Community cooking Network event
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10am - 3pm

Agenda

10.00 am  Welcome
Lizzy Hammond, Health Improvement Senior (Nutrition)

10.10 am  Community cooking network updates
Lizzy Hammond, Health Improvement Senior (Nutrition)

10.30 am  Speaker 1 - Charles MacKay, Rainbow Family Centre

10.45 am  Speaker 2 - Irina Martin, Woodlands Community Food

11.00 am  Speaker 3 - North West Recover Community

11.30 am  Workshop 1 or 2

12.15 am  Workshop 1 or 2

Workshop 1: Community Gardens and Growing Spaces
Ea O’Neill (Greenspace Scotland) & Kim Gillies (Urban Roots)

Workshop 2: Guest Recipe demonstration
Colin Clydesdale, Ubiquitous and of chair of Real Food, Real Folk

13.00 pm  Lunch and network

14.00 pm  How to become a supplier of cooking programmes to NHSGGC

15.00 pm  Close
Our diet in Scotland

Too much:
- Energy
- Total fat
- Saturated Fat
- Sugar
- Salt

Not enough:
- Fruit and vegetables
- Fibre
- Oil rich fish

Diet is poor overall, but inequalities exist. People in areas of deprivation:

↑ consumption of energy dense foods and sugar
↓ consumption of fruit and vegetables, oil rich fish and fibre
↑ rates of overweight and obesity
Overweight and obesity in Scotland

Over one quarter of adults were obese (BMI of 30 kg/m2 or above) in 2013

- 24.9% Men
- 29.3% Women

64.6% adults overweight and obese

Healthy weight in 2013

- 7 in 10 children aged 2-15 were within the healthy weight range
- 3 in 10 children at risk of overweight & obesity
Diet related ways to reduce cancer risk:

- Keep a healthy weight = 18,100
- Eat fruit & veg = 15,100
- Drink less alcohol = 12,800
- Eat less processed & red meat = 8,800
- Eat a high fibre diet = 5,100
- Eat less salt = 1,700
- Breastfeed if possible = 2,700

Max number of prevented cases = 64,300 every year
Why?

Intake of ‘Discretionary’ foods/drinks represent an unhealthy proportion of diet (FSS 2015)
Eating behaviour and food environment

- 40% of adults in Scotland do not cook on a daily basis
- 75% eat out /buy food to take away at least once/week
- **Availability** of fruit & veg in the home increases intake
- Mothers with poorer quality diets less likely to:
  - Provide breakfast every day
  - Cook from scratch
  - Provide sit-down meals (Swanson et al., 2011)
- Parenting (informal meal setting and child bedroom TV) and unhealthy child diet explained increasing in BMI
Barriers to healthy eating & cooking

• Availability
• Affordability
• Time
• Skills
• Knowledge
• Culture

Result?
• Poorer cooking skills
• Less frequent home cooking
• Reliance on pre-prepared foods
• All associated with poorer dietary quality and overweight and obesity in observational studies
So where does community cooking programmes come into it?
The evidence of cooking programmes:

Cooking programmes can contribute to improve:

- Eating behaviour
- Skills
- Confidence
- Knowledge

(Flego 2014; Garcia et al 2013; Kennedy et al. 1998; Moynihan 2006; Lawrence et al 2006; Wrieden et al 2010)
Aim:
To reduce barriers to cooking and healthy eating of time, cost, knowledge in planning, purchasing, preparation and cooking.

NHSGGC cooking programme

“...helped me a lot to build my confidence on cooking new foods, making it healthy and sorting out my portion sizes.”

Candice, Greenock
2. Set up NHSGGC procurement framework:

- 2016 tender to become NHSGGC supplier of community cooking programmes
- Supports Quality Assurance of:
  - What is being delivered
  - Suppliers
  - Monitoring & evaluation
The Evaluation of the Effectiveness of the Eat Better Feel Better Cooking Skills Programme

Phase 1
**Evaluation of NHSGGC Eat Better Feel Better cooking programme**

**Aim:**
To reduce barriers to cooking and healthy eating of time, cost, knowledge and waste in planning, purchasing, preparation and cooking.

**Method:**
A single-group repeated measures Design:
- Pre questionnaire (n=62)
- Post questionnaire (n=62)
- 3-4 month follow up telephone interviews (n=42)
- 3-4 month follow up questionnaire (n=17)

**Results:**
**Demographic of participants:**
n=136 of which:
At follow up:
- 89% came from SIMD 1 & 2 (72% and 17% respectively
- 65% female
- 82% >45 years old
Results Food Costs

Questionnaires:
• No change in food costs per week
• Takeaway/fast food costs reduced

Follow up:
57% reported spending less money on food shopping mainly because bulk cooking, using leftovers and buying less processed/packed foods

Yes, shown how to budget...buying more fresh and use leftovers more....

Yes, raw veg and fruit now...no more expensive rubbish
Preparation & Cooking
Time

Questionnaires:
• Significant changes in:
• ↓ preparing ready meals in the microwave
• ↑ preparing meals from scratch
• ↑ planning before shopping and cooking in bulk

Changed cereals I buy as I found the ones I bought too high in sugar

More fresh and healthy foods...less boxed and packaged foods
Preparation & Cooking

Time

88% reported preparing more meals from raw ingredients mainly due to:
1\textsuperscript{st} Eating healthy
2\textsuperscript{nd} enjoying cooking
3\textsuperscript{rd} More tasty

Enjoy cooking from scratch, the taste, more nutritious...I like smelling the food

Cooking from scratch..have to be well prepared but makes it easier for me during the week
Food waste

Questionnaires:

• **Significant** reductions in throwing away left over that was maintained at follow up.

• 79% reported wasting less food mainly due to freezing leftovers and using leftovers to cook new meals

..with old bananas I make frozen foods or bread; make soup with more out dated vegetables..I buy smaller loaves of bread to reduce waste....
Results: Food Knowledge

Questionnaires

Significant improvements:

• Understanding why eating a balanced diet is important
• Understanding Portion Sizes
• Increase in reading food labels

Confidence

• Significant increases in confidence that was maintained after 3-4 months.
Follow up

What was the most important thing you learnt at the course?
1\textsuperscript{st} Learning and enjoying how to cook properly from scratch
2\textsuperscript{nd} Health eating and cooking
3\textsuperscript{rd} Reading food labels/nutritional information

Is there anything you have continued to do since attending the course?
1\textsuperscript{st} Cooking meals using recipes
2\textsuperscript{nd} Aware of purchasing products and reading food labels

I use a smaller plate for controlling portions
Given a little card with the traffic light system guide on it...checking foods when shopping
Follow up

95% reported the course was helpful to them and your family mainly due to:

1\textsuperscript{st}  All cooking and eating healthier better foods
2\textsuperscript{nd}  Enabling family to try new things
3\textsuperscript{rd}  Choosing better options – labeling important

Changed my attitude about food...aware of what I am eating...mindful eating
Conclusion

• Results confirm the effectiveness of the Eat Better Feel Better programme in reducing the barriers of time, cost, waste and knowledge in the planning, purchasing, preparation and cooking of healthy meals.

• Most improvements sustained 3-4 months after programme implementation
The Future

- Refresh procurement framework
- Phase 2 evaluation
- Ensure Health Professionals, partners and the public know what is available locally
Where we are now

- 11th Block of Cyrenians Good Food Good Health
- 13 quality assured suppliers for cooking programmes to NHSGGC
- With SG Child healthy weight money
- 49 community cooking programmes have been delivered and reports returned
- 387 individuals participated in the courses that are parents/carers in the household to 473 children and young people.
- 69% live in SIMD quintile 1 and 9% in SIMD quintile 2 (78% in SIMD 1 and 2)
- 73% participants attended a minimum of 3 sessions
- 90% participants were female and 10% male
Recipe Book

EatBetterFeelBetter.co.uk
Resources
Greater Glasgow and Clyde Community Cooking Network

Welcome

Lesson Plans

Below are the lesson plans for the Eat Better Feel Better cooking programme. The lesson plans are for those that have received training to deliver the programme.

- [Week 1](#)
- [Week 2](#)
- [Week 3](#)
- [Week 4](#)
- [Week 5](#)
- [Week 6](#)

Below are the bolt on resources when the course is delivered to specific groups:

- [Child & Adult](#)