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Barriers and facilitators to cooking from 'scratch' using basic or raw ingredients: A qualitative interview study [DOI:

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- 1 **Background:** Previous research has highlighted an ambiguity in understanding
- 2 cooking related terminology and a number of barriers and facilitators to home meal
- 3 preparation. However, meals prepared in the home still include convenience products
- 4 (typically high in sugars, fats and sodium) which can have negative effects on health.
- 5 Therefore, this study aimed to qualitatively explore: (1) how individuals define
- 6 cooking from 'scratch', and (2) their barriers and facilitators to cooking with basic
- 7 ingredients.
- 8 Methods: 27 semi-structured interviews were conducted with participants (aged 18-
- 9 58 years) living on the island of Ireland, eliciting definitions of 'cooking from
- scratch' and exploring the reasons participants cook in a particular way. The
- 11 interviews were professionally transcribed verbatim and Nvivo 10 was used for an
- 12 inductive thematic analysis.
- 13 **Results:** Our results highlighted that although cooking from 'scratch' lacks a single
- definition, participants viewed it as optimal cooking. Barriers to cooking with raw
- ingredients included: 1) time pressures; (2) desire to save money; (3) desire for
- effortless meals; (4) family food preferences; and (5) effect of kitchen disasters.
- Facilitators included: 1) desire to eat for health and well-being; (2) creative
- inspiration; (3) ability to plan and prepare meals ahead of time; and (4) greater self-
- 19 efficacy in one's cooking ability.
- 20 Conclusions: Our findings contribute to understanding how individuals define
- cooking from 'scratch', and barriers and facilitators to cooking with raw ingredients.
- 22 Interventions should focus on practical sessions to increase cooking self-efficacy;
- highlight the importance of planning ahead and teach methods such as batch cooking
- and freezing to facilitate cooking from scratch.

Keywords: Scratch Cooking, Qualitative, Skills, Barriers, Facilitators¹

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Introduction

29 Over recent years, there has been concern that the culture of domestic cooking has 30 rapidly evolved alongside broader social, environmental and technological changes to 31 the potential detriment of our diet and resulting nutritional health. Research has 32 indicated: less time is being spent on domestic food preparation (Soliah, Walter, & 33 Jones, 2012; Pettinger, Holdsworth, & Gerber, 2006), a breakdown of traditional meal 34 patterns (Buckley, Cowan, & McCarthy, 2007), a greater availability and 35 consumption of high energy ultra-processed ready-made foods (typically high in 36 sugars, fats and sodium) (Monteiro, Moubarac, Cannon, Ng, & Popkin, 2013; Moodie 37 et al., 2013; Monteiro, Levy, Claro, deCastro, & Cannon, 2011; Stuckler, McKee, 38 Ebrahim, & Basu, 2012), and an increase in food produced and consumed outside the 39 home environment (Mintel, 2014). Moreover, it has been suggested that whole 40 cultures have experienced a dramatic change in their ability to select, prepare and 41 consume food (Lang & Caraher, 2001), with fewer and/or different cooking skills 42 (Beck, 2007; Worsley, Wang, Wijeratne, Ismail, & Ridley, 2015). Some researchers 43 have also suggested a loss of the necessary skills to prepare a meal from raw 44 ingredients (from 'scratch') (Caraher, Dixon, Lang, & Carr-Hill, 1999). In light of 45 this, several community diet projects have been developed to increase cooking skills 46 among the consumer. Although such interventions lack theoretical underpinning and 47 rigorous outcome evaluations (McGowan et al., 2015) they do have the potential to 48 reduce overreliance on convenience foods. Indeed, previous research has shown that

¹ **Abbreviations:** NI, Northern Ireland; UK, United Kingdom; IOI, Island of Ireland; ROI, Republic of Ireland, CFS, Cooking from Scratch.

those who frequently prepare a meal in the home (Wolfson & Bleich, 2015) and use a greater number of cooking skills make healthier food choices and have a better dietary quality (Chen, Meei-Shyuan, Yu-Hung, & Wahlqvist, 2012; McGowan et al., 2015), whereas a lack of cooking skills has been associated with increased consumption of convenience food products (van der Horst, Brunner, & Siegrist, 2011). To gain insights into the state of domestic meal preparation, research has investigated the perceptions of what constitutes home-cooking and the barriers and facilitators to cooking (Wolfson, Smith, Frattaroli & Bleich, 2016a; Wolfson, Smith, Bleich & Frattaroli, 2016b; Bowen, Elliot & Brenton, 2014; Soliah, Walter & Jones, 2012). Previous studies have alluded to several barriers to home meal preparation, such as parental employment (Devine et al., 2006; Jabs et al., 2007; Devine et al., 2009), lack of time (Jabs & Devine, 2006), cost of convenience foods (Brunner, van der Horst, & Siegrist, 2010), poor cooking skills (van der Horst et al., 2011; Stead et al., 2004), and limited food resources (Vidgen & Gallegos, 2014). In a recent American study Wolfson et al. (2016b) found a continuum in what home-cooking meant to participants, from cooking from scratch (CFS) at one end to heating up a ready-made microwave meal at the other. Different use of terminology was debated by participants illustrating the highly individualised nature of the terms used. This lack of consensus has been previously highlighted (Short, 2006; Short, 2003). In addition, the motivators to home meal preparation have been explored using focus groups (Jones, Walter, Soliah & Phifer, 2014), highlighting the cost effectiveness of cooking in the home, having a cooking role model, familiarity with cooking techniques and having time for the preparation, cooking and cleaning. In relation to the use of terminology, encouraging some to increase their homecooking, may encourage the use of convenience products, as Wolfson et al. (2016b)

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demonstrated that some view heating a ready-meal as home-cooking. Recent European research found that only 30% of total household food expenditure was on 'scratch' ingredients (Daniels & Glorieux, 2015), with the rest being spent on convenience food and meals consumed outside the home. Another study showed that only 20% of Belgian families spend the majority of their food budget on raw or fresh ingredients, with the remainder combining fresh ingredients with some level of convenience food (Daniels, Glorieux, Minnen, van Tienoven & Weenas, 2015). Convenience foods are normally high in saturated fat, sugars, sodium and additives (Monteiro, Moubarac, Cannon, Ng, & Popkin, 2013; Moodie et al., 2013; Monteiro, Levy, Claro, deCastro, & Cannon, 2011; Stuckler, McKee, Ebrahim, & Basu, 2012), and the consumption of convenience food has been associated with overweight and obesity (van der Horst et al., 2011; Smith, McNaughton, Gall, Blizzard, Dwyer & Venn, 2009; Malik, Willett and Hu, 2013). Further, the additives in these products have been linked to the increase in autoimmune diseases (Lerner & Matthias, 2015). In light of this, it is important to understand what CFS means to the consumer and what barriers consumers face moving away from convenience products towards using basic or fresh ingredients in their cooking. Thus, this study explicitly explored the barriers and/or facilitators to cooking with basic or raw ingredients and how they may be different to the barriers faced in home meal preparation in general. Interviews were chosen as the method of data collection as it would allow for maximum individual clarity with the already confusing terminology, as participants within a focus group can be influenced by other dominant participants. Therefore this study qualitatively explored in a European population: (1) how individuals define cooking from 'scratch', and (2) the barriers and facilitators to cooking a meal with basic or raw ingredients.

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Material and Methods

Participant Recruitment

Male and female participants from the island of Ireland (IOI) were recruited via convenience and snowball sampling with purposive acceptance to take part in a semi-structured interview. Recruitment methods included announcements in the form of an email circulated to staff at a NI (Northern Ireland) and ROI (Republic of Ireland) university, interviewer contacts, and face-to-face invitations at a range of ROI community classes aimed at the unemployed. Every effort was made to include participants from different educational backgrounds and age groups, with a range of perceived cooking abilities. Of the thirty-one participants that responded with interest and completed a screening questionnaire; three did not meet the eligibility criteria (i.e. aged between 18-65 years; not involved in professional cookery; responsible for preparing at least one household meal per week) and a further one was unable to commit the necessary time. In total, 27 participants (17 females and 10 males) were interviewed (Table 1). All participants provided informed verbal consent and the study was approved by the School of Biological Sciences Ethical Committee at Queen's University Belfast.

Table 1 Characteristics of interview participants.

Characteristic		N = 27	
		N	%
Country	Northern Ireland	15	56
	Republic of Ireland	12	44
Age	18-34 years	12	44
	35-44 years	5	19
	45-58 years	10	37
Highest Education level	Basic School (age 15/16, Junior	2	8
	Cert/GCSE)		
	Secondary School (age 17/18, Leaving	4	15
	Cert/A Level)		
	Professional Training	3	11
	Undergraduate level	9	33

	Postgraduate level	9	33
Occupational Status	Employed full-time (>30h per week)	18	67
	Employed part-time (8-29h per week)	3	11
	Retired	1	4
	Student	2	7
	Unemployed	3	11
Life Stage	Single/Married with children in the	9	33
	household		
	Married with no children in household ^a	4	15
	Single	4	15
	Single with cohabitees	6	22
	Single lives with family	4	15
Number in Household	1	4	15
	2	9	33
	3	8	30
	4-6	6	22
Type of ingredients used in	All Ready-made	2	7
meal preparation	Mostly pre-prepared, some	7	26
	fresh/basic/raw ingredients		
	Mostly fresh/basic/raw, some pre-	17	63
	prepared ingredients		
	All fresh/basic/raw ingredients	1	4
	1	1	4
	2	2	7
	3	2	7
Perceived Ability	4	7	26
	5	9	33
	6	2	7
	7	4	15

^a Includes couples with grown children no longer residing in their household.

Interview Questioning Guide

Based upon a review of previous literature (McGowan et al., 2015) and a small number of interviews (n=4) with experts working to improve cooking and food skills (defined here as food planning, organising, shopping, budgeting), the research team developed the interview questioning guide. The interview guide was piloted for clarity, comprehension, reliability and timing with five individuals and refined prior to implementation. The questions were designed to elicit participants perceptions regarding their experiences with domestic cooking including terminology relating to cooking, their motivations and barriers for cooking with basic or raw ingredients, how

they learned their cooking and food skills, and how they had/could improve their cooking skills (See Table 2).

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Table 2: Questioning route of interviewers

Introductory Question

• Please describe the most recent main meal you prepared or cooked at home?

Personal Definitions

- What does the term 'convenience foods' mean to you?
- What would you consider a 'ready-made' product to be?
- What would you consider cooking from 'scratch' to mean?

Perceived Cooking and Food Skills Practices

- I can see that you rated yourself as an x out of 7 for cooking from 'scratch', can you tell me why that is?
- How would you rate yourself in terms of your wider food practices like shopping, planning meals, food safety and storing food or eating healthily?
- How do you decide what to stock your fridge or cupboards with? How do you decide how to create a meal e.g. what to put on a plate to make up your meal?

Barriers/Facilitators to 'Scratch Cooking'

- What gets in the way of you cooking? (and of wider food practices like shopping etc.)
- What motivates you to cook?
- Are you confident with all foods/ingredients?

Learning Cooking Skills

- How do you believe you learnt your cooking skills, e.g., chopping, mixing?
- If you wanted to improve on these or any cooking skills how would/have you do/did this?

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134 Data Collection

135 Interviews were conducted by telephone (n=26) or face-to-face (n=1), between 136 October and December 2014, by one of two experienced interviewers (FL; a Sport 137 and Health Scientist: and LM; a Health Psychologist) who had completed courses on 138 qualitative data collection. As an ice-breaker, participants were asked to introduce 139 themselves and describe the most recent main meal that they had prepared. 140 Interviewees were given some assurances (e.g. that there were 'no right or wrong 141 answers', their anonymity would be kept intact and they could opt out at any point) 142 before the interviewer proceeded to ask a series of guided open-ended questions 143 (Table 2). The interview concluded when all topics had been covered and no new 144 information emerged. Interviews were audio-recorded and lasted between 20 and 60 145 minutes (mean duration 36 minutes).

Data analysis

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Audio recordings were professionally transcribed verbatim, checked for precision (FL, LM), and, coded thematically (Braun & Clarke, 2006) using the qualitative programme NVivo 10 (QSR International Pty Ltd, Victoria, Australia). Initially, interviewers (FL, LM) independently read and coded two randomly selected transcripts before jointly reaching a consensus on the validity and reliability of the application of their codes to the data. This process was repeated for a further three transcripts, afterwards, minor revisions were made to the terminology of some codes. The remaining transcripts were then coded (FL) and independently checked for coding consistency (LM) before consensus was reached (with FL). Both coders agreed that data saturation had occurred as no new codes emerged from the final six interviews. Subsequently, codes were grouped into potential barriers and facilitators and inspected for overlap to ensure that there were clear distinctions within and between barriers and facilitators. To increase intra-observer reliability, four members of the research team who were experienced in qualitative data analysis (FL, LM, MS; a Nutritionist and MD; a Consumer Psychologist) immersed themselves in the data and critically discussed the emerging barriers and facilitators, together with their interpretations. As a final step, FL, LM, MS, and MD discussed the results and selected key quotes to exemplify each barrier and facilitator. Socio-demographic data was summarized using IBM SPSS Statistics version 19 software (SPSS, Chicago, IL).

Results

The sociodemographic characteristics of the 27 participants are shown in Table 1. To ensure a wide range of cooking abilities (see Table 1), a question was included in the screening questionnaire on perceived ability; "On a scale from 1 to 7 where 1 means very poor and 7 means very good, how good are you at preparing and/or cooking

meals from 'scratch' at home (i.e. using basic/fresh/raw ingredients etc.)?". Participants responses ranged from 1 to 7 (Mean 4.6, SD 1.6). An overview of these participants' definitions of CFS and their barriers and facilitators to cooking with raw or basic ingredients is presented respectively.

Perceptions of cooking from 'scratch' using basic ingredients

Illustrative quotes of participants' personal definitions of CFS can be seen in Table 3, these appeared to be individualized with no clear patterns across perceived ability, gender or age. Perceptions of the degree of preparation allowed for classification of a meal as made from 'scratch' varied considerably. These perceptions spanned a continuum from traditional understandings of the term (using raw ingredients entirely) to a more inclusive modern version, which incorporated some convenience products (e.g. store bought pasta). There was consensus that CFS was the "healthiest" method of preparing a meal; with natural, fresh and unprocessed ingredients being key components, yet, for some, the use of frozen foods (such as frozen fish fillets) was also included. The degree of time and effort needed for CFS was perceived as being greater than that required for convenience products, however, for many, it was viewed as the goal to strive towards.

Table 3: Illustrative quotes to demonstrate the spectrum of 'cooking from scratch' perceptions.

Personal Definition	Perceived Ability	Gender	Age
"It means preparing sauces/condiments/everything from the raw ingredients top to bottom, so if you're making a curry it means preparing the paste and chopping up all the herbs and everything, making the paste and then adding the cream, doing it all completely from individual ingredients." (Participant 12)	4	M	32
"If you were making your own sauces, all like fresh food, using actual spices, I would consider made from scratch meals obviously the healthiest." (Participant 27)	1	F	21
"Once you've bought the ingredients organically, washing them and putting them together, so whether you're getting a full chicken and cutting it up, whether you're getting head of broccoli and cutting it up, stuff like that, same with your sauces with the least amount of stress." (Participant 25)	5	M	24
"Well something that hasn't been prepared in any way, where you're buying it fresh, well I say fresh, most of the stuff I cook from scratch is frozen but I mean hasn't been treated in any way." (Participant 19)	4	М	57
"Taking different ingredients, well for salad cooking from scratch would be washing cutting and then putting oil, maybe adding olives to the greens so it doesn't involve cooking on fire but it involves preparing the ingredients, like washing and cutting, for rice or spaghetti and stuff it involves boiling or put in the oven, so combining different ingredients that you have manipulated some way, so taking raw ingredients and either cooking them or washing, cutting, adding spices to them so that they make up a meal." (Participant 7)	6	F	30
"It would be essentially just using basic raw ingredients, I would include the spices, not prepared sachets of seasoning but possibly not grinding your own spices maybe using ready ground herbs and seasoning but not using like sauces which have been pre-made or dressing and certainly preparing the vegetables." (Participant 3)	4	F	28
"Anything that can easily be made from the raw ingredients, I'd still assume like vegetable stock or chicken stock or pasta to be from scratch even though in the past I have made these from flour and wheat and that but I'd still kind of dub these essentials as allowing to be from scratch. For example bolognaiseI could just buy a jar of Dolmio and that would be seen as cooking a meal but in my eyes it's not from scratch. From scratch is the main portion of the meal should come from raw ingredients with the minimum amount of pre-made ingredient, for example pasta takes quite a while to make from fresh so I use just a bag of that." (Participant 20)	7	М	24
"Cooking from scratch is doing it to what ability you feel like or how much effort you feel like putting in, if you chop and prep all your veg, depending on the size of the dinner you might cheat with some things like if you're making a pie, you might decide you won't use your own pastry, you'll definitely buy store bought but to me that's still cooking from scratch." (Participant 2)	5	F	35

"I suppose in the traditional meaning it is totally everything, practically growing your own, but I think times have moved on. I think cooking from scratch isit's actually washing the vegetables, getting the earth off them and peeling them and cutting them yourself, it's more vegetables, maybe with chicken, I do buy whole chickens but chicken fillets are easier, I tend to go for ones that are marinated so that's really convenience too, I wouldn't be marinating." (Participant 14)	3	М	51
"For the curry I used mushrooms, onions, chicken fillets but I normally use a dry curry mix, Mayflower, you just mix it with about 10 ounces of water and it gives you a curry sauce which actually tastes like proper [bought/takeaway] Chinese curry but everything else would have been fresh ingredients." (Participant 4)	5	F	47
"Cooking from scratch means opening the jar and putting it into the saucepan, adding my own blend of herbs and spices to it, making the meatballs, I make the meatballs from scratch and then putting the pasta on." (Participant 23)	5	F	58

189 190	Five barriers to CFS using basic or raw ingredients were identified: (1) time
191	pressures; (2) desire to save money; (3) desire for effortless meals; (4) family food
192	preferences; and (5) effect of kitchen disasters.
193 194	(1) Time pressures Almost all participants said that they were so busy that they found it difficult to cook
195	from basic or raw ingredients. The strongest time pressure appeared to come from
196	work and/or family commitments:
197	"I don't get time to do that [cook from basic ingredients] now, because now I'm
198	a dadit's all rush rush now." (Participant 16)
199	"You've got a very limited amount of time to cook after work before you want to
200	eat, so unless you're organised you don't have any time, and if you don't have any
201	time you can't make things from scratch, it takes too long." (Participant 12)
202	The feeling that there was not enough time, especially mid-week, was implicated
203	in the increased consumption of convenience foods:
204	"You'd probably have a little bit more processed food throughout the week just
205	due to time constraints just less time to prepare food." (Participant 25).
206	In addition, participants were not willing to spend the majority of their 'free' time
207	engaged in meal preparation and compromised by moving away from using basic
208	ingredients.
209 210	(2) Desire to save money Participants, (particularly smaller households and ROI), felt that it was cheaper for
211	them to eat partially or fully prepared foods. For them, price was a major disincentive
212	to cook with basic or raw ingredients.
213	"It works out cheaper for me to buy pre-packaged dinners in Aldi." (Participant
214	23)

215 Moreover, their negative attitude towards cooking with basic or raw ingredients was 216 further driven by the concern that cooking in this way would generate more food 217 waste. Reasons for this concern stemmed from the observation that more food would 218 be bought in excess and not used: 219 "I didn't realise when I was buying all those fresh stuff in the summer like veg and 220 like broccoli and chicken and that kind of stuff ... I've gotten not much in my basket 221 and this is coming to like 20 euro and I'd be afraid that I'm wasting...if I'm buying it 222 for just me I wouldn't eat a whole thing of like broccoli or whatever so then I'd nearly 223 feel like half the food would end up getting half wasted then." (Participant 27) 224 Interestingly, some of these participants expressed their fondness for cooking in 225 general and perceived that CFS may have the greatest health benefits, however, 226 financial restraints and waste reduction strategies overpowered their positive 227 dispositions. 228 (3) Desire for effortless meals 229 For some participants, cooking from basic ingredients was viewed as a "chore" which 230 was not high on their list of priorities but cooking was seen as a necessity: "[Cooking from scratch] is a lot of time and effort and if you're already hungry 231 232 and you're standing there smelling the food and stuff, that's a nightmare so if it can't 233 be prepped and cooked within 30 to 40 minutes I won't bother and it's the same at 234 weekends." (Participant 2) 235 Their desire for effortless meals stemmed from a 'lack of energy,' 'lack of motivation' and 'laziness' and led to participants choosing convenience products or 236 237 consuming take-away food: 238 "There's no point in buying a whole turnip that's going to take me ages to cut into 239 and cook so I would buy the convenient packs which are already diced up and washed 240 and prepared." (Participant 15)

241 "My mood and energy levels would dictate how adventurous I would be with the 242 meal or possibly I'd just have a takeaway." (Participant 3) 243 4) Family food preferences 244 Participants voiced that that their family's tastes and preferences for certain foods 245 were highly influential in determining meal choices which, in turn, governed the 246 degree to which they relied on convenience products and cooked with basic or raw 247 ingredients. Participants felt that they had 'ate what they were given' when they were 248 growing up, whereas nowadays, children have their food preferences catered for. 249 Some alluded to the food preferences of their family and their efforts to meet these in 250 order to avoid power struggles about food as a result of food refusal and selective 251 eating. An overreliance on certain foods and convenience products were often utilised 252 as an easier way to cater to the varying food preferences of each family member. For 253 example: 254 "I know what people like and what I'll get away with so I just make sure I don't 255 stray too far from that...otherwise you're in revolt." (Participant 18) 256 ".. last night we had pizza and I didn't want pizza but my daughter did and ...I 257 went with pizza because I knew she would eat it but with the pizza there was no extra 258 vegetables... it was quite cardboardy so there was no thought in it really." 259 (Participant 15) 260 Family influence also restricted participants' ability to experiment with new 261 ingredients. Even if the participant felt inspired to try something new they often felt 262 restricted: 263 "If I do something different like try something new in the house probably no one 264 would eat so it's a bit disheartening making something and no one eat it." 265 (Participant 24).

266 It seemed family preferences were more influential than the desire to experiment, 267 so that meals will be eaten. 268 (5) Effect of Kitchen Disasters 269 When faced with personal cooking failures, such as strange tasting and 270 unappealing looking dishes, participants recalled occasions in which they became 271 discouraged and vowed not to make particular dishes from basic ingredients again. In 272 these instances, partially or fully prepared convenience foods were often praised for 273 their consistent taste and handiness. For example: 274 "I just got a basic recipe for cheesecake...my dad was sprinkling sugar on it and I 275 didn't know why...I tried it, how disgusting it was! I was thinking they must really 276 love me for having eaten that cheesecake... I'll not bother next time...I'll just buy one 277 from the shop. Things like that can be a bit disheartening when you do try something 278 and then it turns out awful...you can get food, for example, from a trusty Dolmio pack 279 of sauce, put it in the microwave and it would of turned out nice and be ready in a 280 *minute.* " (Participant 27) 281 Personal disasters or stories from others appeared to instil fear in some participants 282 in relation to raw ingredients and food safety and appeared to create a reluctance to 283 use these ingredients: 284 "you hear about ...people [who] have been touching raw meat or something and 285 then cooked meat and then they end up with e-coli and ..[it's] to make sure that I 286 don't poison anybody." (Participant 8) 287 Facilitators to cooking from 'scratch' using basic or raw ingredients Four facilitators to cooking with basic or raw ingredients were identified: (1) desire to 288 289 eat for health and well-being; (2) creative inspiration; (3) ability to plan and prepare 290 meals ahead of time; and (4) greater self-efficacy in one's cooking ability.

291	(1) Desire to eat for health and well-being
292	Within this theme, participants described how they cooked with "as much basic
293	ingredients as possible" in order to improve the health and well-being of themselves
294	and their families (e.g. "A desire to be healthy drives you to cook"). Specifically,
295	compared to convenience foods, participants viewed that preparing food from basic or
296	raw ingredients was healthier as it contained less undesirable components (i.e. fat,
297	added sugars, salt, additives and preservatives) and more fruit and vegetables. For
298	example:
299	"I've become awareabout cooking from scratch to reduce the salt content and to
300	reduce the sugar content because a lot of pre-prepared food is high in salt or sugar."
301	(Participant 14)
302	Various factors motivated participants' to eat for health and well-being, such as
303	their: nutritional knowledge; bad health (e.g. cancer); and a desire to reduce and
304	maintain body weight while avoiding the negative physical side effects of processed
305	food on the body ("reflux", "bloating", "migraines", "poor athletic performance").
306	"I know that if I cook it natural ingredients, proper ingredients that I can eat it
307	and it doesn't irritate my stomach." (Participant 22)
308	Some participants voiced that their motivation and behaviour towards eating more
309	healthily had increased with age:
310	"As I've got older I've noticed that sometimes processed foods and things
311	doesn't always agree with me the best, so I try to do the best for my family; we're
312	trying not to use processed food." (Participant 4)
313	(2) Creative inspiration
314	Participants voiced that they often received inspirational meal ideas and recipes from
315	numerous sources which encouraged them to cook with basic or raw ingredients.
316	Recipes available through traditional (TV, newspapers, magazines, cookbooks) and

digital media (social media, internet search engines) both clearly impacted upon the cooking habits of those who viewed them. In many cases, participants described coming across recipes "by chance" and being inspired to cook them (or a modified, simplified or achievable version): "When I'm sort of flicking through the papers at the weekend and you see a recipe and you think and you look at that and ok well actually I might not actually fancy doing that particular recipe but what they are suggesting you might do there I might bring into something which I've cooked another time." (Participant 1) When participants' did actively seek recipes, they showed a preference for digital media (such as webpages and websites) in contrast to print media (such as cookbooks) as it was viewed as being "handy" and "in-front" of them: "I would look up a recipe on the internet...I would look up to see some sort of chicken dish and maybe get ideas on that BBC good food website. But yes I would tend to find myself looking up the stuff on the internet as it's easier than reading a cook book." (Participant 6) In addition to print/printable recipes, some participants noted getting a 'spark of inspiration' from browsing in the shops. Individuals also received inspiration from meals that they had tried in a restaurant or seen a friend make: "You know if I tasted something maybe nice in a restaurant and I thought that's lovely I would kind of look up how to do it and maybe try and make a wee bit of it *myself.*" (Participant 13) (3) Ability to plan and prepare meals ahead of time Within this theme participants described how organising (meals planning and grocery shopping) and preparing meals ahead of time permitted them to cook with basic and raw ingredients more frequently. Specifically, by batch cooking (refrigerating or

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342	freezing portion(s) for another meal) and using left-over ingredients, participants were
343	able to minimise the time and energy required to cook in this way:
344	"It's just convenience more than anything else you know if I'm going to cook I
345	might as well cook you know a big load of it so I don't have to do it every night."
346	(Participant 19)
347	"I have to sort of plan aheadone reason why I like to do a roast on Sunday is
348	because then I know I've got leftovers and it makes it easier for me for my lunches".
349	(Participant 8)
350 351	(4) Greater self-efficacy in one's cooking ability Participants who self-identified as a good cook tended to cook more from basic or raw
352	ingredients and enjoy doing so:
353	"I can cook anything really, a bake or make pizzas or make bread, whatever; I
354	don't mind, I enjoy it." (Participant 18)
355	This greater self-efficacy appeared to enable these participants to experiment more
356	with different food combinations and flavours. As a result they had a greater
357	repertoire of dishes that they were able to make and were able to take full advantage
358	of supermarket special offers:
359	"I can cook a variety of things and combine in different ways and make some
360	different tasty things." (Participant 7)
361	"Shop smart, and don't go out with set things in your mindsuch as 'I'm going to
362	cook this and this'. You can often shop off what's on offer and that can then dictate
363	your rough menu for the week so then you get a more efficient shop; bang for your
364	buck." (Participant 20)
365	In most cases, participants who had confidence in their cooking ability attributed
366	this to earlier visual and experiential learning opportunities. Specifically, participants

talked about how their home and/or school environment had enabled them to learn by "seeing" or by "doing":

"I think sometimes you pick up things that you maybe would have watched your mum cook when you were a kid and you know they're there in the back of your memory and you don't realise until you're doing them yourself." (Participant 4) "We'd be in pairs and the teacher would be at her station at the top of the room and she would just kind of be guiding us, like obviously, after in our first second or third times we kind of knew how to chop stuff properly but for the first few times she'd guide us and then she would walk away and if we needed any help she would show us." (Participant 21)

Discussion

To the best of our knowledge, this is the first study to specifically explore how individuals define CFS as well as the barriers and facilitators to cooking a meal with basic or raw ingredients. Our rich descriptive data highlighted that CFS lacks a single definition, however, participants viewed it as a goal to strive towards. Overall, nine themes meaningfully hindered or enabled participants to cook with raw and basic ingredients.

Wolfson et al (2016b) found that there was a continuum in home-cooking definitions from CFS to heating a microwavable meal. Our results show that even within 'scratch' cooking, participants' definitions spanned a continuum from traditional understandings of the term (the entirety of the meal from basic or raw ingredients) to a modern version which included some 'essential' convenience products. This heterogeneity in CFS perspectives is reflective of previous literature which explored meal preparation in the home environment (Wolfson et al., 2016b; Short, 2006). Wolfson et al. (2016b) concluded a definition for CFS as "all or almost"

results show that this still leaves room for ambiguity. Daniels and Glorieux (2015), also had difficulty concluding on what constituted a convenience product and created six categories, with one category being labelled other. This 'Other' category consisted of food products that may be considered as staples in our current cooking and eating habits such as bread and milk products, which are original convenience products. Our findings show the necessity for interventions, researchers and public health practitioners to clearly and consistently define what it means to cook from 'scratch' or an open acknowledgement that a continuum exists and that the aim of the intervention is to move people along the continuum towards the use of as many fresh ingredients as possible. This is an essential first step in acquiring a more accurate understanding of the relationship between cooking and healthy eating behavior in the broader population. Similar to results recently reported by Wolfson et al. (2016), participants viewed cooking from basic and raw ingredients as the best method of cooking, 'real cooking' (as mentioned by participants in Wolfson et al. 2016), and they placed a higher value on this method in terms of health and nutritional quality. In the American population it was accepted that although CFS had high importance, it was not seen as the norm standard for cooking (Wolfson et al., 2016b), whereas, in this current sample, some participants considered it quite common depending on their definition. Interestingly, motivations for cooking with basic and raw ingredients did not extend beyond concerns for nutritional health and well-being. This suggests that while familial motivations for home-cooking (Simmons and Chapman, 2012) addressed social (i.e.

connecting to family and friends), cultural (i.e. retaining family culinary traditions

and practices and/or breaking away from them to explore new ways of eating) and

all scratch ingredients are used and time and energy are invested," however, our

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personal factors (i.e. gaining independence through cooking skills) the main motivator for CFS is primarily health. Further, Simmons and Chapman (2012) showed that the ability to cook enabled the 'cook' to regulate the family food supply, whereas, our results highlight a shift where the family decides the choice of food to be made rather than the 'cook', similar to the findings of Soliah et al. (2012) and Dixon and Banwell (2004).The emergent barriers to cooking with basic and raw ingredients suggest that participants require meals that are time efficient, convenient, reasonably priced, and in alignment with their family's food preferences. Some of these factors were also found in Wolfson et al. (2016) with cost and time being barriers to CFS. Effort also appeared to act as a barrier to cooking from scratch as mentioned in previous research relating to home meal preparation (Wolfson et al., 2016b; Kaufmann, 2010; Lappalainen et al., 1997; Gatley, Caraher, & Lang, 2014). Some participants in this study felt meal preparation was a necessity, and the effort needed for CFS was too excessive. Daniels and colleagues (2012) also found that half the time spent cooking is purely out of necessity. Interestingly, Wolfson et al. (2016) noted a link between time, cost and health in home-cooking, where one of the elements was sacrificed to prioritize the others. However, in relation to CFS this was not apparent. Here, those that cooked from 'scratch' for health reasons did not mention time and cost although time and cost were inevitably linked to other facilitators such as planning and preparing ahead of time to compensate for time and cost. The fear of failure associated with previous negative cooking experiences acted as a barrier to some to CFS. Fearfulness has been previously noted in cooking (Stead et al., 2004) but not explored in detail. The use of convenience products to overcome possible negative cooking experiences appears to be a form of avoidance motivation

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rooted in the psychological concept of approach-avoidance. Elliot (2006) defines approach-avoidance motivation as "Approach motivation may be defined as the energization of behavior by, or the direction of behavior toward, positive stimuli (objects, events, possibilities), whereas avoidance motivation may be defined as the energization of behaviour by, or the direction of behavior away from, negative stimuli (objects, events, possibilities)." Those using avoidance for survival (using convenience products instead of risking a potentially disastrous meal), forgo opportunities for development and improvement (learning new cooking skills) (Elliot, 2006). Further, participants who had a greater self-efficacy in their cooking ability and experienced greater inspiration from multiple sources were more inclined to cook with basic and raw ingredients and have a greater repertoire of dishes that they were able to make. Stead et al. (2004) also found that confident cooks had a wider repertoire of recipes and had more knowledge of cooking techniques. Wriden et al. (2007) also found that some of those that had an increase in cooking confidence after a practical cooking intervention reported using more basic ingredients in their cooking. Our results collectively suggest that it is essential to provide opportunities for people of all ages to gain hands-on experiences with food (i.e. cook) to both acquire and perfect their food preparation skills (i.e. menu-planning and food shopping skills) in order to organise and prepare a meal from basic and raw ingredients. Indeed, in this study, those that self-identified as a good cook attributed their ability to cook from scratch to earlier visual and experiential learning. These skills provide consumers with strategies to overcome the barriers identified. Specifically, strategies such as shopping more thriftily (e.g. bulk buying, taking advantage of supermarket special

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offers), batch cooking (refrigerating or freezing portion(s) for another meal), and being able to easily adjust recipes to meet family preferences all facilitate CFS. Thus, the best way to facilitate a shift from using convenience products towards basic ingredient cooking, points in the direction of teaching basic cooking and food skills. This need for practical cooking experience has been previously noted both in research and the media (Jones et al., 2012; Caraher, Seeley, Wu, & Lloyd, 2013; Oliver, 2015). These opportunities provide an environment where people can experiment, fail and learn from their failure, and may enhance their ability to cook from scratch which in turn may boost their cooking self-efficacy. The content of these cooking interventions should focus on teaching strategies (such as ones employed by the participants in this study) to overcome barriers and emphasise the facilitators such as the health benefits of using fresh ingredients over convenience products and they should also be tailored to the individual as previously stressed by Daniels et al. (2012). Interventions should include components on: 1) the cheapness of using basic ingredients; 2) batch cooking without the use of convenience products whereby reducing the immediate effort required; 3) enabling individuals to cook simplified versions of scratch meals they have been inspired by or their usual convenience product; and 4) family interventions allowing the children to experiment and handle new food. Children helping has been shown to increase their willingness to try new food (Nicklas et al., 2001) increasing variety in food choice. These suggestions add to the work of Short, Caraher, Lang and Halkier (Short, 2006; Caraher & Lang, 1999; Halkier, 2009) who advocate the importance of home-cooking. Alternatively, or concurrently, hospitality and food industries should be encouraged to continue product reformulations of convenience foods to make them healthier.

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An important strength of this study was that it employed qualitative interviews to directly assess consumer perceptions about their definitions of CFS and their barriers and facilitators to cooking with basic ingredients. A few limitations deserve consideration. Firstly, despite our efforts to recruit a range of education levels, our sample where highly educated which may limit the transferability of our findings to those with lower education. However, Daniels et al. (2015) found no difference in consumption of convenience products between different levels of education. It would be interesting to repeat this study in those with a lower level of education to identify additional barriers and facilitators. Furthermore, the participants volunteered without any incentives for the study thus the majority of our participants indicating a level of interest in food and/or cooking, although a number of participants noted that they actually had no interest in cooking. Although a wide range of participants from varying backgrounds were included in this study, it is worth noting that these results need to be considered within the cultural context of the UK and Ireland. Participants also self-rated their cooking abilities so caution must be taken considering overinflations and socially desirable responses. This was addressed, with reassurance to the participants that all answers were valid and that the study was about the participants' personal understandings and barriers and facilitators. Further, due to the nature of the study design and the sample size, direct comparisons between age, gender and abilities is not applicable, a survey of 1000 individuals on the IOI was conducted as a follow up (McGowan, Pot, Stephen, Spence, Raats, Lavelle et al., Under Review).

Conclusions

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Our findings contribute to a greater understanding of how individuals define cooking from 'scratch', and barriers and facilitators to cooking a meal with basic or

raw ingredients. Interventions should focus on practical sessions to increase self-efficacy in cooking skills; highlight the importance of planning ahead and teach methods such as batch cooking with basic ingredients and freezing. More research is needed to explore these parameters in other diverse populations to fully understand potential further barriers, any additional interpretations of cooking from 'scratch' and to implement these strategies within interventions to evaluate their effectiveness in increasing cooking with basic ingredients and in turn improving dietary quality.

Competing interests

The authors declare they have no competing interests.

Authors' contributions

MD, MS, LH, MR, MC, AM and EM were involved in the conception of the research and funding acquisition; LM and FL drafted the interview schedule and conducted the research; FL, LM, MS and MD performed the analysis and interpreted the data; FL and LM drafted the manuscript and MD and MS edited. All authors read and approved the final manuscript, and agree to be accountable for all aspects of the work.

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References

- Beck, M. E. (2007). Dinner preparation in the modern United States. *British Food*
- 540 Journal, 109(7), 531-547.

- Bowen, S., Elliott, S. and Brenton, J. (2014). The joy of cooking?. *Contexts*, 13(3),
- 543 20-25.

544

- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative*
- *research in psychology*, *3*(2), 77-101.

547

- Brunner, T. A., Van der Horst, K., & Siegrist, M. (2010). Convenience food products.
- Drivers for consumption. *Appetite*, 55(3), 498-506.

550

- Buckley, M., Cowan, C., & McCarthy, M. (2007). The convenience food market in
- Great Britain: Convenience food lifestyle (CFL) segments. *Appetite*, 49(3), 600-617.

553

- Caraher, M., Dixon, P., Lang, T., & Carr-Hill, R. (1999). The state of cooking in
- England: the relationship of cooking skills to food choice. *British food journal*,
- 556 *101*(8), 590-609.

557

- Caraher, M., & Lang, T. (1999). Can't cook, won't cook: A review of cooking skills
- and their relevance to health promotion. *International Journal of Health Promotion*
- 560 and Education, 37(3), 89-100.

- Caraher, M., Seeley, A., Wu, M., & Lloyd, S. (2013). When chefs adopt a school? An
- evaluation of a cooking intervention in English primary schools. *Appetite*, 62, 50-59.

- 564 565 Chen, R. C. Y., Lee, M. S., Chang, Y. H., & Wahlqvist, M. L. (2012). Cooking 566 frequency may enhance survival in Taiwanese elderly. *Public health nutrition*, 15(07), 567 1142-1149. 568 569 Daniels, S. and Glorieux, I. (2015). Convenience, food and family lives. A socio-570 typological study of household food expenditures in 21st-century Belgium. Appetite, 571 94, 54-61. 572 573 Daniels, S., Glorieux, I., Minnen, J. and van Tienoven, T.P. (2012). More than 574 preparing a meal? Concerning the meanings of home-cooking. Appetite, 58(3), 1050-575 1056. 576 577 Daniels, S., Glorieux, I., Minnen, J., van Tienoven, T.P. and Weenas, D. (2015). 578 Convenience on the menu? A typological conceptualization of family food 579 expenditures and food-related time patterns. Social science research, 51, 205-218. 580 581 Devine, C. M., Farrell, T. J., Blake, C. E., Jastran, M., Wethington, E., & Bisogni, C. 582 A. (2009). Work conditions and the food choice coping strategies of employed 583 parents. Journal of nutrition education and behavior, 41(5), 365-370. 584 585 Devine, C. M., Jastran, M., Jabs, J., Wethington, E., Farell, T. J., & Bisogni, C. A.
- 587 strategies of low-wage employed parents. *Social science & medicine*, *63*(10), 2591-588 2603.

(2006). "A lot of sacrifices:" Work–family spillover and the food choice coping

589	
590	Dixon, J., & Banwell, C. (2004). Heading the table: parenting and the junior
591	consumer. British Food Journal, 106(3), 182-193.
592	
593	Elliot, A.J. (2006). The hierarchical model of approach-avoidance motivation.
594	Motivation and emotion, 30(2), 111-116.
595	
596	Gatley, A., Caraher, M., & Lang, T. (2014). A qualitative, cross cultural examination
597	of attitudes and behaviour in relation to cooking habits in France and Britain.
598	Appetite, 75, 71-81.
599	
600	Halkier, B. (2009). Suitable cooking? Performances and positionings in cooking
601	practices among Danish women. Food, Culture & Society, 12(3), 357-377.
602	
603	Jabs, J., Devine, C. M., Bisogni, C. A., Farrell, T. J., Jastran, M., & Wethington, E.
604	(2007). Trying to find the quickest way: employed mothers' constructions of time for
605	food. Journal of nutrition education and behavior, 39(1), 18-25.
606	
607	Jabs, J., & Devine, C. M. (2006). Time scarcity and food choices: an overview.
608	Appetite, 47(2), 196-204.
609	
610	Jamie Oliver Food Foundation: Our Mission.
611	http://www.jamieoliverfoodfoundation.org.uk (2015). Accessed 16.07.15.
612	

- Jones, M., Dailami, N., Weitkamp, E., Salmon, D., Kimberlee, R., Morley, A., &
- Orme, J. (2012). Food sustainability education as a route to healthier eating:
- evaluation of a multi-component school programme in English primary schools.
- 616 *Health education research*, 27(3), 448-458.

- Jones, S.A., Walter, J., Soliah, L. and Phifer, J.T. (2014). Perceived motivators to
- 619 home food preparation: Focus group findings. Journal of the Academy of Nutrition
- 620 and Dietetics, 114(10), 1552-1556.

621

Kaufmann, J. C. (2010). The meaning of cooking. Polity.

623

- Lang, T., & Caraher, M. (2001). Is there a culinary skills transition? Data and debate
- from the UK about changes in cooking culture. *Journal of the HEIA*, 8(2), 2-14.

626

- 627 Lappalainen, R., Saba, A., Holm, L., Mykkanen, H., & Gibney, M. J. (1997).
- Difficulties in trying to eat healthier: descriptive analysis of perceived barriers for
- healthy eating. European journal of clinical nutrition, 51.

630

- Lerner, A. and Matthias, T. (2015). Changes in intestinal tight junction permeability
- associated with industrial food additives explain the rising incidence of autoimmune
- 633 disease. *Autoimmunity reviews*, *14*(6), 479-489.

634

- Malik, V.S., Willett, W.C. and Hu, F.B. (2013). Global obesity: trends, risk factors
- and policy implications. *Nature Reviews Endocrinology*, 9(1), 13-27.

- 638 McGowan, L., Caraher, M., Raats, M., Lavelle, F., Hollywood, L., McDowell, D.,
- 639 Spence, M., McCloat, A., Mooney, E. and Dean, M. "Domestic Cooking and Food
- 640 Skills: A Review." Critical reviews in food science and nutrition just-accepted
- 641 (2015): 00-00.

- McGowan, L., Pot, G.K., Stephen, A.M., Spence, M., Raats, M., Lavelle, F.,
- Hollywood, L., McDowell, D., McCloat, A., Mooney, E., Caraher, M. and Dean, M.
- 645 (Under Review). The influence of socio-demographic, psychological and knowledge-
- related variables alongside perceived cooking and food skills abilities in the
- prediction of diet quality in adults: a nationally representative cross-sectional study.
- 648 International Journal of Behavioral Nutrition and Physical Activity.

649

- Mintel. Report: 'From Grab to go: Take it Slow.' (2014).
- 651 www.academic.mintel.com/display/711487/?highlight Accessed 18.05.14.

652

- 653 Monteiro, C. A., Levy, R. B., Claro, R. M., de Castro, I. R. R., & Cannon, G. (2011).
- Increasing consumption of ultra-processed foods and likely impact on human health:
- evidence from Brazil. *Public health nutrition*, 14(01), 5-13.

656

- Monteiro, C. A., Moubarac, J. C., Cannon, G., Ng, S. W., & Popkin, B. (2013). Ultra-
- processed products are becoming dominant in the global food system. *Obesity*
- 659 reviews, 14(S2), 21-28.

- Moodie, R., Stuckler, D., Monteiro, C., Sheron, N., Neal, B., Thamarangsi, T., ... &
- Lancet NCD Action Group. (2013). Profits and pandemics: prevention of harmful

- effects of tobacco, alcohol, and ultra-processed food and drink industries. *The Lancet*,
- *381*(9867), 670-679.

- Nicklas, T. A., Baranowski, T., Baranowski, J. C., Cullen, K., Rittenberry, L., &
- Olvera, N. (2001). Family and child-care provider influences on preschool children's
- fruit, juice, and vegetable consumption. *Nutrition reviews*, 59(7), 224-235.

669

- Oliver J. Food Revolution Day. 2015.
- 671 http://www.foodrevolutionday.com/campaign/#Woy8QlrxPxoTMpf1.97 Accessed
- 672 16.07.15.

673

- Pettinger, C., Holdsworth, M., & Gerber, M. (2006). Meal patterns and cooking
- practices in Southern France and Central England. *Public health nutrition*, 9(08),
- 676 1020-1026.

677

678 Short, F. (2006). *Kitchen secrets: The meaning of cooking in everyday life*. Berg.

679

- Short, F. (2003). Domestic cooking skills what are they. Journal of the HEIA, 10(3),
- 681 13-22.

682

- 683 Simmons, D., & Chapman, G. E. (2012). The significance of home-cooking within
- 684 families. *British Food Journal*, 114(8), 1184-1195.

- 686 Smith, K.J., McNaughton, S.A., Gall, S.L., Blizzard, L., Dwyer, T. and Venn, A.J.
- 687 (2009). Takeaway food consumption and its associations with diet quality and

- abdominal obesity: a cross-sectional study of young adults. *International Journal of*
- *Behavioral Nutrition and Physical Activity*, 6(1), 1.

- 691 Soliah, L. A. L., Walter, J. M., & Jones, S. A. (2012). Benefits and barriers to
- healthful eating what are the consequences of decreased food preparation ability?.
- 693 American Journal of Lifestyle Medicine, 6(2), 152-158.

694

- 695 Stead, M., Caraher, M., Wrieden, W., Longbottom, P., Valentine, K., & Anderson, A.
- 696 (2004). Confident, fearful and hopeless cooks: findings from the development of a
- 697 food-skills initiative. *British Food Journal*, 106(4), 274-287.

698

- 699 Stuckler, D., McKee, M., Ebrahim, S., & Basu, S. (2012). Manufacturing epidemics:
- the role of global producers in increased consumption of unhealthy commodities
- including processed foods, alcohol, and tobacco. *PLoS Med*, 9(6), e1001235.

702

- van der Horst, K., Brunner, T. A., & Siegrist, M. (2011). Ready-meal consumption:
- associations with weight status and cooking skills. *Public Health Nutrition*, 14(02),
- 705 239-245.

706

- 707 Vidgen, H. A., & Gallegos, D. (2014). Defining food literacy and its components.
- 708 Appetite, 76, 50-59.

- Wolfson, J.A., Smith, K.C., Frattaroli, S. and Bleich, S.N. (2016). Public perceptions
- of cooking and the implications for cooking behaviour in the USA. *Public health*
- 712 *nutrition*, 19(9), 1606-1615.

intervention on cooking confidence, food preparation methods and dietary choices—an

exploratory trial. Public Health Nutrition, 10(02), 203-211.

726