

# East Birmingham Family Food purchasing project

*A qualitative analysis*

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# 1. Introduction

Birmingham has a young and diverse population, with one of the highest rates of adult and childhood obesity in the UK, from which there is significant health and economic burden. Although dietary quality and obesity have multiple and complex interacting predictors, one of the primary determinants of quality of diet is the immediate food environment (Hartman et al., 2015), and family purchasing decisions are powerful predictors of intake (Applehans et al., 2017). However, our understanding of predictors of family purchasing decisions is limited to literature which is predominantly from the US context, and little is known about how ethnicity and socioeconomic status might moderate purchasing decisions within similar geographic areas in the UK. Understanding this is important for the development of policies that are likely to influence purchasing behaviour in the specific groups that have greatest vulnerability. Lower socioeconomic status families and families from ethnic minorities have poorer quality of diet and obesity outcomes. Examining food purchasing decisions at a local level is key to inform local government policy, because sometimes, evidence from one culture or context does not apply in others. For example, one study in Leeds, UK, did not find any support for the link between proximity to food outlets in home and school environments and childhood obesity rates (Griffiths et al., 2014), despite other studies (e.g., in the US) demonstrating strong relationships between fast food outlet density and prevalence of obesity. Thus, currently, at local, regional, and national levels it is not known what policies could most effectively influence relevant purchasing decisions, nor at what ecological level (household, local community, wider region) they should be focused.

In February 2020, Birmingham City Council published the East Birmingham Inclusive Growth strategy to ‘address health and employment inequalities, improve social mobility and make lasting improvements to residents’ lives’. One goal of this strategy is to promote a healthy food economy across East Birmingham. Ideally, this policy will both strengthen local businesses and increase access to fresh, healthy food. However, whilst businesses may be encouraged to provide increased access to such food, if people do not purchase it, this provision will not be sustainable or effective in improving health.

Therefore, this study aimed to explore factors contributing to parental decision-making regarding food purchasing at the family level, by examining parents’ capability, opportunities, and motivations regarding food purchasing decisions in and out of home. Exploring this will help to identify at which ecological level important determinants sit, specifically for individuals in a discrete geographical area of East Birmingham. This will help to identify potentially effective targets for policy intervention to improve healthy food purchasing tailored to East Birmingham, which could have positive implications on community health and support local food suppliers.

## 2. Method

### 2.1. Design

Sixteen semi-structured interviews were utilised to investigate people’s family food purchases, both when eating inside and outside the home. (See appendix A for the Interview Schedule)

## 2.2. Materials

An Olympus Dictaphone was used to record the interviews.

### 2.2.1. Demographics

Demographic information was gathered; parent age, gender, ethnicity, number of children, and dietary requirements were assessed. Information about the number of adults and children in the household was measured. Parents subjective social status was examined using the MacArthur Scale of subjective social status. The scale features an image of a ladder, with the top depicting those who are the best off, and the bottom depicting those who are the worst off. Lower scores indicate participant perceived lower subjective social status.

## 2.3. Participants

In total, 16 parents were recruited using online advertisements and social media between March and April 2021. Parents were eligible to participate if they were the primary food decision maker in the family. Parents were also eligible to take part if they could read and speak English, were living in the Hodge Hill area, and if they had at least one child under 11 years old who was resident with them most of the time. Families with food allergies or illnesses that affect eating behaviour were excluded. Ethical approval was obtained from Life and Health Sciences Ethics Committee at Aston University (#1748).

## 2.4. Procedure

Each interview took place online using programmes such as Skype or Microsoft Teams. Interviews lasted around 60 minutes depending on how much the participant had to say. Each interview was audio recorded and consisted of eight semi-structured questions investigating participant's family food purchases. By using semi-structured interviews, participants were able to speak freely about their experiences with the researcher. Where possible, the researcher was able to probe the participant's further for more detail, to gain a greater understanding of their experiences. Parents received a £20 shopping voucher after participating.

## 2.5 Data Analysis

Each focus group was transcribed by the transcription company TranscribeMe. Once transcribed, the interviews were analysed using a framework analysis, as outlined by Gale et al. (2013). After the researcher had familiarised themselves with the data, codes were applied to a small selection of the transcripts, these codes were then reviewed against the components of the COM-B model of behaviour (Michie et al., 2011). The COM-B model is a framework for understanding behaviour, where three essential components – *Capability* (physical/psychological), *Opportunity* (social/physical) and *Motivation* (reflective/automatic) - are all needed for *Behaviour* to occur. These components were utilised to create a coding framework which was applied to each interview transcript. In a reflective process, the interviewer then returned to the transcripts to see if the coding framework was appropriate. The researcher then reviewed the statements attached to each code and identified emerging themes within the data.

## 3. Results

### 3.1 Participants

In total, 16 parents participated (13 women, 3 men). Participants had a mean age of 38.5 years (range = 29-51 years). Participant ethnic background was: 75% Pakistani, 12.5% White British, 6.3% White and Black Caribbean, and 6.3% “Other”. Most families (68.8%) followed a Halal diet for religious reasons. Parents’ had a mean of 3 children (range 1-5) per household, of which a mean of 1.69 (range = 1-3) were primary school children (children under 11). Households comprised a mean of 5 people (range 3-8). Mean subjective social status was 5.13 (SD = 1.63), indicating that participants in general felt they were neither high nor low in social status.

### 3.2 Framework analysis

When purchasing food to eat within the home, analysis of the transcripts resulted in five themes:

**I know what I need to do**

**I want my family to be healthy**

**Purchasing food is complex**

**The importance of social support**

**The use of problem solving**

When purchasing food to eat outside of the home, analysis of the transcripts resulted in a further five themes:

**Reasons for purchasing food**

**Barriers and facilitators to purchasing foods to eat outside the home**

**It’s not possible to eat healthily outside the home**

**Eating outside of the home is a treat**

**I want what they are eating**

### 3.2.1 Food to eat within the home

#### 3.2.1.1 I know what I need to do

Parents were able to demonstrate their capability to understand and produce healthy meals. Most families reported enjoying producing healthy food for their family and saw doing so as part of their identity.

When asked to describe healthy eating, all participants were able to identify healthier foods and provide a rationale for the health benefits of eating these foods. However, there was a varying level of difference within the depths of knowledge parents had about the health benefits of foods. Some parents simply noted that foods such as fruit and vegetables were important for a healthy diet.

*“Honestly, just fruits. And salad, cucumber, tomatoes, just those things.” Sanaa*

*“Healthy food, basically like vegetables, fruit, they're all healthy.” Zohan*

Other parents provided much more detail about the importance of food types for a healthy diet:

*“If I think about any meal, I'm thinking about all the different things that need to go on a plate. So it's, okay, well, I need to have-- today we're going to have whatever. This has got protein in. It's just having a variety of stuff, so if I have a rough idea of what meals I can make out of certain foods, that's what I'm going to buy but it's got to incorporate all the different things. So it's got to have protein. It's got to have carbohydrates. Those are my main things really... and protein's just amazing because I know even for myself like I said, I was the last person to look after myself. Now I know that if I eat properly; if I eat protein, I'm not then snacking on all the crap that's in the house.” Safiya*

*“Fish is quite healthy... The red meats, carbohydrates, stuff like that. Fibre for their health. They have to eat fruit for the fibre... Not too much and not too less for them. And to take things like vitamins and things into consideration. They will have like an orange juice so that vitamin C is there.” Alaya*

A small selection of parents believed that the sign of preservatives within a food's list of ingredients indicated that it was unhealthy.

*“I think that if the availability of the product is longer, it means that it's not healthy. This is how I connect this. So if it said like, “Oh, this food, it lasts for two years,” I'm thinking, “Okay. It's two years, so it must have something inside.” So I'm trying to avoid that. So if it has a short date, then I'm like, “Okay. This is healthier. If it's gone in two days, I know that this doesn't have a lot of processed things in it.” So this is the main thing that I'm looking at.” Nadiya*

*“When we look at healthy eating in our family, it would be stuff that's not processed. It's all homemade. It's got less salt, less sugar, that kind of stuff.” Farah*

It is important to highlight that there were some contradictions in families' views on what foods could be classified as healthy foods; with some foods high in sugar or fat still being perceived as a healthy option.

*“I know the normal chocolates are more calories, more sugar than chocolate biscuits, and I pick that or a Penguin. Stuff that isn't as much chocolate as the normal chocolate bar... They might have too much sugar in it. Too many calories. I do avoid that. I do get them chocolate biscuits and KitKats or Penguins, but I don't buy the normal chocolate bars. They know they're not actually good.” Alaya*

*“Sometimes they'll pick up a can of Pepsi and I'll say, “No, no. We're not having that. We'll have the Capri Sun sugar-free instead.” So I'll give them the alternative option if I can.” Hamza*

However, in general, parents believed it was important to eat a varied diet of both healthy and unhealthy foods.

*“Healthy eating? It's a good balance of your foodstuff. So you will get some fats and things in there. But yeah, a mix of your proteins and your carbs it's going, so we will let them have sweets and things like that on the understanding that they need to actually get some fruit down maybe first before they get the sweets and plenty of liquids as well.” Richard*

*“Healthy eating is having everything in mod-moderation. So don't deprive yourself of anything, but not-- yeah, not having too much of one thing. So in our house, we don't lock away the crisps, the chocolates, and things like that but, equally, they're not kind of free reign to have all the time. It's something that you have after you've had a proper- a proper meal.” Fatima*

Despite these differences in knowledge about the health benefits of certain foods, there was an overall understanding that the way foods were cooked also depended on whether they were healthy or not; with greasy foods cooked in oil or ready meals perceived as being unhealthy when compared to grilled foods or foods cooked in an air fryer. Using healthier cooking methods, allowed families to feel that they could eat a variety of foods and live a healthy lifestyle.

*“I mean like I said when we make curries, we tend to put a lot of oil in. But that's something that I really kind of don't do now. I'll put in as less that I can.” Farah*

*“But my wife's a healthy cook, so we don't fry our food, they vary. Even when she's making curry's or whatever, very little oil is used. Instead of making chicken steaks, we're grilling them instead of frying them. We've got an air fryer. So the food*

*themselves, the shop doesn't change regarding the health, it's the way we cook it-- or my wife cooks it as well."* Naeem

*"Initially, I did use to cook quite a lot of deep fried-- initially, when my children were really young, but I've really moved away from that since I purchased a Tefal Actify. And then, my children don't mind it as well. They're none the wiser because they were quite young when they used to have the really deep-fat-fried things."* Aisha

Similarly, when exploring parents abilities to cook healthy meals, all families felt they were capable of doing so. Those who felt they were most capable described cooking as *"quite easy as well once you get to it"* (Richard).

*"If I need to make them a healthy meal, I'll know where to go and buy, from where to buy, and the price as well, because it's important as well."* Nadiya

*"I cook everything from scratch. So don't really buy ready-made meals."* Iqra

*"I'm cooking at home because I think that I cook really good. And I prefer to go and see the products that I'm going to cook. And the vegetables, I know that they are fresh, and I know the meat is fresh. If it's processed, I don't know where that meat comes from. So I'd rather just go and see my products and start cooking at home for my kids."* Nadiya

For some parents, the role of being the home cook was part of their identity as the caregiver and they therefore spent their spare time looking at recipes and planning what meals they will prepare for their family over the coming days.

*"My third child will tell me that they had no food at all at lunchtime, which obviously they did, but she'll tell me that - then obviously, Dad's at work, so I have to kind of rustle something up. So I try to prepare in advance sometimes, but that doesn't work out. But I do sort of have to think on the spot."* Aisha

*"You've got to do your shopping. And it's like, okay, so for this week we're doing five healthy meals using fish, veg, chicken, kind of thing. And you've got your recipe cards and you've got all the ingredients on the shelf, in the fridge. And you just pick it up and you go. And you know what to make."* Farah

*"No. I mean if I haven't cooked; if I haven't done the hard job of feeding them myself, I feel like they haven't eaten properly. And they need to have it on time. And I am guilty. I finish work at 3:00. I haven't finished. I was supposed to finish, but I'm going to jump back on a computer in a bit... and I know that I would like him to eat right now. So I tried to give him something which was healthy ...But I'm going to make-- so in between 5:00 and 6 o'clock I'll make a proper meal... So you just try and do the best that you can."* Safiya



By planning meals days in advance, this encouraged parents to write shopping lists to help them purchase healthy foods whilst out shopping.

*“So what I do is, I do a shopping list and I just tend to buy what I need”. Sanaa*

*“So if anyone suddenly comes up with something that they want, we will slap it on the shopping list, and if they've got it, we'll pick it up as long as it's reasonable... there'll be discussions on is there something you particularly fancy this week. And if there is, then again, we'll get out on that shopping list, and we'll look out for it.” Richard*

Some families felt it was important to not only provide healthy home-cooked foods for their children but to teach their children how to cook healthy foods themselves.

*“So instilling that at quite an early age, I think, alongside that kind of-- some of the basic coo-cooking things. So I know when my oldest was, like, 10 or 11, I taught him how to do a basic pasta sauce and, and a basic curry. 'Cause curry-- it's, it's the same base, and then you just chuck in your eggs or your meat or your veg or whatever you put into it. And, and that kinda thing ... I thinking having some cooking skills are, like, really good. So my kids will make healthy choices, generally, when they're having stuff at home. They know how to fry an egg or to scramble, you know, something like that to have for breakfast.” Fatima*

However, while families displayed their **capability** to cook healthy foods, it was often perceived that doing so took more time, than cooking healthier meals. Due to this, the decision about what to feed a family was sometimes “*about convenience as well.*” (Rania)

*“Obviously, with work commitments as well, so it'll be during the week depending on what hours I'm doing, what's going to be quick to make.” Safiya*

Therefore, there was a general consensus that families knew what they needed to do to eat and prepare healthy foods; however there was a great variance within families' knowledge of healthy eating, which may contribute to their food purchasing decisions.

### **3.2.1.2 I want my family to eat healthy.**

Parents expressed their opinions on the importance of having a good diet and reported being highly motivated to eat healthily in order to keep their children and themselves healthy and not at risk of developing any health complications.

Some families valued healthy eating as they believed a good diet was important for a person's mental health, wellbeing and education.

*“Whatever you're putting into your body, I feel like you have to be clean, nutritional, to get your mind working.” Zohan*

*“And I've always said feed the belly and feed the mind because if you put good food into your bodies that's fuel for their minds. Even when they've gone to school, when they've had exams, I'd give them a banana. Or when they sat their grammar test, I gave them almonds. Right. "You need to nibble on these." That sort of thing. ... I always felt that they have to have good food to be able to feed the brain, to be able to be engaged in their education. So it was feed the belly, feed the brain. It was just something as I said.” Safiya*

Due to the value placed upon the benefits of healthy eating, parents believed it was important to expose children to as many food choices as possible.

*“I like them to have a taste of everything, really, so getting them to try different fruits as well, or vegetables, even. Yeah. Because sometimes they go, "Oh, what's that?" if they've never seen that before... and if this a type of fruit or a vegetable, just so they have that understanding and awareness of what they're eating.” Zohan*

*“I think when it comes to food, it should be cooked from home and every option should be thrown at the children. From the beginning, we've had that; throw as much variety, different kind of bits for them to pick up the taste and that's what I've done since they've been babies and it still lingers on.” Iqra*

Iqra continued to explain how exposing her children to different foods had influenced them to enjoy eating healthily and ensured that they stayed in good health.

*“And even fruit. I know a lot of parents don't give fruit. But fruit is something which is - my kids love fruit, and especially when it comes to summer season when you have all the different variety of the berries and that. But every day when they come back from school, there's a fruit bowl waiting for them. So they know what they are expecting and they enjoy their fruit. So I think fruit is very important as well... I'm very conscious when it comes to food when feeding my children. To the best of my ability, I have given them the healthiest diet, the healthiest food that I can... Usually, kids don't really eat their veg. My kids were raised with that.... I've brought them up like that so they actually enjoy their vegetables and that. So when it comes to healthy eating, I think they're pretty good.” Iqra*

The main reason for parents motivation to feed their children healthy foods was to ensure the health of their children, as parents wanted their children “to grow up fit, well, and healthy” (Fatima)

*“It's as I feel any reasonable parent should be. You don't want your kids to be unhealthy. So I try and do it for them because I understand they could be healthier for them than just eating junk. So it's purely to look after them and have a good start in life. They may hate me for it when I'm older, but hey, at least they'll be healthy and hating me.” Richard*

*“If you see, there's a rise of children's obesity, and this percentage rise from the past three years. Those kinds of things scare me that are on the news and things that I've actually seen.” Rania*

A selection of parents had more specific worries about their children developing future health complications due to a poor diet.

*“I know that, for example, as they're growing, their teeth are developing, and obviously, a lot of food contains things that could spoil your teeth, for example. So it's about making them aware, and I do tell them, "You need to make sure that you brush your teeth because you've had this now because it contains a lot of acid." For example, the oranges, do you know? I do tell them because I think it's important that they are aware of these things.” Aisha*

*“The UK average of obese children was 1 in 10, but Birmingham was 1 in 4. I don't know if you knew that. So you have to be on it”. Naeem*

*“No. It's just, I'm thinking of them, to keep them as healthy as I can. Because I'm thinking, if I'm providing them unhealthy food, they can develop diseases, and they can get ill. They can have anemia. And I'm thinking that I need to provide them with healthy food as much as I can. Because nowadays, the amount of food that we have, you don't know what is healthy and what is not healthy anymore. So I'm trying just to keep them as healthy as I can.” Nadiya*

Worries about keeping their children healthy were enhanced when there was a family history of diet related health complications.

*“Because I've got [diabetes], I don't want the kids to have it as well... So, long-term, I'm watching out for the kids as well if that makes any sense ... because we have a strong family history of heart problems and diabetes and that. I'd like to make a suitable choice, for now, otherwise, we'll probably end up in the same direction as the rest.” Hamza*

*“Just to ensure that the kids don't become obese. Maybe on a subconscious level one of my wife's nephews is actually-- he was an obese child and it made him an obese adult. He's not good in terms of his health. So we're just conscious that our kids don't become super unhealthy.” Naeem*

For families whose children had already experienced poor physical health or dental complications, parents felt more motivated to change their lifestyle and eating habits.

*“My oldest is getting a bit sort of round around her stomach, so I have to really watch things for her, just because obviously, with the weight, once she puts it on, it's just going to be really difficult to lose. So I don't tell her that I'm doing it for her, but I'm conscious, and I do try to cook to make sure she does that.” Aisha*

*“When I started breastfeeding my little boy, I thought I was giving him the best of the best..But I thought that by giving him breastmilk that was the best thing that I could do. And I did do that.. And for the first few-- four, five months, this one or two teeth, okay, I don't think I bothered too much cleaning them. ..So when his teeth did start coming through, by that time he was about two-and-a-half, his teeth were rotten. I'm sorry. The other thing I did was, the breastmilk was constantly in his mouth. So even at night because I thought, "My baby wants this." Even though it was hard for me sleeping in an awkward position, I wanted to give him breastmilk. And I did that for two years I breastfed him. And he used to sleep with the breast in his mouth. And it was the worst thing to have done. So he had rotten teeth. So at the moment-- last year, we had to have his teeth taken out. So right now, that's the only other factor that I have to think about. Foods that he can eat which are going to be soft food” Safiya*

*“My second [child], she's got two big cavities in her teeth. She likes, you know the ready-made biscuits and cake? So I avoid buying the ready-made snacks. If I buy it, she'll probably have it three or four times in a day, and that's not good for her teeth so I avoid-- there are some foods that I know they like but I have to avoid them.” Alaya*

In order for their children to stay healthy, some families denied their children access to unhealthy foods either within their meals or as a snack.

*“I don't buy fizzy drinks. I don't allow them.” Aisha*

*“When the kids are with me they're picking up biscuits and things like that. I'm like, "No, no. You don't need that." Iqra*

*“And with my children, I like to limit fizzy drinks and things like that. They don't drink a lot of fizzy at all. Even though I do and I keep it in the house, I won't allow them to have it.” Rania*

Alternatively, a few parents felt that denying their children foods could have negative consequences, and encourage their children to eat unhealthy foods without their knowledge.

*“ I do buy some sugary chocolates, like Snickers or Twix, because it's only right that I do give them some sugary items. Because I don't want tomorrow going to the local and getting it from there without me knowing. So at least I know I've bought it and they're eating it in front of me. But I tend to buy a lot of-- if I coach them to choose the chocolate, I'll get the cakes, the ones that are really plain, no chocolate or no honey or syrup in it. So something plain that it's sweet and sugary but not like a chocolate, if that makes sense?” Sanaa*

*“Because it's no good just saying no, you can't have all the time because they'll just try and get it from somewhere else. If they go to grandparents or friends or their nans, as soon as they get there, can I have sweets? Can I have biscuit? No, it's like they've never seen one of our house.” Richard*

Parents were also motivated to eat healthily in order to keep themselves or their partner in good health. Again this was in response to a current health problem, or a perceived health problem in the future.

*"I remember since my youngest was born, and I think Asian people usually suffer from low vitamin D. And then since he was born, I had really, really low vitamin D where it affected my health a little bit. And so you know when something says fortified with vitamin D written in whatever? That will make me stop and think, "Oh, well, okay. Yeah, I will get that." I don't know. I look at that word. It really does-- that sticks out for me."*  
Rania

*"My husband's been told he's got high cholesterol, we started to make small changes in our diet, so we've changed our oil to a rapeseed oil. All our bread is all brown or 50/50. Even our chapati flour that we use is also brown... If we can do an alternative, we will do an alternative. I try to put at least one sort of veg in every meal. So whether that is like spinach that I can hide well, or if it's courgettes or peppers or potatoes, I'll try to hide that in a meal"* Farah

As well as demonstrating their own motivation, a small selection of families had begun growing their own vegetables in order to increase their child's motivation to eat healthily.

*"But they've each taken their own choice. They've decided to grow their own vegetable that they'd want to do, so they now decided that they're in charge of that specific one. So my oldest daughter is doing sweetcorn, and my son is, well, hopefully, going to start growing some carrots, so nobody else will be allowed to touch the sweetcorn or the carrots. It'll be them pulling them out. And my daughter, the youngest one, is doing some peas. So that's their own specific vegetable that they're going to be in charge"*  
.Aisha

*"Something to do, I suppose. It's nice when you can actually plant something. Look after it for a few months, and then go, that's lovely. And it's takes you a couple of seconds to eat it what you've grown... But the taste is generally nicer. So and you know nobody's messed about with it. So there's only really rainwater that's gone on it. Nobody's been standing there spraying it, injecting it with things, or gassing around it. So yeah, it's the fact of something that you've actually nurtured that you can then shove in your face and enjoy."* Richard

*"We do find if they've grown it they will try it, even if they don't think they'll like it. We've actually got a fig tree as well down in the garden which is amazing and they will literally go and eat-- just literally pick them off the tree... So they can be quite adventurous"* Emily

Additionally, some parents were motivated to provide their children with healthy foods because of their experiences of healthy eating within their own childhood; this was experienced for parents who had positive and negative experiences of healthy eating.



*"If you look at me being an Asian woman, and my mum was illiterate, and we used to come home from school and we'd have chips. We'd have a big tray of chips and all the kids would help. And she was a widow. She'd just gone from being really well-off to nothing. And that was all carbs. And as I grew up, I didn't really know any better, and we would just have chapatis and that's all wheat. Now, if you think about that, as a child, if you're having bread in the morning, then you're having chapatis in the day, or some potatoes in the day, and then you're having two chapatis and that, it's a lot of carbs all day. Right. And I didn't know any better."* Safiya

*"I think because I grew up in a family and I grew up with a farm, I know how important it is to have healthy food. And that's why I'm so obsessed with this. Because I used to garden to plant my vegetables when I was a kid, and I want to share this experience to my kids as well. So, as well, education, I think, is the most important thing. So because of that, I want to give this experience to my kids."* Nadiya

*"It's like all the mistakes I made when I was younger, not eating as healthy. Because we didn't have that when we were younger, having salad all the time, whatever. We used to just eat our main meals and that was it. We have 10 times more salad and veg and fruit, healthy foods, than when I was younger... My husband did because he's from Pakistan and everything is fresh there. He's from a village so everything is fresh there. Fresh fruit and vegetables, off the trees. Literally, they had peach trees and banana trees in their backyard, do you understand? So everything was fresh. So he's used to it."* Samia

*"But I just think we were brought up on fresh fruit and vegetables and my mum's from an Irish background so he went to my nan's house for dinner. It was meat and vegetables. Meat, potato, and vegetables. And that stayed in. My mum got a bit more adventurous with a bit more stuff in there. But I think that cooking from fresh definitely is a family thing."* Emily

However, parents also reported situations where they may lack motivation to eat healthily, with one participant admitting they "hate healthy eating" (Naeem).

*"I mean, depending on how my day has been at work and if I feel like, "Do you know what? I'm tired and I can't do it anymore. I can't be bothered to cook today, let's just--" but that sort of mood. I think my mood really depends...sometimes I'm like when I am in the mood to cook, for example, I think about that before, what I'm going to have tomorrow so I know that I've got the ingredients there, ready. But sometimes on the day, I'm like-- or if I can't think about it the night before, "Oh, should I have it?" Zohan*

*"Not being able to pick up what you want and eat it. I want to pick up chocolates and cake. I have a major sweet tooth. I wanna pick up deserts and just eat them...I want to pick up whole fat, high-fat crisps and just eat it. I snack a lot and I like that, but I can't. I want to eat peanuts again, very high fat. Even though it's good fat, I have to reduce them, you see?... I want fish and chips all the time, but I can't. It's unhealthy, yeah? So*

*it's a chore because I want the unhealthy food, but I choose to stay away from it and eat the healthy stuff” Naeem*

Parental **motivation** was therefore high across the interviews, and this was predominantly due to the desire to ensure the health of their children and themselves. Parental *motivation was influenced by their knowledge* of the potential health consequences of a poor diet, as well as their *childhood experiences* of healthy eating.

### 3.2.1.3 Purchasing foods is complex.

There was a vast amount of variability within parents’ experiences of purchasing healthy foods, with some families feeling very limited despite their high levels of knowledge and motivation to do so. However, others felt they had enough *opportunity* to purchase healthy foods. Key factors considered when purchasing foods were the location of the store, the cost to purchase foods, the quality of the foods, the time taken to cook the purchased foods, the ability for the food to meet the families’ dietary needs and family food preferences.

When deciding what food to buy, parents evaluated the convenience of the store’s location and how the food retailer’s location suited their shopping needs.

*“It depends, if I’m coming back from work, so Sainsbury’s is near me. So Sainsbury’s is on my way, on this side, so I’ll pop into Sainsbury’s. Other times when I need groceries, our local is Tesco.” Iqra*

When asked to think about whether they would shop at a new healthy food retailer, families felt they would be encouraged to do so if the store was located near their home.

*“Obviously, being able to get there. If it’s closer to me, within walking distance. And then that would be a nice walk down as well. But, obviously, parking and all that comes into it.” Samia*

*“If it was quite far away, there’s a lot of effort going down that way, then you would think, “It’s just too much effort going there.” Hamza*

*“If there was one close enough, and I could walk to almost like on the way home from the school run and pick up-- every couple of days and pick up this, I would probably do that, but then you would have a market when you’re almost on every street corner, or you could have a proper old-fashioned greengrocer’s wouldn’t you? And I would do that, but at the moment, it’s just easier and more convenient to go to one place, pick everything up, and bring it back in the car.” Emily*

When it came to purchasing foods, most families agreed that the cost of food was important to consider. Richard described how cost determined which supermarkets he would purchase food from.

*“Cost would come into it. I mean, we wouldn't think of going to, say, Waitrose or so on. We stick to the more-- not well-known but the cheaper supermarkets as it was.”*  
Richard

*“So if I knew you could buy an apple from this new shop for 50p where I could buy a bag of apples from Aldi for 50p, I'm more likely to use Aldi because it just makes sense. At the end of the day, it's an apple. I don't know what's going into the background of them pesticides and things and how it's grown, but all I see is what I've got in front of me. It's an apple.”* Richard

Most families perceived healthy foods to be financially high in price and in most occasions more expensive than the less healthy alternatives. Parents often perceived organic foods to be the healthiest and most desirable foods; however these often came at a higher price.

*“And some of the fruit can be quite expensive as well. You have to think about the budget as well. You don't want to go over the budget”* Alaya

*“It's quite hard to buy healthy foods because it's a lot more expensive. So if you're getting organic foods, it's more expensive. Fruit and veg, generally, is more expensive unless you're getting frozen”* Farah

*“So then, obviously, you have to think about the price. When you're going through a lot of salad and veg and fruit, then you have to think about the price. And think, “Well, where's the best option?” And we've kind of switched over to organic as well. My husband likes the organic Gala apples. We've been having organic eggs for quite a while, free range ones. Yeah. So but that's expensive as well to get, that's more expensive. But if you shop around, you can get a good price.”* Samia

The high price of foods, in particular organic foods, prevented some families from feeling able to purchase them, despite feeling highly motivated to do so. This was often frustrating for families as they felt they were unable to provide healthy foods for their family.

*“Maybe the money. So, for instance, in one week, I don't have enough money, I just buy the non-organic ones. So it depends on what the shops provide you as well. Because in some shops, you can't find the organic products. So maybe I'm feeling a bit frustrated because I don't have the possibility to offer the kids something healthier. So this is the main thing as well, the fact that the shops are not providing what I want”* Nadiya

*“Yeah. It's a bit more expensive, isn't it? Yeah. Even if the government's cracking down and trying to get everyone to eat healthy and stuff, but at the same time, the prices are quite high, so if your someone that's less fortunate?, then I don't think you'll be able to really get to that; buy regular healthy food if that makes sense.”* Hamza

*“Again cost. So we can pick up a cucumber for 40 pence, a normal cucumber, and an organic one is like 90 pence a pound. You can get two cucumbers for that price. But,*



*obviously, if we had the money, I wouldn't hesitate to go for organic. But, obviously, pricing is always an issue."* Iqra

Despite the high financial cost of the desirable healthy foods products, other families felt the health benefits of the foods outweighed the price and were therefore happy to pay more for food items to ensure their families ate healthily.

*"It's a big difference between the normal tomatoes and the organic ones. The price is triple. So you just have to have that in consideration. But for the kids, I'm trying to buy as much as organic. So I'd rather have, for them, organics, and for me, non-organic. So this is the main that I'm looking at, if they're organic or not."* Nadiya

*"Yeah, so it's better to spend a little bit more money to ensure that your family are going to eat the food."* Maria

*"I'm not one of these prescribers where they go, "Processed food is cheaper than fresh." So I don't think I could just go into a processed food shop. I couldn't. That kind of goes against everything that I've been brought up with myself, so we've always had fresh food and vegetables."* Emily

When deciding what foods to purchase in a shop or market, all parents felt that the quality of the food was very important. Some believed that to purchase good quality food, you need to avoid cheaper food items.

*"Definitely. Because if it's not going to look good it might not even taste good as well. And sometimes they don't taste good, and why spend less? Spend a little bit more and get something proper."* Zohan

*"Then because I always have to look at the price as well, and then go to a good priced shop. Not necessarily the cheapest because, obviously, the quality guarantee won't be that good. But I've shopped around so over the 9 years, we've kind of worked out now where the best places are."* Samia

The hygiene standards of the shop or market were also perceived to be reflective of the foods quality. Parents were keen to ensure that the food was fresh and had not been subjected to germs.

*"I think with the big stores, you're more or less guaranteed that it is going to be fresh and it's going to be good quality. I think with the markets, you still have to be careful. As in sometimes if it doesn't look nice or it doesn't look clean, or if it looks a bit off, then I wouldn't go. Obviously, I wouldn't go in that direction. That would put me off. That would put me off. It has to look fresh. Mostly in Tesco and Asda and wherever you go, it's going to be-- it looks nicely packed and fresh. I wouldn't like it packed neither. I'm not into the packing neither. I like it just open in a basket for me to pick out. I'd like that"* Samia

*"I'm quite conscious of buying food from markets because they're quite open spaces and sometimes I feel that people sneeze on them. I'm quite weird that like. I see like what if they've sneezed on them or touched them? You don't know whose hands have been on them, do you know what I mean? Whereas in the supermarket, when they're prepacked, I feel like, ... It's got a lid or if it's got a seal over it, even though it's probably got holes in there" Zohan*

*"If it's not clean. Yeah. Because around here, we have a lot of shops that they are not - when you see them, they don't make you feel like, "Okay. I can go and buy from there." Because you see the stall shops that they have the stalls outside with the food, with the vegetable and the fruits. I'm not going there when I know that those vegetables and fruits, they stayed outside, and maybe a lot of people touched them. So I'd rather go to Aldi or Tesco than those shops." Nadiya*

The location of where the food was produced was also perceived to be closely linked to the foods quality. Aisha felt that if food products were grown in the UK, this meant they would be a higher quality than foods grown abroad.

*"I would like to buy a lot of UK-grown produce. I don't want to buy things that have come from Spain. I mean, I saw spinach the other day somewhere, and it was UK spinach, and then somewhere else, I saw spinach from Spain, and I thought, "Why do we have spinach from Spain?" I mean, because it's from-- so God knows what the taste would be like if it's travelled all the way here." Aisha*

The majority of families followed a Halal diet and therefore had to be conscious that all foods they purchased met their dietary requirements. While these foods could not necessarily be purchased from a supermarket as part of the weekly shop, most felt it was relatively easy to purchase Halal meat, as they knew specific shops in their local area that could meet their needs.

*"It has to be Halal and it has to be-- if we're buying like a chicken or some meat, it has to be from the Halal butcher. Fish is okay. We can buy that from anywhere, but the chicken and the meat and everything, they have to be from a Halal shop. The Halal butchers or they have to say Halal on it." Alaya*

*"I've got a butchers, that is, again, a Halal butcher that is about a two-minute walk from me. So we're there every weekend or every other weekend when we need meat" Naeem*

*"I go to a separate shop. Yeah. Because the supermarket one, I still doubt it a little bit. I still have a few doubts there, and it's expensive, as well, the supermarket one is compared to the smaller shops." Aisha.*

Another key factor when purchasing foods from a supermarket was whether their children and other family members would eat the foods.

*"She'll have raw broccoli. My little one, five-year-old, he'll have steamed broccoli. And I'll see my nephews and nieces and they'll be like, 'Why is he eating little trees?'" [laughter] But he likes it."* Nadiya

*"It's mainly me but it depends on what the children actually like to eat. So in the supermarket, we usually buy things like frozen pizzas because I know, obviously, the kids enjoy frozen pizzas. So I would buy that and then the juices and the crisps. They have particular flavours of crisps so I'll buy that depending on them. If I buy something new...they won't enjoy it. So it's mainly I buy it but keeping the kids in mind"* Alaya

Parents who referred to their children as "fussy eaters" felt it was pointless to purchase foods that their child had not eaten previously or try new foods with their children, because *"Anything new, no. New is bad"* (Richard).

*"We don't buy as many vegetables as we should. But it's mainly this youngest child. My youngest is nine. He doesn't like vegetables. So then, when I make a meal, I just like to make one meal so that will suit everyone. I can't make as many vegetables as I should"* Rania

*"It's back down to will they actually eat it because there's no good filling cupboards and fruit bowls full of stuff that they're never going to try. It's just a waste. And as well as overpaying, I don't like waste."* Richard

When parents reported that one or more of their children were a fussy eater, negotiating which foods to buy became quite complex, as parents were faced with the challenge of having *"to cook what everybody likes"* (Aisha) whilst still ensuring the family ate a healthy diet.

*"And I try to eat more vegetables and fruits, but then it's again, it's my youngest that doesn't like fruits and vegetables. We won't ever have a meal where it's all fruits and just vegetables on the whole plate. There has to be some kind of meat or chicken or something so that I feel okay that he's eaten something. So the whole meal won't be vegetables and things like that"* Rania

*"Who's going to eat what is the biggest one. So I can cook a fish pie and four of us will eat it, the other one won't. So what I try to do in that case, because he doesn't like white sauce, I'll do fish fingers, mashed potatoes, and peas. So he's literally having the same meal. I'm one of these that won't cook a different meal for every person. But I will make adjustments, so he can have fish fingers, mashed potatoes, and peas, which is essentially the same meal as the fish pie, but just without white sauce. So I look at it like that. So most of us will eat one thing and I could tweak it slightly for somebody else"* Emily

*"So my youngest, he doesn't like vegetables, any kind. I do still try. But if I put a portion of peas in his plate, he'll eat one. And he actually looks like he's going to be sick. So but I will try to put them in there. He'll leave them till the end of his meal. And then he'll just-- it'll just be such a big a scene, and okay, I'm trying one. I'm going to try, and then*

*everyone's just looking at him and waiting for it to happen. And he actually looks like he's going to be sick sometimes. So but I will keep trying. But it's usually the same vegetables like carrots and peas and sweet corn and whatnot. So yeah, but I will put it in on the side of a meal” Rania*

In addition to the likes and dislikes of their children, parents were also less inclined to purchase foods that they themselves did not want to eat and often chose foods that meet their “own desirable flavours” (Alaya).

*“I mean, there's some foods that I suppose I've never tried. So I'm not encouraging the kids to try, or I might have tried before and gone, no, that is just wrong. So there's no way I could put on a straight face to say to kids, "Mmm. That's lovely. Try it." Things like avocado and aubergine. I've tried avocado, and I couldn't encourage anybody to have that if they didn't like it already. And aubergine, something I've never tried it. Excuse me, so I've never tried it and have no encouragement to try it or try and get my kids to have it” Richard*

As outlined above, purchasing food for the family to eat inside the home was complex and often influenced by a variety of factors. Parents felt that they had the opportunity to purchase Halal foods, but only in specific stores. Whilst the cost of foods was the most discussed within the interviews, parents also placed a large amount of importance on the quality of the foods items. The purchasing of foods was further complicated by a child’s fussy eating, as parents were often challenged with the task of creating healthy meals that everyone would eat.

### **3.2.1.4. The importance of social support**

Healthy eating within the home was often perceived to create the optimum time for family social bonding; parents also looked to their friends and family for social support to allow them to continue to cook healthy meals for their family.

Most families believed that eating a home cooked meal encouraged the family to spend some well-deserved time together. Families treasured the time to sit and hear all about each other’s day.

*“It's a family time as well. So you can eat with us, and it's a family time, which is good.” Nadiya*

*“We do actually all sit down and have dinner at the same time. It's one of the things I was brought up on and I think it's important. Especially when the oldest one's eleven and the youngest one's seven to sit down and just talk about their day and all that is crucial still at the minute.” Emily*

*“I make sure that we have at least one meal every single day all together, and I like it. Because my children, even though they tend to be quite, "Hurry, eat up quickly," before*

*the younger one comes and trashes everything for them, but they have a nice chit-chat whilst they're eating. And I want that rather than eating independently watching television. I don't let them have food next door with the television. I don't allow it because I want them to have a conversation between themselves. It might be a very silly conversation, but at least they're having a laugh between themselves and just building that bond."* Aisha

As well as a good time for bonding, parents also felt their children benefited from watching their parents eat healthier foods when they all ate together.

*A lot of the times, they see that we have this so they will want to have it as well. So it's just like, salad... Because they're used to it. I know a lot of children, they don't even want to touch that food. Yeah. So I think it's because they'll see us eating then, like, "Okay. We want to try it too." Yeah.* Zohan

Parents often sought and benefited from social support provided from people outside the household, this support was reported to have a large impact on parental food choices. Parents often discussed recipes and ways to encourage young people to eat healthier foods with other parents.

*"Oh, that's a definitely talked about technique on the playground... So we've had various conversations about all sorts of topics as you can well imagine with kids. But we have talked about food. We've talked about different ways of sneaking different things into their food. It's quite ingenious sometimes what you can come up with."* Emily

*"We do ask around, my sister-in-laws what are you cooking this and that, and then we do get an idea from each other. Then we would kind of go and buy that thing and try it out."* Maria

*"I would listen to other mums, if you just start talking about healthy options. One mum will say something and then another mum will say something. I mean, I listen and take it from there"* Sanaa

Farah did not feel she had the social support as discussed by other parents and this was something she felt would be highly beneficial.

*"But I think a lot of girls like myself, we're Asian women, we drop the kids off, we're doing the housework. I might go to work or I might have a day off. But there should be these kind of groups where you can get together and where you can share what you're making. Let's have a look, how many calories is this? Not just calories. Is it actually healthy? Where are you purchasing your stuff from? And it gives something for the women to do or men even as well. It gives them something to do, something to pass their time. And they'll probably come away learning something from that as well."* Farah

However, sometimes the opinions of those living outside the household could cause upset or shame over the family food purchases.

*“I used to always shop in Asda, always. I don't know, Aldi and Lidl, personally I used to think that people will laugh at me if I went in that shop. But then when I realised that my friends are shopping in Aldi and they're telling me about how much they save, and the taste is exactly the same as the branded items... So I've stopped shopping at Asda and now I shop mainly at Aldi” Sanaa*

*“[My children are] quite skinny... It's like I don't mind.... But you do get the odd snide comment from family, that, "Oh, they're quite skinny. What to do with that." Obviously, we do see that. But he's like skinny... But some people are like no, they have relatives that are fat, and they're probably similar age..” Oh my gosh. What's happened to her”... Things like that. Me and my husband are quite slim so obviously, the kids are not going to be quite fat. We do get the odd comment.” Alaya*

Therefore, the social aspects of sitting down to eat a meal together not only benefited the family on an emotional level but also allowed children to view their parents healthy eating as normal eating behaviour. Equally, through sharing recipes and advice with other parents, families knew they had sources of social support which they could turn to if they were finding it challenging to provide healthy foods for their family.

### **3.2.1.5 The use of problem solving**

As noted previously, families decisions when purchasing foods can be quite complex; this encouraged some families to formulate strategies to overcome challenges with the complexities of food purchasing decisions, and cooking for children who are fussy eaters.

The most common problem solving method utilised across the interviews was for parents to shop at multiple food retailers to ensure families were buying good quality food at a reasonable price.

*“I do shop around in a couple of shops. I don't just sit in one place and shop. I do a weekly shopping in Lidl for the fruit and stuff. And then the veg, I have to go to-- you can get like cauliflowers and stuff like that. But you can't get the actual proper turnips and the other vegetables. You only get them in the Asian shops. So I do go to the Asian shop as well once a week. But the meat takes six weeks. I will go in six weeks limit. But for the other food, basically ones that-- things I would go to the Asian shop because you can't get sort of Asian things in Tesco and stuff like that. You have to go specifically to the Asian store for it.” Maria*

*“So going to different places for different things. So I'd go to Iceland for my frozen food. I'd go to Tesco for a lot of my fresh food and veg, because it last longer. And then Aldi for, like, a few of the filler bits in between.... And then Asda's got more choice. You*



*pick up a variety of other things as well. But I think one of the things that, like, with-- and, and it's-- that's really random, but, um, fruit and veg and milk, how long it lasts, and that kinda thing, Tesco and Asda seem to fit better than Iceland and, and some of the other more British supermarkets, which is weird. 'Cause you'd think it'll-- it's a-- it's all coming from the same place in” Fatima*

*“Because sometimes, to buy different things from different shops works out a lot cheaper, rather than buying it all from one place” Aisha*

For some families shopping at multiple food retailers each week was a necessary but laborious task, and parents often questioned the longevity of whether they would be able to continue doing so.

*“And I find it difficult when I do my shopping. When I go to some stores where I can't buy Halal stuff, then I'm having to do-- the Asian stuff. I'm having to do three different shops, for instance. And that just obviously does my head in. Now, if I just stick to-- we've got a Tesco. We've got an Asda nearby. Well, Asda is a bit further away. And if I buy my meats from there, it's expensive. Whereas if I go to the butchers, the Halal butchers, it's cheaper” Safiya*

*“It is a bit time consuming because you have to get that time and then by the time you do all that, you've got to go to this shop and then you're just going to hope they have something in there, if they haven't got the stuff then you've got to go somewhere else. It would be nice if we could get it in one store or one place; it could make life a bit easier. But hopefully, slowly, I think they are getting a lot of Halal meat into these local shops and supermarkets. So it is becoming better. But when they don't have it, it's a bit more effort going around. But we still do it because we need the food.” Hamza*

*“I have got that time to shop around and I'm okay at the moment because I've got the energy to do it. I've got the time to do it. I've got the car to do it. I think maybe later on in life I'd prefer the one shop [laughter]. When I haven't got the energy to shop around and walk around or anything. But at the moment, I don't mind it because it keeps me busy, so I don't mind. I don't mind” Samia*

Samia further described how having access to a car benefited her food purchasing decisions.

*“So I go to quite a few different places for different food stuff as well. Only because I can, because I drive. I think if I didn't drive, then it would be really different. So I've got that luxury where I can. I mean, I go to Tesco for my normal shopping because it's just down the road. I go to Asda every other week. I go to Aldi for my fruit and veg because they have good quality and good prices. And then I go the Asian shops for my meat. And then they have good fruit and veg as well, so I go there” Samia*

Other families did not mind shopping at multiple stores, as they felt the benefits of saving money and ensuring they were purchasing good quality food for their family was worthwhile.

*"I do a bit of shopping everywhere - sometimes the price can put you off. Because you see a price of a punnet of strawberries, for example, at a ridiculous price, but then when you go somewhere else, they're quite cheaper, and you're like, "They look more pale and there's yellow ones and they're expensive, whereas--" and they're not even-- for example, they'd be class 2 and it's expensive, and then you go somewhere else, you get the cheaper class 1s, do you know what I mean? Sometimes I think it's the price as well that kind of puts you off" Zohan*

In order to overcome financial barriers families reported purchasing food items when they were on special offer in order to save money. In addition to buying foods when they were sold at a reduced price, families also bought larger sized products to save money and time.

*"If there's an offer, as a family, obviously, cost is always involved. So if things are on offer, that's why I stock up due to the price. If it's half-price or buy one get one free, whatever it is, or if it's a third off, so I do stock up on that from supermarkets." Iqra*

*"It depends on offers and sales, to be honest. Because nowadays foods, I've realised, have gone up. So if something's on offer, I'll tend to buy two so I know it comes in handy for the following week, or store it, because they have a long expiry date" Sanaa*

*"With the meat and the chicken, I buy it in bulk because it works out much cheaper. Because at the supermarket-- when you buy a full sheep and it's £7, £8 a kg. When you buy it like a portion, I mean, £7, £8 a kg. But when you're buying a full sheep, they actually charge you £4.50 to £5, half of the price per weight. So I find it, because my family's big, so I buy every like five to six weeks, or seven weeks maybe, a full sheep. And then I make some mince from it and different of a portion of the meat, I like put it into bags and label it, this is for this, this is for this, and then with the chicken, the same. I buy it in bulk because it works out very, very cheaper for me and it like saves me from going to the shopping every time to buy small, small pieces and things." Maria*

Furthermore in order to save money, a small amount of families had started to cook foods they would have previously purchased ready made from the supermarket. In doing so, it is also likely that parents were providing their children with a healthier alternative.

*"We went, "Come on. We can have a go at this." And so we actually ended up making our own pizzas. Buying the cheeses and a couple of meats to throw on them and trying to sneak some veg on them. That didn't work. But yeah, and then having those, and you just thought, hold on. Yeah, I've just made some, but I don't know the cost differences. But it would have been quite big, I reckon. Yeah. For the three pizzas that we was making and the size of them, and what you would have bought. We would have probably saving about 15, 20 pound." Richard*

For children who were deemed to be fussy eaters, families discussed their use of coping strategies to help encourage their children to eat a greater variety of foods. One coping strategy was to hide foods that would have been rejected by the child into their meals.



*“If they wanted to try and get fruit and veggie inside the kids, it's rather than just saying, here's some broccoli. Eat it. Because if the kids decide they're not going to have it, you're never going to get that broccoli in that kid. But whereas if you hid it in something that they like, and you could disguise it, now there's a chance they're going to eat it. They're going to have it in there. Okay, they're still not going to take a lump of broccoli off your fork. Or at least you know for yourself you're getting some goodness in them. So if you can disguise this stuff and if people could work out to disguise stuff better, then absolutely brilliant.” Richard*

Richard went on to provide further examples of how food was hidden in his children's meals.

*“So he will have mashed potato, but there'll be things like butternut squash blended in it or even cauliflower. So a little bit cauliflower and potato mash done. And as long as we don't tell him, he just eats it.” Richard*

Other families took a different approach to handling fussy eaters and encouraged children to choose their own healthy foods when out shopping.

*“I used to - before COVID - take them with me to the shops and say, “Okay, what do you want to pick? What's your fruit of the week? Do you want to have this?” And they would pick it themselves” Farah*

For Farah, this encouraged her children to be more open and willing to try new foods.

*“What she'd normally do is she'd go for the brightest thing and then realise, “Actually, I don't like it,” kind of thing. But trying it is a big thing. So with my son, he'd be like, “Yep, I want bananas,” or, “I want pears.” And then he'd eat it because he knows he chose it and he's got to eat it. I think something that you're picking, I'm giving you responsibility for picking something that we can all eat” Farah*

Parents also discussed ways that families could be supported in the future to help reduce barriers to healthy eating. There was a consensus that further support should be given by food retailers, the government and their children's school. Aisha and Fatima thought that supermarkets should use their advertising space within their stores to promote healthier foods to encourage parents to feel supported to do so.

*“Because when I walk into Tesco's, I can't see them advertising healthy food or things like that. No. I can't see-- for a lot of the stuff in now, well, they've already got the Easter things up, and they're really like, “Easter this. Easter this,” posters, everything and rabbits and everything, but I haven't seen that with healthier foods. Do you know? Get encouraged with, “Oh, look, it's healthy foods.” I haven't seen that encouragement.” Aisha*

*“I know at our local Tesco, that first aisle you go down has got all the stuff that's on offer, and I-- if I think about the stuff that's normally in there, it's always biscuits and chocolates, those kind of things on promotion. And actually, that probably is the point*

*when people first go in and start grabbing, that you'd want some of the healthier stuff out there.” Fatima*

Other parents believed the government and food retailers should provide a financial incentive to shoppers to encourage them to purchase healthier foods. Food providers who already provide money off vouchers were viewed favourably amongst families.

*“Well, the government is encouraging us not to have X, Y, and Z because it's bad for you. But what happens is a lot of the bad stuff is cheaper. So why don't they make the good stuff cheaper so that people can-- then they'll have a choice.” Safiya*

*“You know Tesco vouchers, you get points and vouchers there. So whenever I get them, that kind of influences me to buy as well. You get Tesco vouchers and stuff like that. Because we're shopping more at Tesco's, so we do get voucher... So that kind of influences me to buy extra things like, in a healthy way as well.” Maria*

*“I know that as a business, they're not going to start giving out stuff like 20, 30 p. But it has to reflect the product that we're buying because like I said, there are certain things that they really overprice. If Aldi can do say broccoli for like 30p, other shops shouldn't be charging over a pound for it. It's not-- and again they're taking advantage of the convenience because if somebody is going to, say, Tesco where there is actually a Halal section there, and you can buy everything there, you're going to spend £40 there whereas you'll probably spend £15 in Aldi. And that's them taking advantage of the convenience.” Farah*

Some parents felt there was a responsibility from the government, their child's school and supermarkets to educate children and their families on the benefits of healthy eating as well as providing support to help them change their eating behaviours.

*“I think maybe more should be done in schools because when children are around their friends, it's different. They're like in a different comfort zone...It's a different comfort zone to home, but that's their little friends, and that's their little circle. And that's a different part of their life... they'll be more relaxed and more open to try new things. Maybe with food, it could be influenced in the schools and nurseries from a really young age. So encouraging schools and nurseries to try different things, and then prepare as well. When they kind of doing something, and they'll be like, "Oh, we've created this," and they're really pleased about it. And I know my son's-- where he will, if he's made something at home himself, and he's helped, he's really proud of what he's made. He'll eat it even though he knows there's something in there that he doesn't like, but there is still that he's holding back. That look on his face that I can recognise. And I know he's not comfortable. Maybe if he was eating more vegetables and fruit, I think from age of two or three in nurseries and schools, so where he tried it at home, and he didn't like it. But then he was with his friends in nursery, and they were all eating it.” Rania*

*“To make people aware of the fact that they need to change their lifestyle... I've seen a lot of-- even parents, that they are giving the kids a lot of sugary stuff, a lot of drinks and fizzy drinks which is not good for their age. At least let them explore the healthy food. Then when they will grow up, they can have that decision. You can't give a three years old child-- you can't give them fizzy drinks and a lot of sweets. Because if they see this at home, they will tend to grow with it. So I think the education is-- the parents needs to be educated as well. Because probably, as you said earlier, they don't know how to do it. So maybe if the shops or schools, they can provide family training to-- say trainings on how to cook, what to give to their children” Nadiya*

*“[The shops] should just have, "Okay--" even a quiz and-- they can have a small quiz. "Okay. How good do you think you're doing for your kid?" and, "Let's find out." And then you can just discuss and have one-to-one with the parents. I think this could be a good idea. Because the parents would say, "Oh, what do they know?" But when you see this every day, then in your mind, it would be like, "Okay. Let's try this on my kid. Am I doing the right thing? Let's find out." So I think the shops and the schools, they are the primary things that they can make a change” Nadiya*

Throughout the interviews parents were keen to share their problem solving ideas and the benefit these had on their food purchasing decisions. Families also had strong opinions on how outside sources such as supermarkets, could be of a further assistance in overcoming the barriers families faced to eat healthily.

### **3.2.2 Purchasing food to eat outside of the home**

#### **3.2.2.1 Reasons for eating outside the home**

Prior to deciding what foods to buy from a restaurant or takeaway, parents needed to decide if they wanted to eat outside of the home and where they wanted to buy food from. This decision was formulated due to parent's perceived inability to cook a home cooked meal, the convenience of purchasing foods and families preference as to where they would like to eat.

Even though families held the belief that home cooked meals were important, it was their perceived lack of opportunity to do so that often resulted in families purchasing food outside of the home. The main factor hindering parent's opportunity to cook for their family was a lack of time.

*“When I don't have time to cook. When I came late from work, I'd rather just order a takeaway or take the kids there than just spend two hours of cooking. It depends on the time as well. So the lack time is the primary thing that I'm doing this” Nadiya*

*“Sometimes, it's time as well I tend to say because everyone's so busy, going to work and back. Sometimes you don't get the time to actually go to buy the food, the*

*ingredients and all that. So you just rely on a quick takeaway or something quick just to keep everything going.” Hamza*

Farah suggested that healthy takeaway foods should be more readily available to purchase quickly in order to fit in to busy family lifestyles.

*“So if there's somewhere you can go, it was a drive-through, for example, great. I mean people who want to eat healthy, I mean a lot of us are very, very busy. And having a healthy meal would mean that you take a bit of time out to make this and this. If there was a drive-through healthy place, great.” Farah*

When Fatima felt their time was too constricted to cook, they purchased home cooked meals from a local member of the community. In doing so Fatima felt that she was still providing her family with healthy foods, rather than the unhealthy options from traditional takeaways

*“I knew that I didn't have the time to that full-on Asian meals, particularly. I wanted the kids to still have that taste for curry... And I knew I wasn't gonna have time 'cause I worked in a different town, so the commute in, collecting the kids, getting back inside, it would be late evening. Curries take a long time. So it's more to make sure that they were kind of-- you know, they were having home-cooked food that was curry, that was healthy, rather than having to order takeout or, or other options in. It started from then. It's carried on because it works from us-- from that convenience factor.” Fatima*

For some families, the choice to eat outside of the home was made rarely due to the cost of doing so.

*“Sometimes the kids would take me, or as a family we'd go down on occasion, or just like that, once in a blue moon. Because it's really expensive, so we didn't want to go and that. Whenever we used to go, we used to pay like £60, £70 for a small portion of food. So it's really expensive. So that's the only thing we used to do, otherwise we don't go too often” Iqra*

When it came to deciding which takeaway or restaurant to purchase a meal from, some families felt the choice was relatively simple as they had a preferred eating establishment.

*“There's the one restaurant that is the actual, they do a lot of good food. That's the only restaurant I used to go. I don't like the buffets that much because I've tried one or two buffets, but I didn't like it. But there's one restaurant that they do good food, so I used to always like” Maria*

*“We don't order from a lot of different places. When it comes to pizza, we have to like the base, and everyone has to kind of be happy with it and what the taste is like and whatnot. So there's maybe just two places where we would order pizza from. And so it's a taste and the value, so they'd be good value as well. And so there's one-- actually, there's probably just the one place now that we would order pizza from, but then it's*

*just pizza from there. We wouldn't order anything else because we like it. Everyone's happy with the taste and the options. And it's really good value as well” Rania*

*“We can just drive up to them, and because we know where we've eaten previously before, we know it's going to be clean” Zohan*

However, Aisha thought it was important to try new eating establishments when eating outside of the home.

*“I do let them try new things. I think that's important. Otherwise, how are you going to know if you like it or you don't like it?” Aisha*

The reviews left by strangers were also very important in parents' decision making when choosing which restaurant or takeaway to eat at, as this helped decipher the quality of the eating establishment.

*“And then reviews. If someone got poor reviews, like I said, less than four out of five, then we work hard for our money, and the last thing you want to do is go to a restaurant that hasn't got great reviews, you eat there, do not enjoy the experience, to come home frustrated. So you want to ideally go somewhere that always has decent reviews.” Naeem*

As most of the sample followed a Halal diet, the takeaway restaurants' ability to meet their dietary needs was essential when considering which eating establishment to choose. Families felt limited as to where they could eat, as they felt uneasy eating at establishments that served non-Halal foods as well as Halal options. However, despite these limitations, families still felt they had enough opportunity to eat outside of the home, as they knew which food establishments could meet their dietary needs.

*“With McDonald's, we're limited on choice, being, like, vegetarian, because it's not Halal” Fatima*

*“And then if we're going to an Asian kind of restaurant where we're going to be buying meats and stuff, then yeah, it's going to have to be a Halal restaurant then. That says only Halal. But I don't mind their serving drinks. That doesn't bother me. Sometimes bothers my partner, my husband, but it doesn't bother me if they're serving drinks in the same restaurant or whatnot. So that doesn't bother me. And yeah, yeah, so we will go to places like Pizza Hut, Pizza Express, and we'll choose vegetarian option. And then if we go to a different restaurant, yeah, just we're going to have some kind of meat or something there, then it has to be a Halal restaurant.” Rania*

*“The only thing would be if it had non-Halal meats also there. Because then you've always got that risk of contamination or anything. And I wouldn't take the risk. I wouldn't want to take the risk. That's the only thing that would put me off I guess” Samia*

Prior to choosing what food to purchase, parents have to consider lots of different factors when deciding where to eat. However, this did not restrict families from purchasing meals outside of the home.

### **3.2.2.2 Barriers and facilitators to purchasing foods to eat outside the home.**

When looking to eat outside of the home, families experienced a variety of barriers and facilitators to purchasing foods; these included the cost and quality of the food provided, whether the food establishment could meet their dietary requirements and their child's fussy eating.

When eating outside of the home, families wanted to purchase food that would be both satisfying and filling for their children. However, these foods were often high in fat and sugar and were not the traditional healthy foods that were provided within the home.

*"If I buy a burger, they eat the whole burger, I know that for some time they won't be hungry then because they ate the whole burger." Alaya*

*"If he was outside and then he would get hungry, I would buy him something...we used to buy from the Greggs the pasta mix, whatever age they were, whatever the specific they could eat, then we used to buy them a snack they were there, or otherwise from the Asian shop some crisps, or corn crisps, or stuff like that, we used to buy them if we were out and about and they used to get hungry and stuff like that" Maria*

All participants felt the cost of eating out was important when deciding what foods to purchase when eating outside of the home. The cost of foods was experienced as a barrier to buying healthier foods and parents were often confused as to why the healthier options cost more than the unhealthy options. If takeaways or restaurants did offer healthy foods at a cheaper price, parents felt they were more likely to consider purchasing it.

*"If it's overpriced, then I'm not really going to pay for healthy food that is too overpriced. I'd rather just not-- again, we'll just cook it at home then" Naeem*

*"Sometimes the price. I'm not going to lie to you, yeah, I think the price comes in quite a lot. Because it's like, "Well, then, why is that so expensive?" Or like say if you want to go for a grilled salad or grilled chicken salad, sometimes it's like, "Why are you charging so much money?" when it's only a few strips of chicken and a bowl of salad that you probably could make it yourself at home, do you know what I mean? Yeah. So that's what it is, yeah. Sometimes I feel like a lot of the times the grilled food is quite expensive, actually. And that's why sometimes people go for the cheaper option of just having fast food" Zohan*



*“So I think for healthier foods to be priced, you know, around the same benchmark as unhealthier food, is, is a massive factor, um, that would encourage people to make better choices” Fatima*

When deciding what food to purchase, families took the quality of the food into consideration. For some families they evaluated the food’s quality in relation to its taste. However most felt for food to be of a high quality it needed to be prepared by a trained chef and cooked in a healthy manner.

*“The main factor would be the taste, so it'd have to taste brilliant. And, again, I think the customer service would be a factor there as well.” Rania*

*“I think it depends on who's cooking it as well. You can't have anyone and everyone cooking. It has to be an experienced chef. You have to take that into consideration as well.” Alaya*

*“The takeaway food are really greasy these days and they've not been cooked in a proper oil, like they can reuse, reuse the oil” Maria*

When it came to eating healthy Halal foods, some families felt they were limited to do so. This often left parents feeling disappointed to be limited in such a way.

*“Because there's certain places that we go that they don't really have even the Halal option that we eat. So then it was like Greggs they would just pop in to there and get stuff from there. So I think that is less convenient as well because there's not enough shops providing that.” Alaya*

*“If you're having a healthy meal as well, again, the larger companies wouldn't have something was something Halal. They need to have more healthy grab and go Halal options as well. I know that at Tesco they've started doing the wraps and the sandwiches, and they sell out quite well because of the location that it is. So, obviously, there's a market there but it would just depend which area you're doing it in” Farah*

When eating at a restaurant, takeaway or café parents felt it was important that their children enjoyed the food they were eating. Parents of children referred to as fussy eaters described experiences where they felt their child’s food preferences had resulted in a negative experience.

*“So we think we wouldn't take them back there again because it's not worth it. We enjoyed it, but they don't. So as a family, it's not worth for us going out there. An example would be a Smokehouse that's not far from here. We went. Tried everything and thought this is good. We could bring the kids because there's a variety of things that they might like and might try. And no. I think they had a few fries and some popcorn. That was about it. So it was decided that's not really a good day out for us” Richard*

Other parents continued to explain the challenges of eating outside the home with a fussy eater. Alaya described how their child's fussy eating limited their opportunity to eat outside of the home as they would avoid trying new foods with their children.

*"I have to take into consideration the kids' taste. Like you get the Subways quite a lot of sandwiches and they are healthy but they haven't had the Subways from the start. I don't think if I take them into Subways, and even if they make the foot-long or whatnot, they won't have it because it's not something they've had before. So something new for them." Alaya*

To ensure meals out with fussy eaters went smoothly, parents often allowed their children to choose what they would like to eat. Some parents of fussy eaters felt they were more likely to "be wasting my money" (Naeem) when they ate outside the home with their child, unless they went to places that they knew their child liked the food.

*"Because I'm thinking, if I'm going to pay a lot of money and they would not like it, it's a big-- there is no point in paying like £50 and they will not like the food. So I'm a bit afraid to do that. So I'd rather just go somewhere that I know that they love the food and just provide them with that kind of food." Naydia*

In contrast, families of non-fussy eaters felt they were able to eat healthily outside of the home.

*"They doesn't complain, so I think they're content with what I buy and what they eat. I wouldn't say my kids are fussy. They'll try everything and if they like it, they'll say, "Yes, mum, we'll have this again." Sanaa*

*"Then because we're a family, we all sort of stick together because if one eats healthy, so say my wife eats it, then I'll tend to get something because if me and her are getting something, we'll tend to get the kids something; a healthy option as well if we're getting healthy. The main influence comes from the family." Hamza*

There was a variety of barriers and facilitators outlined by parents when asked how they decided what food to purchase at a restaurant or takeaway. The biggest reported barrier was a child's food preferences and the cost of the meal. Another significant barrier was the lack of healthy Halal options available in the local area, which left parents feeling frustrated.

### **3.2.2.3 It's not possible to eat healthily outside the home**

Within this theme parents discussed their limited opportunity to eat healthily when eating outside of the home and their desire to be able to do so.

Most parents felt unable to provide their family with healthy foods when they were purchasing foods from a take-away or restaurant. A selection of parents had not even considered if it would



be possible to purchase healthy foods from a take-away as they only perceived takeaways as providers of greasy, processed foods.

*"I don't think there's an option for healthy food when it comes to takeaway. I think if you look at it, takeaway is mainly grilled or fried, it's either burgers, paninis, chips"*  
Sanaa

*"I don't know if a takeaway does do healthy food...but what I try to buy or what I encourage them to buy is things that are, again, grilled maybe, like a grilled chicken burger. Well, I look at the commenting on them, so I know if it's been grilled or I know if it's been deep fried, or the description of it.."* Aisha

*"So to me, it just doesn't seem-- I mean, I know that the kebabs we have, they grill. The long ones that we used to have, the seekh kebabs, they grill anyway. But I'm assuming what they put in the kebabs is not very healthy.... The stories that I've heard is that they're always saying, especially the doner one, the doner kebabs, they say that's not very healthy."* Samia

Richard also believed that takeaways and restaurants did not solely provide healthy foods, especially when thinking of the food establishments around his home. However, Richard did acknowledge that these food providers may have a healthy option on the menu, but that it would require a customer to search through the menu to find the healthier items.

*"I would say as a rule, no. But I guess within some of these restaurants, there may be healthier options you can have. Generally, if I've walked up the road from us, we've got about three or four places selling chicken. Pizza place. Two or three pizza places. A cheesecake shop, and just a general restaurant selling burgers and things like that, so it's yeah, there's nothing there that you'd walk past and go, "Oh, hold on a minute. That's a healthy variation of a restaurant, this." I think you'd have to look inside and carefully pick through the menu as to what could be healthy for you."* Richard

Despite the limited opportunity, a handful of families tried to look for healthy options when eating outside the home with some success.

*"He'll go and he'll get-- there's a place local that we'll go. He'll have his grilled fish with his veg and his beans and whatever, and the kids will get a jacket potato from there with beans and a wrap. That sort of thing."* Farah

*"If we're out on a walk, I would try and find a café where they could at least have a sandwich or something a bit more healthier than a full of fat Greggs sausage rolls regardless of how nice they are. I would rather do that, but obviously, sometimes, you're just not in the right place at the right time."* Emily

*"We would never go to a takeout, but if it was a takeaway, we'd go to like a grill place, somewhere they did grilled food 100%."* Zohan

When thinking about the possibility of a healthy takeaway opening near their home most families welcomed the idea, as this would provide them with the opportunity to purchase healthier foods for their family.

*“If there was something that was local-- there needs to be more of those kind of shops really because a lot of them sell the same stuff; burgers and chips and the bad stuff. But we don't really have a lot that sell healthy food. So like your grilled chicken or your steamed fish or your jacket potatoes, your paninis. There's not a lot of them” Farah*

Whilst some families were able to look through food establishments menus to find healthier food choices, there was a general belief that healthy foods could not be purchased from a takeaway or restaurant. The perception of takeaway foods being highly calorific added to families’ beliefs that they could not purchase healthy foods from takeaways. However, families were positive about the possibility of a healthy food establishment opening near their home.

### **3.2.2.4 Eating outside of the home is a treat**

When discussing families’ habits of purchasing foods from a takeaway, restaurant or café, the majority of families viewed this as a treat and therefore allowed their children to eat whatever they wanted, regardless of the health benefits and even to some extent the cost. This often meant families ate unhealthy or “*naughty takeout*” (Naeem) foods or meals at a restaurant.

Despite families beliefs about the importance of eating healthy home cooked meals; this did not seem to be emulated when eating outside of the home; as families reported they specifically ate foods they would not normally eat within their own home.

*“We just order what we like, like we usually don't get at home. So we don't have any limitation on that, so we just kind of grab everything that we like. It doesn't matter if it's healthy or not healthy because it's our day where we can relax. So I'm not thinking of anything. Just to have anything that we want... Nope. Nope. No. If they want to have chips, they can have chips. They can have fried food. It doesn't matter... So we don't look if it's healthy or not. We just look if we like it, and that's it. If we like it, if the kids love it, that's fine.” Naydia*

*“With me, it doesn't make a difference because-- if it's healthy or not because that's an indulgence anyway, ordering from a takeaway. So it wouldn't matter if it was healthy or not. We'd just order what we want, do you get me?” Samia*

*“It's normally me who takes the kids out for a meal and that kind of thing. We get the foods that the children enjoy eating, which is quite similar to what I like, like, a nice curry or a steak, something like that. And they normally do have a dessert because they just think the whole point of going out is to be bad, so you might as well go for the whole hog.” Fatima*

*“Okay. I do have a rule. Even though I don't like too much meat in my house, if I'm going to a restaurant, I'm not having vegetables. Yeah. So that firstly is genuinely impact my decision, that all right, fine, I'm going to purchase meat or chicken. But generally, I don't have much of a vegetable dish” Naeem*

Naeem continued to discuss how viewing restaurant meals as a treat impacted his choice to purchase healthy foods, in periods when he is trying to be health conscious.

*“If I'm in my eating healthy phase, then I'll still order your unhealthy food like your curries or whatever it is, but for example, I won't order extra cheese, instead, I'll order normal chapati to eat with it.” Naeem*

Furthermore, families viewed an unhealthy meal at a restaurant or takeaway was a reward or treat for their healthy eating at home, which ultimately allowed parents to feel that eating unhealthily was acceptable.

*“So I suppose because of what I feed them at home, they know that having takeaway means you can have whatever you want, I suppose, so they do try to sort of-- and then, like I say, especially with lockdown and the restrictions on them, I don't want to constantly restrict them from things. So although I do try to create what they would like from a takeaway at home, they sometimes still see Sunday to be their takeaway day” Aisha*

Parental attitudes towards eating outside of the home seemed to be centred around wanting to have a positive experience of eating outside of the home.

*“If I'm in the restaurant, I want to sit down, and I really want to enjoy what I'm eating. And I don't want to think about the price. And I don't want to think about the health food factor. I just want to think about-- I just want to enjoy my food. And so I won't think about-- no, not in a restaurant” Rania*

*“If I'm going to a restaurant, I want to go have a good time. I'm not going to be too concerned about what I'm buying in a restaurant, to be honest. You just want to go-- once you're there, I don't wanna overthink it” Naeem*

As part of this positive experience children were allowed to choose their own meals from the menu, regardless of the foods health and nutritional value.

*“To tell you the truth, we don't really think about anything because it's their treat. The menu is in front of them, so we ask them, "What would you like?" And they take it from there. So it's up to them, whatever they'd like to order” Iqra*

*“So if the children want ice cream and two meals, that's fine. We will provide this for them. Because we provide a new experience for them, so it's fine. We don't look at the cost when it comes to going to the restaurant.” Naydia*

Some families felt that treating their children or themselves to whatever they wanted when eating at a restaurant or takeaway was acceptable because they did not do this frequently. However, frequency was not the only factor, as this perception of a treat was also applied to the weekly takeaway

*“I think, for me, because we have a takeaway as a treat, and it's not an everyday or-- it's not even every week occurrence, then for me, there's no point in having a healthy option really” Emily*

*“On the weekends, we usually go for a takeout. So usually, Saturday, Sunday, we do like a treat thing. So we'll have a burger or pizza or something like that.” Hamza*

In contrast to the experiences outlined above, a small minority of participants still restricted the foods their children ate when outside of the home, to be in line with their views on healthy eating.

*“I think if knew that we'd had a particularly bad week or a bad couple of days of eating unhealthily, I would then go, “No, we're not having that. We're going to go there. It will take us an extra 10 minutes, and we can have a proper sandwich and a proper--” so it'd be kind of our circumstances in that kind of week or weekend or whatever we've been doing.” Emily*

*“They had a few takeaway pieces on Saturday, some samosas, so then, that was it for the week. So I said, “No, you're not having any takeaway on Sunday,” which is their usual takeaway day.” Aisha*

Aisha continued to explain that if her children did have a takeaway they were not allow a dessert, as the children has already eaten enough unhealthy foods.

*“I don't let them have an ice cream afterwards. They don't ask for it, and I don't say to them, “You can't have one,” as well, just because they already have enough sugar, in my opinion, daily that they don't need any extra.” Aisha*

When families ate outside of the home, little thought was paid to the nutritional or health benefits of the foods consumed. Instead families felt eating outside of the home was a special occasion or treat; perceiving eating outside of the home in this manner encouraged children and parents to indulge in highly calorific foods.

### **3.2.2.5 I want what they are eating**

Food choices made by other people when outside of the household, had a significant influence on the family's food purchases; this included children wanting to eat what other children were eating as well as how food choices were influenced by the social setting.

In social settings, such as children's play areas, parents often reported their children wanted to purchase unhealthy food items if they had seen them being consumed by other children.

*"When I have the kids with me, they won't go for the healthy options. They'll see the burgers chips and whatnot, so. So the other people eating there as well. There is quite a lot of people so they focus on what they're having as well" Alaya*

Non-household family members or friends also influenced families' desires for foods and takeaway food purchases. By discussing takeaway foods with other family members, children wanted to eat the same food as their relatives.

*"If my daughter, she messages her cousin, she'll tell her that it's takeaway day and she's having such-and-such for tea tonight. Then, she will definitely be like, "Well, she's having this and this, so I want this and this." Aisha*

The advertising used by a food retailer also impacted parents' food purchases as the desirable images increased parents and children's desire for the foods.

*"You might see an advert or something and they'll go, "Well, let's try this. See if it's great." Hamza*

Parents also discussed how they were more likely to purchase snacks when out of the house with their family, due to this being ingrained in the experience of spending family time together.

*"You enjoy snacks more as well when you're with somebody and you talk, and walk, and eat. That's better as well. If I was on my own, I'd never get anything. But when I'm with somebody, my friends or my girls or my family, then we normally do" Samia*

The social element of eating foods, highly impacted families food purchases, in particular children were influenced by the foods ate by others. The social element of being outside of the home as a family also encouraged families to purchase snacks, as it was perceived as part of the experience.

## 4. Discussion

The current research found that parents in the Hodge Hill area of Birmingham felt confident that they knew how to eat healthily, however many families experienced barriers to doing so. When it came to eating outside of the home, families reported a lack of motivation to eat healthily, as the experience was viewed as a treat.

Parents displayed their capability to understand what foods needed to be purchased in order to eat healthily, as well as how to cook nutritious meals. Most parents thought healthy eating included eating a variety of foods and was inclusive of all food groups. When discussing healthy foods, some families were able to identify the nutritional benefits of foods, and were

conscious of avoiding high sugar diets. During the preparation of the family meals, most parents enjoyed cooking meals for their family and often looked for new recipes to try.

Throughout the interviews parents expressed their desire for their children to eat healthily. This aspiration was stronger in parents who had grown up eating healthy home cooked meals, as they could not imagine living any other way. This desire was also experienced in families who had grown up with a self-reported unhealthy diet, as they were conscious of giving their children a better diet than they had experienced.

Regardless of their childhood experiences, all parents wanted their children to eat a healthy diet in order to preserve their children's health. For a minority of families, their choices in their children's earlier years had left their children in poor health, including obesity and poor dental health; parents were therefore motivated to change their behaviour to ensure they limited the impact of their previous decisions. However, parents were also highly worried about their healthy children developing diet related health complications in the future. This concern was a very strong motivational factor for parents, with those who displayed a greater knowledge of the potential health complications displaying a higher motivation.

Despite the capability and motivation observed in parents to eat healthily, parents felt there were significant barriers stopping them from purchasing the foods they wanted for their family. The main barrier was the cost of foods, with healthier foods being experienced as more expensive; this was particularly discussed by families who wanted to purchase organic foods. Families did try to overcome barriers relating to the products cost and quality, with a number of strategies, including growing their own fruit and vegetables, buying products when they were on special offer, shopping at multiple stores to ensure they were buying food at an appropriate price, as well as bulk buying certain products. However, despite aiming to reduce these limitations, families still felt unable to purchase foods as they desired.

Despite the majority of the sample following a Halal diet, there were few reported barriers to purchasing Halal food inside or outside the home. However on a deeper reflection, parents felt unable to purchase Halal foods at their supermarket of choice, and had to purchase their meat from a Halal butchers. Purchasing food in this way was deemed to not be too much of a burden for families; rather it was a necessity. However some parents questioned their opportunity to purchase foods in this manner as they age. When eating outside of the home, again families reported they were only slightly restricted when purchasing foods that met their dietary requirements; however the majority of participants, only ate at food establishments who solely sold Halal meals.

Most families reported one or more of their children were a fussy eater. The presence of a fussy eater within a family had a large influence on the foods their family bought both to eat inside and outside of the home. When it came to the purchasing foods to eat within the home, parents often avoided purchasing foods their child had refused to eat in the past, as well as avoiding foods their child had not yet experienced, as they believed this would result in the child not eating their meal. Some parents tried to develop strategies to overcome the issue of their child's



fussy eating, including encouraging children to choose which healthy foods (such as fruit and vegetables) they would like to purchase, growing their own fruit and vegetables to increase their child's motivation to eat healthy foods and hiding vegetables within their children's meals. When eating outside of the home, the child's fussy eating placed large barriers on which food establishment family could purchase a meal from. To accommodate a fussy child's food preferences, families were likely to allow their children to choose where they wanted to eat as well as what food they wanted to eat off the establishments menu. Parents also avoided trying new restaurants and takeaways, as this could lead to an unpleasant experience and a perceived waste of money.

However, despite their cooking abilities and desire to eat healthily within the home, families attitudes towards choosing food off a restaurant or takeaway menu were vastly different. Families viewed the experience of eating at such food establishments as a treat or a special occasion; this perception allowed parents to give their children permission to eat whatever they wanted, and were more concerned with everyone having an enjoyable experience than the cost of the meal or the worries for their child's health. Sometimes this treat was perceived to have been earned; due to the families' typically healthy eating at home. Alternatively eating at a restaurant was perceived as a treat due to it being an infrequent occasion. Regardless of the parent's reasonings for this behaviour, their actions of purchasing whatever the child and family wanted when eating outside of the home, could impact on child obesity, especially for the families who were eating weekly "naughty" takeaways.

Families were heavily influenced by the opinions and experiences of other people when deciding what food to purchase. When outside of the home, the reviews left by others allowed families to make a judgement on a food establishment's quality, and whether they wished to purchase food from there or not. Equally when out at a play centre or a playground, children often requested to eat the same sugar filled, processed foods that they had seen other children eat. When thinking about what to cook at home, parents often shared recipes or cooking tips with each other, these conversations were often inspiring for parents and directly impacted their food purchases.

Most families felt it was important for other parents to be educated on the benefits of healthy eating, and receive encouragement to provide their children with healthy meals. Commonly reported sources for this additional support were from the government, the child's schools and supermarkets. There was a perceived need for families to be educated on the health benefits of foods and the importance of healthy eating, to allow parents to make an informed choice when purchasing foods for their children. Equally, some felt it was the responsibility of schools to help encourage children to try healthy foods, as children would benefit from seeing their peers eating such foods. It was also suggested that financial encouragement could be offered to help support low income families to purchase healthier foods. The need for the additional support may assist in reducing the barriers identified by parents, such as cost and family food preferences, and therefore it is crucial to be considered when formulating ways to support families in both the Hodge Hill and wider Birmingham area.

#### **4.1. Future research opportunities**

As with all research this study had some limitations. Firstly, there was a clear capability and motivation to eat healthily within the sample. Families often aimed to overcome barriers to healthy eating that they had identified within their daily life. It is possible that the nature of this research is more likely to appeal to families who already practice and value healthy eating, rather than those who do not, due to a fear of being judged. It is also possible that the fear of being judged further impacted participants' interview answers and parents may have been more inclined to provide answers that they believed the interviewer wanted to hear. The researchers tried to overcome this by making it clear that participants would not be judged or criticised for their family food purchases.

The majority of the sample followed a Halal diet; these families were able to provide a detailed insight into the complexity of food purchasing decisions based on their dietary requirements. Whilst the interviews sample was representative of the area of Hodge Hill, further research may wish to look to include a wider range of dietary requirements, to explore how this impacted families' food purchases.

All interviews occurred during the COVID-19 pandemic. While families were asked to think about their food choices prior to the national lockdowns and restrictions, this was challenging for some families. It might be beneficial for future research to explore families' food purchasing decisions now the national restrictions are coming to an end. Equally, the research was conducted during term time, when most children were able to attend lessons at school, it would be interesting for future research to be conducted concerning school holidays, to explore if parents report any differences in the food they purchase for their children.

Some families provided contradictory answers when exploring their capability and motivation to eat healthily, for example parents were able to describe healthy eating and why it was important, but still gave their children high sugar snacks as these were perceived as healthy. However, the most obvious contradiction was the commonly reported belief that home cooked meals should be healthy, but little concern was given to the health benefits of meals from a takeaway or restaurant. These contradictions provide an insight into the need for future research to understand this phenomenon and its implications for interventions or initiative to support healthy eating within families, particularly when eating outside of the home.

### **5. Future Recommendations and Implications for promotion of a healthy food economy in East Birmingham.**

In summary, this study demonstrated that broadly, families in Hodge Hill had a good standard of knowledge and skills with regard to healthy eating and cooking. Thus, parental 'capability' is not likely to be a key intervention target to improve healthy food purchasing in this group. As expected from prior research, there were a number of 'opportunity' barriers to healthy food purchasing in terms of cost, lack of time for cooking, locations of stores, markets, cafes and restaurants, access to transport and other common barriers. Healthy food was not always perceived to be good value for money when eating outside of the home. However, social opportunities of family meals were recognised and offered opportunity for social bonding and



modelling of healthy eating. There is a clear need for future interventions to be developed to assist families in reducing the perceived barriers to healthy food purchasing. As suggested by the families involved with this research, educational and financial support should be offered to families to promote healthy eating, but the primary focus in terms of planning a *healthy food economy* should be on motivational aspects of food purchasing. Enjoyment was key to determining whether and what parents would purchase for consumption of food outside the home. In particular, the concept of ‘healthy’ takeaway food was not common, and this kind of food was positively framed as an indulgence and a treat, with the liking and enjoyment of it more important than health or price. In this context, businesses and the services that support them, who are aiming to encourage parents’ purchasing behaviour of their healthy food will need to consider how to emphasise enjoyment, palatability, and value for money. Thus emphasis on enjoyment, indulgence, and social bonding, whilst consuming healthier foods that offer good value for money, may be key to increasing parental motivation to purchase healthy foods in their locality and thus create sustainable business models.

## 6. References

- Appelhans, B. M., French, S. A., Tangney, C. C., Powell, L. M., & Wang, Y. (2017). To what extent do food purchases reflect shoppers’ diet quality and nutrient intake? *International Journal of Behavioral Nutrition and Physical Activity*, 14(1).
- Gale, N.K., Heath, G., Cameron, E. et al. (2013). Using the framework method for the analysis of qualitative data in multi-disciplinary health research. *BMC Med Res Methodol* 13, 117. Doi:10.1186/1471-2288-13-117
- Griffiths, C., Frearson, A., Taylor, A., Radley, D., & Cooke, C. (2014). A cross sectional study investigating the association between exposure to food outlets and childhood obesity in Leeds, UK. *International Journal of Behavioral Nutrition and Physical Activity*, 11(1).
- Hartman, T. J., Haardörfer, R., Whitaker, L. L., Addison, A., Zlotorzynska, M., Gazmararian, J. A., & Kegler, M. C. (2015). Dietary and Behavioral Factors Associated with Diet Quality among Low-income Overweight and Obese African American Women. *Journal of the American College of Nutrition*, 34(5), 416–424.
- Michie, S., van Stralen, M. M., & West, R. (2011). The behaviour change wheel: A new method for characterising and designing behaviour change interventions. *Implement Science*, 6, 42. doi:10.1186/1748-5908-6-42
- NHS Digital. (2020). National Child Measurement Programme, England 2019/20 School Year. <https://digital.nhs.uk/data-and-information/publications/statistical/national-child-measurement-programme/2019-20-school-year>

## Appendix A: Interview Schedule

### Aston BCC PH East Birmingham Family Food purchasing project

#### Interview schedule

#### **Interview Schedule Key**

##### 1. Key question

- Possible follow up question
  - Possible prompt

##### 1. Can you tell me about what your family like to eat?

- What don't they like to eat?

##### 2. How would you describe healthy eating?

- What types of food do you think of when you think of healthy eating?
- What types of food do you think of when you think of unhealthy eating?

‘We are really interested in how families and parents make decisions about what food to buy. We are interested about food choices you make for your family in shops and markets, but also when and if, you choose to buy food for your children to eat outside of home, e.g. in cafes, or from takeaways etc’.

##### 1. Can you tell me who makes most of the decisions in your family about what to buy in a shop, market or supermarket?

- Why does this person make the decisions?

##### 2. Thinking about the food you buy to eat for your children at home, what do you think about when deciding what foods to buy in a shop or market?

- What things make you **more likely** to buy healthy food from a shop or market for your children to eat at home?
- What things make you **less likely** to buy healthy food from a shop or market for your children to eat at home?
  - How does the cost of food impact your decisions?
  - How does the health benefit of foods impact your decisions?
  - How does the convenience of foods impact your decision?
  - How does your knowledge/skills in food preparation/cooking impact your decision?

- How does your family's preference for foods (e.g. children/parents/extended family) impact your decision?
- Are there any religious or cultural significance that impact your decisions?

### 3. Where else do you buy food that your children eat?

(if to eat at home, repeat q above, if not to eat at home, i.e. eat out or as a snack outside home, ask below).

#### 3.1. Still thinking about the food that you buy to eat with/for your children outside of home, what do you think about when buying food outside home?

- What makes you **more likely** to buy healthy food outside of your home?
- What makes you **less likely** to buy healthy food outside of your home?
  - How does the cost of food impact your decisions?
  - How does the health benefit of foods impact your decisions?
  - How does the convenience of foods impact your decision?
  - How does your knowledge/skills in food preparation/cooking impact your decision?
  - How does your family's preference for foods (e.g. children/parents/extended family) impact your decision?
  - Are there any religious or cultural significance that impact your decisions?

#### 4. If there was a shop, café, restaurant, takeaway or market selling healthy food near your home, what would make you **more likely** to buy healthy food from there?

- What would make you **less likely** to buy healthy food from there?
  - How does the cost of food impact your decisions?
  - How does the health benefit of foods impact your decisions?
  - How does the convenience of foods impact your decision?
  - How does your knowledge/skills in food preparation/cooking impact your decision?
  - How does your family's preference for foods (e.g. children/parents/extended family) impact your decision?
  - Are there any religious or cultural significance that impact your decisions?

#### 5. What **stops you** from buying more healthy food, or makes it harder to buy healthy food for your children and family?

- How do you think you could overcome this barrier?

- Do you feel you have the opportunity to buy healthy foods?
  - How does the cost of foods limit you from buying healthy foods?
  - Do you feel it is convenient to buy healthy foods?
  - How does your knowledge/skills in food preparation/cooking limit you from buying healthy foods?
  - How does your family's preference for foods (e.g. children/parents/extended family) limit you from buying healthy foods?
  - Are there any religious or cultural significance that limit you from buying healthy foods?

6. What **currently helps** you to buy healthy food for your children and family?

- How does this help you?
- What motivates you to buy healthy food for your children and family?
  - How does the cost of food help you?
  - How does the health benefit of foods help you?
  - How does the convenience of foods help you?
  - How does your knowledge/skills in food preparation/cooking help you?
  - How does your family's preference for foods (e.g. children/parents/extended family) help you?
  - Are there any religious or cultural significance that help you?

7. What **would help you in the future** to buy healthy food for your children and family?

- Why would this be helpful?
- Has anything helped you in the past?
  - How would the cost of food help you?
  - How would the health benefits of foods help you?
  - How would the convenience of foods help you?
  - Would developing your food preparation/cooking skills help you?
  - How would changes to your family's preference for foods (e.g. children/parents/extended family) help you?
  - How could this help be offered to you?

8. Is there anything else you would like to add?