Culinary Literacy and Experiential Nutrition Education: A Pilot Program
Michelle La Londe, MA; Emily Monfiletto RD, LD; Sherri Sprang, MSN, RN, NE-B; Lynn Shaffer, PhD

Introduction: Cardiac rehabilitation (CR) nutrition education is didactic in nature. Didactic methods may not transfer knowledge to all adult learners or build sufficient skills to enable the translation of information into proactive practices.

Purpose: To assess the culinary literacy of our CR patients and explore the effect of adding an experiential element to CR nutrition curriculum.

Significance: The American Heart Association developed the “Life’s Simple 7” which targets 7 key heart factors/behaviors that can increase the risk of heart disease and stroke. Of the seven, five are affected by diet. Nutrition education has yet to evolve, despite strong evidence that the incidence of heart disease can be influenced by lifestyle changes.

Design and Methods: The ‘Healthy Bites’ program was implemented in July 2015. It consists of serving healthy recipe samples with recipe cards every other week during CR nutrition education classes. Patients were asked to complete a 2-item questionnaire rating the taste of the sample and the likelihood of making the recipe at home. To assess culinary literacy, a questionnaire was administered to patients attending nutrition education classes.

Results: From July 2015 through February 2016, 560 heart healthy samples of 15 different recipes were served to CR patients. Patients rated the samples 3.9 out of 5 stars for taste. An average of 83.7% of patients liked the recipes, however, 36.1% responded that they would not make it at home despite liking the recipe. An average of 18.4% of patients were neutral or disliked the samples. Culinary literacy assessments were performed on 4 separate occasions collecting data on 78 unique patients. 15.4% of patients report using convenience foods ≥ 5 days per week. 72.5% of patients cited lack of time as the biggest barrier to cooking. 64.1% report a high level of confidence when preparing foods from basic ingredients. 47% report cooking from basic ingredients ≥ 5 days per week. 72.5% of patients cited lack of time as the biggest barrier to cooking. The majority of patients (80.8%) report being willing to try new foods, but only 58.8% report a high level of confidence with food preparation using new foods/recipes.

Conclusions: The ‘Healthy Bites’ program was a successful first step into experiential nutritional education. The culinary literacy assessment provided good information for planning our next steps in experiential nutrition education.

Implications: Future efforts in experiential nutrition education must include hands-on opportunities stressing quick and easy food preparation techniques. In addition, further refinement of assessment tools is needed to ensure accurate assessment of our patient’s needs and program outcomes.

The Healthy Bites Program

Healthy Bites Staff Education: At the beginning of each month, CR Staff sampled the healthy bites recipes to be served that month prior to the Healthy Bites Tastings for cardiac rehab participants.

Participant Engagement: Cardiac rehab patients had the opportunity to participate in Healthy Bites tastings during nutrition education classes on the 2nd and 4th Thursday of each month.

Recipe Selection: Recipes have been selected to correspond with holidays or seasons where possible in order to take advantage of seasonal activities and/or locally available, fresh produce.

Program Assessment Tools

Culinary Literacy Questions:

- How many days per week do you or someone in your household prepare and cook a main meal from basic ingredients?
- How many days per week do your meals mostly consist of convenience foods or ready-made meals?
- What is the main reason that more of your foods are NOT prepared from basic ingredients?
- How confident do you feel about being able to cook from basic ingredients?
- Most of the time, how likely are you to try new foods when given the opportunity?
- How confident do you feel about preparing and cooking new foods and recipes?
- In the past month, how many new fruits and/or vegetables have you tried?
- Which statement best reflects your goal for fruit and vegetable consumption in the next 6 months?

Program Outcomes

Healthy Bites: Recipe Ratings

Eating Styles: Number of Days Per Week using Convenience Foods v.s. Foods from Basic Ingredients

Responses to Key Culinary Literacy Questions

- The ‘Healthy Bites’ program was a successful first step into experiential nutritional education.
- The culinary literacy assessment provided good information for planning our next steps in experiential nutrition education.
- Future efforts in experiential nutrition education must include hands-on opportunities stressing quick and easy food preparation techniques.
- In addition, further refinement of assessment tools is needed to ensure accurate assessment of our patient’s needs and program outcomes.