-log exercise, that you want to note down locations, thoughts or any other information that you think you might forget. Or, you may be perfectly happy just to take photographs.

If you do not feel comfortable taking photographs in certain situations you may want to just make a note of where you are or who you are with instead.

<b>DAY ....</b>
<b>DAY .....</b>
<b>DAY ....</b>
<b>DAY ....</b>

### 3.3: – Photovoice interview schedule

## Interview schedule for photovoice interviews

Thank participant for their photovoice data and agreeing to interview.

### Interview schedule

1) Can you tell me about your experience of the food photo-log exercise?  
(narrative)

- did you enjoy it?

(Follow-up on any difficulties or challenges experienced in order to refine the instructions and/or the exercise)

*Ask the participant to divide the photographs according to which day they were taken (this should not be too difficult as the photographs will be in the order they were taken and pre-numbered).*

2) For each of the 4 days:

Can you talk me through the photographs for this day (narrative)

Follow –ups / prompts:

- Can you remember at roughly what time you took this photograph?
- How do you know this person? Can you tell me about them?
- What made you choose to go to this shop / restaurant / take away / supermarket etc.?
- What made you choose \_\_\_\_\_ for a meal / drink / snack?

Establish context and typical practices by prompting:

- Is this what you normally eat on this day / at this time / when at work etc?
- Do you normally eat out? / Where do you eat out?

3) Do you think that you eat and drink different things around different people?

Prompts

- Can you give me an example of that?
- How would you explain those differences?

4) Does the time of day affect your food choices?

Prompts

- Can you give me an example of that?

5) Tell me about the people in your photographs and how you know them?  
(ask the participants to group their social contacts i.e. immediate family, work friends etc.)

Prompts

- When / where do you see them?
- What sort of things do you do when you are together?

6)

a) Is there anything in your personal history that makes you choose certain types of food?

Prompts

- Do you buy the same foods as your parents did?
- Do you cook the same way as your parents did?

– these questions need to touch on issues of identity and culture.

b) How do the people you live with or the people you know effect how you think about food?

Prompts

- Do you buy the same foods as your parents did?
- Do you cook the same way as your parents did?
- Do you eat the same foods as your partner / children / housemates / friends / people in the photographs etc.?

7) Is there anything else you would like to tell me about your food choices?

8) Do you have any questions you would like to ask me?

Thank the participant for their time and raise the question of when and where to conduct the go-along interview. A possible activity or venue may well be emergent from the interview.



### 3.5: Go-along procedure and interview schedule

## Go-along interview procedure

Suitable activities and venues for the go-along interviews should be emergent from the photovoice and narrative interview data. At present the preferred food-related activity for the go-alongs is the weekly/regular food shop for the household. This activity may be touched upon in the photovoice and/or narrative interviews. However, neither of these methods of data collection can capture the activity in as much detail as observational methods.

Preferably, participants will be interviewed alone to ensure that recording, transcribing and analysis remains as straightforward as possible. It is likely, however, that other individuals, especially household members, will be present on some occasions. All interviews will be recorded. Given that some of the interviews will be conducted in busy and noisy areas I will also take fieldnotes throughout and write-up the encounter at its immediate conclusion. In addition, I intend to take a digital camera with me to record the food outlet we visit and any significant locations or landmarks that we encounter on the way.

### Interview Schedule

The go-along interview will be the final stage of the data collection process and, as a result, will be an opportunity to follow-up topics raised in previous data collection stages and clarify issues. In which case, a mostly semi-structured interview format, as opposed to an open-ended format (Carpiano 2009), would be appropriate. It will not be possible to design these types of questions until I have collected and reviewed the photovoice and narrative interview data.

The go-along is particularly useful for investigating spatial practice and environmental perception (Kusenbach 2003). Interview topics will, therefore centre on participants' interpretations of their contexts and how this guides their food-related decisions

<b>Interview schedule / topics</b>
<p><i>Meet participant at agreed location from which go-along will proceed, preferably their home for ease of preparation and setting-up recording equipment.</i></p> <p><i>(Test recording equipment)</i></p>

1) Explain to me where we are going and why we are going there  
- explore issues of choice, frequency and decision-making

2) Do you normally come here on your own? Why?

*\*\*Point out other food outlets on the way (if there are any) and ask what they think of them and do they use them.*

3) Travelling:

- do you consider this a long way to travel?
- why do you take this particular route?
- do you enjoy the journey? Why?

4) On arrival at the food outlet:

- why do you choose to eat/shop here in favour of closer / Cheaper / alternative outlets?
- ask participants to explain their food choices as they are making them
  - Do you always buy that?
  - Who is that for?
  - Why did you choose that one?

*\*If I am permitted to accompany the participants on the journey back this would be the most appropriate time to clarify issues and topics from earlier research stages. The participants will already have been talking about food and food choices for some time and will be more receptive to making connections and comparisons.*

At the close of interview participants will be thanked for their time and contribution, and informed that they will be sent a summary of the research findings.

### 3.6: Ethical approval

## Queen Mary Research Ethics Committee

To: Dr Steven Cummins, Dr Tim Brown, Ms Claire Thompson


Ref no: QMREC2009/54
<p><b>Title of study: – Consumption and the built environment: exploring spatial and cultural influences on food practices.</b></p> <p>was considered by QMREC on 11<sup>th</sup> November 2009.</p>
<p>The Committee <b>conditionally approved</b> this proposal.</p>
<p>The Committee <b>thanked</b> the researcher for attending the meeting and answering questions on her study. The Committee would give a favourable decision to the study, subject to receiving a satisfactory response to the following points; authority to consider the response and to confirm the Committee’s decision was <b>delegated</b> to Qazi Rahman.</p> <ul style="list-style-type: none"><li>a) The Consent Form should be amended to clarify to participants that they should seek consent from any person that they decide to photograph. They needed to be advised that such a photograph might be used in research.</li><li>b) The Information Sheet needed to be amended so that the participants were clear in advance as to what types of activities might take place (shopping trips etc.). The researcher is advised to use bullet points for clarity.</li><li>c) The Information Sheet should be amended to mention digital as opposed to disposable cameras and state that the participants would be allowed to keep them at the end of the study.</li></ul>
<p>Further action:</p> <p>Kindly comment on the above points (addressing each in turn), and send them to the secretary to QMREC.</p> <p>In the event of any problems or queries, do not hesitate to contact Ms Covill direct – 020 7882 2207.</p>
<p>Signed: Hazel Covill, Secretary to QMREC (on behalf of the Committee)</p>
<p>Dated: 16<sup>th</sup> November 2009</p>



### 3.7: Informed consent form

**Food and food shopping in your local neighbourhood**

**Consent form**



Please complete this form after you have read the Information Sheet and/or listened to an explanation about the research.

Study title: **Food and food shopping in your local neighbourhood**

Queen Mary Research Ethics Committee Ref: .....

Thank you for considering taking part in this research. The person organizing the research must explain the project to you before you agree to take part.

If you have any questions arising from the Information Sheet or explanation already given to you, please ask the researcher before you decide whether to join in. You will be given a copy of this Consent Form to keep and refer to at any time.

*I understand that if I decide at any other time during the research that I no longer wish to participate in this project, I can notify the researchers involved and be withdrawn from it immediately.*

*I consent to the processing of my personal information for the purposes of this research study. I understand that such information will be treated as strictly confidential and handled in accordance with the provisions of the Data Protection Act 1998.*

**Participant 's Statement:** I ..... agree that the research project named above has been explained to me to my satisfaction and I agree to take part in the study. I have read both the notes written above and the Information Sheet about the project, and understand what the research study involves.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact number: \_\_\_\_\_

**Investigator 's Statement:** I ..... confirm that I have carefully explained the nature, demands and any foreseeable risks (where applicable) of the proposed research to the volunteer.

### 3.8: Photovoice consent form

## Food and food shopping in your local neighbourhood

Page 1



 Queen Mary  
University of London

### Photo-log consent form

Please complete this form after you have listened to an explanation about this particular stage of research and data collection.

Study title: Food and food shopping in your local neighbourhood

Queen Mary Research Ethics Committee Ref: \_\_\_\_\_

Thank you for considering taking part in this stage of the research. The person organizing the research must explain the exact nature of the food photo-log exercise, what we intend to do with the images and how they will be anonymised ( where appropriate ).

You will be given a copy of this Consent Form to keep and refer to at any time.

As part of the food photo-log exercise you have been asked to take photographs of the people you eat with. It is important that you ask permission when taking photographs of these people and explain to them that the images will be used for research and anonymised. Some of you may wish to include the children in your household in these pictures. If you decide to include children in the food-photographs then we need to obtain your consent to use these images as data. Meaning that the images will first be anonymised and the data subsequently used for analytical and purposes and presentations. You are only required to take pictures in situations that you feel comfortable in doing so..

**All images will be anonymised, meaning that the faces of everyone in the photographs will be blanked out.**

## Photovoice consent form

### Food and food shopping in your local neighbourhood

Page 2



*I give my consent that the images I capture as part of the food photo-log exercise can be stored, anonymised and analyzed.*

#### Participant 's Statement:

I \_\_\_\_\_ agree that the food photo-log data collection exercise has been explained to me to my satisfaction and I agree to the images I record being used as data for the study.

Signed:

Date:

Name:

Address:

Contact number:

#### Investigator 's Statement:

I \_\_\_\_\_ confirm that I have carefully explained the nature, demands and requirements of the food photo-log exercise and what will be done with the images recorded.

### 3.9: Risk Assessment



#### Fieldwork Risk Assessment RISK ASSESSMENT FORMS

<b>Type of fieldwork:</b>		PhD study data collection (Human Geography). One-to-one interviews with participants and the issuing and collecting of cameras for a food photo-diary exercise. (eg independent student project, research, supervised field trip)	
<b>Dates:</b>	<b>From</b>	November 2009	
	<b>To</b>	June 2010	
<b>Location(s) of work:</b>		Sandwell Metropolitan Borough Council.	
<b>Address of residential base:</b> I will be working from, but not residing at:			
Sandwell PCT, Suite 27			
Vision Point, Vaughn Trading Estate			
Sedgley Road East, Tipton DY4 7UJ			

#### RISK ASSESSMENT

HAZARDS	Risk High/ med/ low	RISK REDUCTION ACTIONS
<b>Physical hazards</b> (e.g. extreme weather; mountains and cliffs, quarries, marshes and quicksand; fresh or seawater)	N/A	N/A
<b>Biological hazards</b> (e.g. poisonous plants; aggressive animals, soil or water micro organisms; insects)	N/A	N/A
<b>Chemical hazards</b> (e.g. pesticides; dusts; contaminated soils; chemicals brought into site)	N/A	N/A
<b>Man-made hazards</b> (e.g. electrical equipment; vehicles, insecure buildings; slurry pits; power and pipelines)	N/A	N/A
<b>Personal safety hazards</b> (e.g. lone working, attack on person or property)	Low	I will take a map of the local area to ensure I do not get lost. If possible I will visit the location in advance.

<p>I will be interviewing participants one-to-one either in public spaces, such as cafes and libraries, or in their own homes. In both instances this will be by appointment.</p>		<p>I will check public transport links before I leave and have the number of a trusted taxi firm (I will ask Sandwell PCT staff for this).</p> <p>I will not go into someone's home if the person I am supposed to be interviewing is not in.</p> <p>I will not give any personal information or contact detail to participants</p> <p>I will leave an interview immediately if I start to feel uncomfortable and prepare what I should say should I need to do this.</p> <p>I will carry a personal alarm with me</p> <p>I will ensure that I have enough money with me to get a taxi and use a public telephone.</p> <p>In order to maintain contact I will have a nominated party (my supervisor or a member of the PCT staff) who I will tell the name address and contact details of participants before I go to interview them. This person will have my mobile phone number. I will check-in with them when I arrive at the interview location (in front of the participant) and arrange a time to check-in after the interview is due to finish. If I do not contact the nominated party then they will contact me to ensure that I am safe.</p>
<p><b>Other hazards</b> (specify)</p> <p>N/A</p>		<p>N/A</p>

**SPECIAL PROVISIONS** - Emergency procedures (e.g. first aid, survival aids, communication)

- I will keep my mobile phone with me and switched on at all times.
- I will keep my equipment (dictaphone) and valuables out of sight.
- When interviewing in participant's homes I will only conduct interviews in communal rooms.

**TRANSPORT**

(tick boxes)

Suitable travel arrangements and licensed drivers?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	N/A	<input type="checkbox"/>	/	<input type="checkbox"/>
Adequate insurance cover	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	N/A	<input type="checkbox"/>	/	<input type="checkbox"/>
Permission to work on site?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	N/A	<input type="checkbox"/>	/	<input type="checkbox"/>
Necessary training and information received	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	N/A	<input type="checkbox"/>	/	<input type="checkbox"/>
Health and next of kin information given to field trip	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	N/A	<input type="checkbox"/>	/	<input type="checkbox"/>
Leader/departmental office	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	N/A	<input type="checkbox"/>	/	<input type="checkbox"/>
Provision for disabilities, health problems?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	N/A	<input type="checkbox"/>	/	<input type="checkbox"/>

**Person completing this assessment :**

**Name** Claire Thompson

**Position** PhD research student (Department of Geography).  
(eg undergrad; research student; post-doctoral fellow, lecturer)

**Date of assessment** 3.11.09

**Checked by**

**Name** \_\_\_\_\_

**Title** \_\_\_\_\_  
(eg supervisor; co-ordinator)

**Date** \_\_\_\_\_

**Approved by Head of School:**

**Name** \_\_\_\_\_

**School** \_\_\_\_\_

**Date** \_\_\_\_\_

Issued by:  
Department of Environmental Health and Safety  
Queen Mary, University of London  
Mile End Road, London E1 4NS  
Tel: +44 (0)20 7882 5431  
Fax: +44 (0)20 7882 783