

# **FSA's Kitchen Life 2 Project**

## **Kitchen Life 2 Update**

### **Background**

1. Kitchen Life 2 is a multi-method project which aims to explore kitchen behaviours in domestic and commercial kitchens in as close to real-life settings as possible.
2. The aim of this study is to identify:
  - a. the key behaviours relating to food safety that occur in domestic and catering conditions
  - b. Where, when, how often and with whom they occur and influences on those behaviours that would need to change if the behaviours were to change (influences may be environmental, regulatory, social, motivational (e.g. beliefs, habits) or capability (e.g. knowledge and skills)).
3. In turn, this will inform two objectives:
  - a. provide data for risk assessment
  - b. develop hypotheses for behavioural interventions
4. The project consists of three phases: A literature review on food safety behaviours, fieldwork, and analysis.

### **Methods**

5. The literature review focused on the “4 C”s, as well as exploring behaviour change since COVID-19. The literature review highlighted where there were evidence gaps around behaviour in kitchens (both domestic and commercial); and where there is self-reported data, but no ethnographic or observed data. The results of the literature review informed the scoping of the fieldwork phase of the project.

6. The fieldwork is primarily ethnographic in nature, involving motion sensitive video capture of people in kitchens, which is codified into a searchable database of behaviours. The fieldwork is phased across the year to capture seasonal differences in behaviour.

7. Further methods, including surveys and interviews, as well as passive measurements (fridge/freezer temperatures, photos of fridges, and shopping receipts) are also used to provide context, and to explore the behavioural barriers and levers underlying certain risky behaviours.

## **Project Progress**

8. The pilot study, consisting of 2 domestic and 2 commercial kitchens was completed in July 2021

9. Wave 1 took place September-December 2021, with 8 households and 6 businesses taking part.

10. Wave 2 is underway, with 14 households and 8 businesses taking part, with analysis planned to complete by February 2022.

11. Wave 3 is due to take place over Spring 2022, and Wave 4 in Summer 2022. There will potential be a Wave 5 in Autumn 2022 to supplement any shortfall in sample.

12. The total anticipated sample is 55 FBOs and 45 domestic kitchens.

## **Emerging findings**

13. Findings from the pilot revealed that:

a. In FBO kitchens:

i. There was a gap between culture and practice for example, policies about mobile phone use were not always adhered to.

ii. Hygiene is affected when staff are busy or distracted

iii. There were incorrect beliefs about the spread of foodborne illness; some believed that it was not possible to spread illness onto others and therefore it wasn't necessary to take time off work.

iv. Limited use of thermometers when cooking

v. Physical space in the kitchen matters. It's more challenging for smaller kitchens to manage good food hygiene (also true for domestic kitchens)

b. In domestic kitchens:

i. Behaviour around leftovers was undesirable for example, keeping leftovers at room temperature and eating them the next day.

ii. Very few people prepared raw meat; it was more common for participants to use frozen meat products.

iii. Handwashing is often perfunctory; a quick rinse, rather than a thorough hand wash with soap.

iv. Participants often stroke or feed pets in between cooking and eating without washing their hands. Sometimes pet food is kept close to human food.

v. Concerning findings in relation to use-by dates.

14. Key methodological learnings from the pilot:

a. Photographs will be used to record participant's receipts from their shopping. This will help to determine the time taken from purchasing to storing food at home.

b. Audio data will be captured to provide further context to visual data

c. Surveys and interviews have been essential to establish beliefs, off-camera behaviours and to identify knowledge/behaviours gaps.

15. Data can also be used to 'deep dive' into specific topic areas. For example, data from wave 1 has been analysed to consider the use of tea-towels and dish cloths in domestic kitchens. From this deep dive we found:

a. Tea towels and cloths are multi-purpose - used for several tasks in the kitchen environment

b. Cleaning of tea towels varies from daily (less common) to weekly (most common).

c. Several unhygienic behaviours have been observed using tea towels and dish cloths including using them to pick up food, clean eyeglasses, wiping mouth/face and wiping raw chicken and surfaces.

## **Next steps**

16. Following fieldwork completion, analysis will be conducted on key risky behaviours (identified in collaboration with Risk Assessment colleagues), such as behaviours around raw meat, fish and poultry.

17. A handbook of behavioural interventions will be produced, highlighting areas where there is scope to “nudge” people and/or businesses towards more hygienic practices, using the COM-B framework (which looks at how capability, opportunity and motivational factors can help or hinder a behaviour).

18. We are currently advertising a PhD studentship to explore the data in more depth, linking to Food and You 2 data to explore the gap between what people say and do.

19. Finally, there is scope for secondary analysis, either “deep dives” into risky behaviours, or exploration of wider areas such as food waste and sustainability.

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