



Impact and retained behaviour change following participation in Cook and Eat Well courses in Southwark Children's Centres – a medium term evaluation

Description

Evelina London Early Years Community Food Workers deliver 6 week Cook & Eat Well courses (CEC) for families in partnership with Southwark Children's Centres. These courses offer practical support to families around cooking economical, healthy meals while learning about key public health nutrition messages. The approach is informal, sociable and inclusive, and a crèche is provided. The course is accredited by King's Health Partners (1).

The courses are evaluated in the *short term* through a series of questions relating to the course aims and objectives (2) and assess the participants' knowledge and confidence around the weekly topics.

This practice example examines the medium-term evaluation of the courses, rather than the courses themselves.

Context

Southwark has one of the highest rates of childhood obesity in London (26.3% in Reception and 43% in Year 6 (3). The CECs contribute to the Early Years component of the Southwark Healthy Weight Strategy – Everybody's Business 2016-2021 (4).

The aim of undertaking a *medium term* evaluation of the CECs was to investigate:

- The appeal of the intervention to participants
- The retention of information received since the end of the CECs
- Behaviour change around food and cooking
- Their contribution towards reducing the *risk* of childhood obesity
- Unintended effects or impact

Six of the CECs were offered as universal courses and three were targeted courses. The latter offered support to referred families already receiving support for additional challenges e.g.: housing problems, mental health difficulties.

Participants completed the course if they attended at least four out of six sessions.

46 families accessed the CECs in Southwark Children's Centres. 19 families completed the course and were invited to the evaluation event.

Method

19 families who had completed a CEC in Southwark between September 2017 and March 2018 were invited to attend a celebration event, comprising of a focus group and a cooking session. 13 attended the event.

The focus group was facilitated by a member of the Children's Centre team in an attempt to avoid any potential bias. Four main topics were discussed: recruitment and perceptions, what was it like, changes to attitude and behaviour, barriers to change.

The group was split into two smaller groups - one group attended a focus group session while the other engaged in a cooking session facilitated by the Community Food Workers. They then switched over so each participant had the opportunity to contribute to both activities. Five dishes were prepared.

At the end of the planned activities, the food prepared was eaten by all together - parents, children and staff.

The cooking and shared lunch aspects of the event were included to express gratitude to the families for their participation in the focus group.

Outcomes

New themes were identified during data analysis:

- Health
- Behaviour change
- Food labelling
- Impact on children
- Budget
- Knowledge
- Social interaction
- Barriers

Participant comments on the CECs were overwhelmingly positive and demonstrated that the course aims had been achieved.

Health was a key theme. Specific health conditions mentioned included Type 2 diabetes, hypertension, high cholesterol and overweight e.g.: *'I lost 10kg. Ramadan helped but since course my weight has been dropping'*

Behaviour change was apparent. Feedback from participants showed they had retained knowledge *and* proactively applied it to their own situations after identifying which changes would be most beneficial, such as measuring oil to reduce fat, eating more fruits and vegetables, changing cooking methods, recipe adaptation, and then teaching these recipes to other family members/friends e.g.: *'Before, I fry, fry, fry but since course I don't use oil, especially red oil'*

Children from the families were learning about healthy eating and sharing knowledge at school, and one of the children with additional needs had significantly increased the variety of foods she was

eating. One parent highlighted that he valued the *interaction* with other people and had remained in contact with friends made during the course.

Impact on *budgeting* was apparent. Participants discussed their improved awareness of price differences between branded and supermarket brands and also the economic value of street markets. One participant reported a reduced food bill through buying less meat and biscuits.

Key learning points

The medium-term evaluation event was a success in that it was a tangible community celebration of all that has been achieved through the CECs. The families were able to give something back through the focus groups and our service was able to thank them through sharing food and expertise.

The research demonstrated that the course aims and objectives were met.

It also helped us to identify a number of unintended outcomes and therefore the added value of our courses, which can inform future planning and delivery. For example, health improvement of family members who had not attended the course shows the potential of the courses to reach beyond the participants and into the local community. The retained knowledge around food hygiene may contribute to local reductions in foodborne illnesses.

The discussions around budgeting highlighted the hardship that many local families experience. Comments were made about the expense of buying fruit and vegetables and how more “filling” food such as crisps were much cheaper. There was mention of the Healthy Start scheme and how this had helped one family to increase their fruit and vegetable intake with some concern about how this would continue when they no longer meet the criteria (i.e. when the youngest child is 4 years old) Some parents described how their financial situation was a barrier to making healthier food choices and how reliance on food banks limited their choice.

The quantitative data suggests that although the CECs appeal to families, a high proportion of them do not complete the course. Since this medium term evaluation, the community food workers have altered practice and now have a more active role in contacting families and establishing a relationship during the early weeks of a course.

The intention now is to embed this medium term evaluation as an annual event. It will continue to inform us of the challenges faced by local families and of the efficacy of our interventions. As an enjoyable collaborative event, it will also help to promote our service amongst local young families. Future evaluation events will aim to incorporate more quantitative data obtainable by observing retained food preparation skills and assessing food hygiene knowledge. This would have the added advantage of providing a broader evaluation of retained practical skills, to complement the qualitative data provided during the focus groups, which will link more closely with the course aims and objectives. Future medium term evaluations will also provide an opportunity to examine the potential barriers to course completion, which will inform course planning.

References

1. <https://www.kingshealthpartners.org/education-and-training/education-academy>

2. Cook and Eat Well Course – Aims:

- To increase participants' knowledge and confidence in preparing healthy family meals on a budget
- To increase participants' confidence in using food labels to make healthy food choices for their families
- To develop participants' skills and confidence in food preparation and cooking
- To increase participants' knowledge and understanding of food safety and hygiene
- To model positive mealtime behaviour to help prevent or manage difficult mealtimes in children
- To help increase the uptake of the Free-D scheme
- To reduce participants' feelings of social isolation through group contact

3. Child Health Profile June 2018 – Public Health England

<http://modern.gov.southwark.gov.uk/documents/s63091/Appendix%201%20Healthy%20Weight%20Strategy%202016%20-%202021.pdf>