

Exploring the Lives of Vulnerable Young People in Relation to Their Food Choices and Practices

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Received: April 27, 2017

Accepted: May 22, 2017

Online Published: June 14, 2017

doi:10.5430/wje.v7n3p50

URL: <https://doi.org/10.5430/wje.v7n3p50>

Abstract

The interdisciplinary *Foodways and Futures* project (2013-2016) is based on a pilot study which found no improvement in the nutritional state of formerly homeless young people (16-25), now in supported accommodation at a charitable youth organization. Because a healthy food intake during adolescence is important, and because young people with socioeconomic lower backgrounds face difficulties in maintaining a healthy diet (Beasley et al., 2005), I investigated how the young people themselves experience their relationship to food. In this paper I explore links between the lived experience before and during their stay with the organization of this vulnerable group, and their food choices and practices. The study illustrates the ways in which those choices and practices may appear nutritionally undesirable, but are nevertheless linked to the young people's search for ontological security and social connectedness, in their new living environment. In this, I draw on and extend Schlossberg's (1981) transition theory in order to better understand the rationales underlying an individual's subjective food choices.

Keywords: *young people; food poverty; food choices; socioeconomic environment; identity; health inequalities; nutrition; youth organization; public health messages*

1. Introduction

During adolescence, nutrient needs are higher than during any other time in a person's life cycle (WHO, 2012; Webb, 2002): Up to 50% of the adult body weight is gained during that time, more than 20% of the adult height and 50% of the adult skeletal mass (WHO, 2014); and malnutrition during adolescence can have negative long term health effects (WHO, 2014; Jenkins and Horner, 2005). It is also a life stage of changes in body shape, cognitive processes, and personal autonomy (Stevenson et al, 2007; Jenkins and Horner, 2005), and where young people's food choices are intertwined within a complex process of reflexive identity development. It is known that many young people, especially from socioeconomically deprived backgrounds, have fluctuating eating patterns, including high intakes of fast foods and other foods high in fat and sugar, as well as low intakes of fruits, vegetables, and calcium rich foods, or they diet unhealthily (Story, Neumark-Sztainer and French, 2001; Jenkins and Horner, 2005; Davison et al., 2015; Shepherd et al., 2005; Larson et al., 2008; Steveson et al., 2007; Kennedy Elder, 2004; Share and Stewart-Knox, 2011; Beasley et al., 2005).

Data on food practices and challenges at the household level are not collected in the UK (Douglas et al, 2015a), but the struggles of low income households to feed themselves are being reported (Dowler and Lambie-Mumford, 2015; Goode, 2012; Douglas et al, 2015b). Food strategies aimed at reducing costs when on a low budget include cutting back on gas and electricity, buying the cheapest foods, skipping meals, and resourcefulness (Dowler and Lambie-Mumford, 2015; Goode, 2012). Food choice has long been recognised as involving psychological, social, cultural, economic, and biological forces (Bisogni et al, 2002), but in public debate, 'the poor' may often be blamed as being responsible for unhealthy food intake (Limb, 2014; Lloyd et al, 2010; Purdam, Garratt and Esmail, 2015; Bottrell, 2009; Thompson et al, 2013; Goode, 2012). Friel et al (2015:84), in their review of the evidence of actions which are aimed at addressing the social determinants of inequities in healthy eating, find that the majority of such evidence focused on individual level factors as well as population averages. This type of evidence may help to

achieve short term successes, but yet miss the problem's core: 'the underlying unequal distribution of factors that support the opportunity to eat a healthy diet'.

Foodways and Futures (2013-2016) is a qualitative action research project shaped by the fields of sociology, education, nutrition and public health. The project is based in a community setting, in cooperation with a charitable youth organization. This organization provides supported accommodation (and other services) to around 85 formerly homeless young people, aged 16-25, at seven housing sites across the North East of Scotland. The young people are accommodated for up to two years, whilst being supported towards independent living. This includes support with household chores, budgeting, and job searches, as well as health improvement services. The young people receive job seekers allowance (ages 18-25) or income support (ages 16-25), which is currently £57.90 for a young single person (UK Government, 2015). Their rent is paid to the organization by the Local Authority. If a young person gains employment, as one of the goals of independent living, they receive no financial support from the Local Authority and have to pay their own rent. In some cases, this can lead to the person being worse off financially than when unemployed, or result in marginal financial benefits.

Within this context, an earlier (unpublished) pilot study at each of the housing sites found little or no change in the nutritional state of young people accommodated by the organization, during their stay (Perry, 2013). The project aimed to further explore the relationship between food and health-related social injustice for this group of vulnerable young people. I aimed to actively engage some young people in this work, as peer/core researchers, and possibly to improve their food choices as part of this process.

In this paper, I focus on one substantial thematic network identified during the course of analysis: 'Living environment and Relationships'. The findings led me to consider the importance of young people's experiences prior to and during the period of supported accommodation, in shaping their present food choices and practices. I aim to sensitise to the effects of young people's physical, social, cultural and economic environments, in relation to food choices and practices. By drawing on Schlossberg's (1981) transition theory, which "describes the extraordinarily complex reality that accompanies and defines the capacity of human beings to cope with change in their lives" I argue that their food choices may make comparatively poor nutritional 'sense', but nevertheless make good sense to the young people themselves, in terms of their search for ontological security, personal identity, and social connectedness.

2. Methodology

Qualitative data were collected through a range of fieldwork methods: participant observation, in-depth semi-structured interviews, and action research methods. Research participants included both staff members (MS) and young people (YP). The choice of multiple methods is in line with the interdisciplinary rationale underpinning the project, which is to provide a detailed account of complex and interlinked issues in the lives of low-income young people. Participant observation took place in participants' own settings. I took part in a range of activities such as art classes, cooking activities, sports, social events, and food shopping. Observation took place over a period of ten months at three of the housing sites of the organization, here named as housing sites 1, 2 and 3 (HS1, HS2, HS3) and at the local community centre (CC). These housing sites were selected as they covered a range of contexts - rural, semi-rural and city - as well as providing some differences in working structures.

Fieldwork involved an extensive commitment to the participants and intensive full time study of the participants' living environments. During the ten months, 552 hours of observation hours were spent at the housing sites over 69 days, based on an average of eight hours observation each day, plus another 14 days, 112 hours, of observation outwith the formal ten months research period. Additional visits to participants in the core researcher group also happened frequently. In-depth interviews were conducted, partly to check and verify or refute theoretical insights gathered via support participant observation. I conducted five interviews with young people, five interviews with members of staff; and one interview with a board member, after presenting some of the findings to the organization's board. This comparatively small number was judged adequate, as topics and themes found during the extended period of participant observation rapidly recurred, and the information was considered saturated. Some of the conversations found during the earlier fieldwork period provided sufficient data to render a more formal interview unnecessary. Three of the interviews with young people were conducted by a young person in the peer research group.

Two focus groups also contributed to the data. Focus group 1 was conducted with participants (P1-10) taking part in an educational programme run at CC, to which the researcher was invited to explore the issues regarding food

choices with the group. Focus group 2 was conducted with those young people (P1-5) who were members of the peer researcher group. Additional data were provided by one young person's peer researcher field-notes.

2.1 Participant Recruitment

Staff members working at CC and HS1,2,3, and young people involved in services at CC as well as HS1,2,3 were all invited to take part. I included individuals from CC as they were involved with HS1,2,3. An information sheet was sent to all members of staff at the beginning of the study in June 2013. An information session was then held at CC in March 2014. Staff members from the housing sites were introduced to the project and directly asked whether they were happy with the researcher's presence. Every interested young person was introduced to the project during an information session organised at the site, or on a one-to-one basis. Staff members and young people received information sheets and signed consent forms for each of the research procedures. At HS1, two of the observation phase participants were friends of tenants, frequently present at the site. No data from any other peer research activities are included here, as these did not directly focus on the context of food choices. It is also important to note that some participants have informed more than one research method. There were no direct, e.g. monetary, rewards for participation.

2.2 Approach to Data Analysis

The collected data were fully transcribed. I utilised Attride-Stirling's (2001) thematic network analysis guide, a method designed to shed light on the meaning, richness and magnitude of the subjective experience of social life. Thematic networks provide a web-like display of themes, attend to the fluidity and interconnectivity of arising issues (Attride-Stirling, 2001), and thus facilitate sensitivity to the complexity of data. These networks are derived over three phases (Attride-Stirling, 2001), facilitated by NVIVO software. Firstly, the text was broken down into patterns and salient issues emerging from the data, informed by the research questions. Secondly, I explored the dissected text by identifying themes, refining these further after discussions between the research team members, and constructing the networks. Thirdly, I integrated the exploration by describing the networks and interpreting the patterns that emerged. A reflexive journal was kept to map and record all steps and rationales behind my emergent thinking.

Eight global thematic networks emerged through this process, linked by the overall rationale of exploring young people's food choices: (1) Living Environments and Relationships (2) Understanding food and drink choices (3) Food practices (4) Shopping experience (5) Every day priorities (6) Future visions of young people (7) Relation between food and health perceived by young people (8) Health and Food related processes at the organization. The voices of staff as well as young people are included in these networks as only together they provide thorough and complex insights. Network (1) sets the background and context to young people's decision making on food. By 'Living environments and relationships', I indicate what I observed as the most pertinent influences on young people's lived experiences. I explore this network below, especially in light of participants' lives before and during supported accommodation. By drawing on Schlossberg's (1981) transition theory, I then connect these findings to aspects of thematic networks (2) and (3) in order to explore how (1) may have influenced the young people's relation to food.

3. 'Living Environments and Relationships' before Homelessness and Supported Accommodation

Difficulties and conflict in the home environment were a common precursor to the young person's becoming homeless. Some young people described themselves as 'estranged', 'antagonistic' or 'victimized', in relation to their parents. As one young person put it,

I couldn't stay at home, because the relationship with my mother became too estranged and antagonistic. It's got to the point where we were arguing all the time, [...] sometimes it felt like victimization, [...] [S]ometimes, I'll be sitting, and she would just glare at me. With really angry eyes, just glare, for no reason at all, not say anything. And just look at me, disgusted. And then I'd look back at her and say "what is it?" And nothing, she just goes "nothing" and she just turned away. To the TV. And then she'd go back to do it a while later, just things like that. [...], it was just becoming impossible to live in the same house as her. (Interview, YP, 1.7.2014)

The young person continued to describe the visit at home, forgetting to put away the dishes, and then receiving a text message.

Just basically saying, don't come back. "Game over, you get nothing from me now" I think it was. I still got the text but, I just never went home after that really. I think this was the last time I was properly at home. (Interview, YP, 1.7.2014)

Other young people reported similar experiences:

And I went to College, then I had my seventeenth birthday in College, then came home, then I had my eighteenth birthday, and after I turned 18, my life with my mum just started to turn out in hell a bit. (Interview, YP, 11.8.2014)

How and why, cause I had like nowhere else to go. I was kicked out by my mum [...]. (Interview, YP, 3.7.2014)

I was kicked out, and then not allowed back in. And they had got like CCTV cameras. (Interview, YP, 26.8.2014)

Most participants reported maintaining *good relationships with their siblings*, with some of them taking an active caring role at home:

And, I cooked some food for my sister and brother [...] because they were starving, and they had been left there alone all day, she was just there in the house all day, and they didn't know how to cook, so I made them some food and stuff. (Interview, YP, 1.7.2014)

I had to steal to feed [my brother]. (Fieldnote, 3.4.2014)

It is important to note that these findings are presented to help contextualise the lives and background circumstances of the participants. By doing so I am conscious that these data risks reinforcing a view that parental deficiency is the root cause to young people's problems. It is important to note therefore that the parents (mothers) referred to in these narratives were not provided with an opportunity to speak for themselves and explain their experiences of the relationships with their children or the circumstances of their lives. From talking to the young participants, I indirectly gained a sense that their families had also been struggling with a variety of economic, psychological and social challenges.

Before becoming homeless, many young people described *negative experiences at school*, previous *criminal convictions* and *contact with the police*. There were several other *distressing experiences* primarily relating to experiences with friends. Before entering the organization, participants had experienced *rough sleeping conditions*, and spent *time in bed and breakfast* accommodation (B&B) provided by the Local Authority. Their friends or other family members often provided shelter:

[F]or the last 3 nights I was just walking about the streets, [...]. And then my uncle [...] came in. Cause he knows how it feels. He was [...] in the streets for like a month or so. And he did not want to see me go through the same things, so that's why he took me. As for my ma, she did nae really care, she did nae really care where I'd go and stuff like that. (Interview, YP, 3.7.2014)

One young person was staying with the ex-girlfriend and her mother, where *for a while I was sleeping in a cupboard, like a really small cupboard, it was just sort of splunged up. But it was better than the street* (Interview, YP, 1.7.2014). When the young person moved from staying with other friends to emergency accommodation, they described how it was then possible to *just exist, it was nice. Just existing, not just surviving, or scrounging, [...]* (Interview, YP, 1.7.2014). Their time in B&B accommodation was perceived as frustrating and depressing by all participants. They also reported *meeting people in similar situation* to themselves, which could be distressing. Young people described *long waiting times for getting accommodated* by the organization. The transition phase before entering the organization was described as a phase of *isolation*, or *nowhere else to go*.

3.1 Lived Experiences during Supported Accommodation

Every young person accommodated by the organization had a fully equipped flat. At the beginning of their stay, they create individual action plans based on their own needs and goals together with a member of staff who acted as their allocated support worker during their stay. In this, the *relationships with members of staff are crucial*. They were supported for up to two years, but might move on if able to obtain and sustain their own flat during that time. There are several events for tenants at the organization and tenants meetings take place on average once a week. Due to several interlinked difficulties connected to homelessness and lack of routines during that time, participants' daily rhythms could be labelled as '*chaotic*' by staff members. Participants did not necessarily view their daily patterns as problematic for their personal progress on their action plans, but recognized these as not necessarily 'routine':

As I said, I stay up all night and don't go to bed until late. (Interview, YP, 3.7.2014)

Routines do help, but I don't think they are necessary. And that's where some people find it hard, because they feel like they have got to have a routine of doing all that stuff like every week. (Interview, YP, 11.8.2014)

Their *income support* budget limits their ability to 'do things', leading to occasional periods of boredom. Some participants cut back on heating, so their flats were frequently *cold*. I also observed young people's regular anxiety about whether their benefit money appeared in their account before the weekend: *In the morning he was checking*

whether his money got through, and it did not. That meant he would be without money for the weekend (Fieldnote, 2.5.2014).

Their main interests and priorities were related to *seeing friends* and maintaining social connectivity. Little is actually known about the relationships and friendships of adolescents, especially when disadvantaged (Animosa et al., 2015). The study participants were found to be strongly engaged with their friends, taking up most of their time. They often shared confidential information, such as credit card details, and spoke of *intimate conversations*, with trusted friends. *Break ups* with boy or girlfriends were strongly negative events, leaving them sad and depressed. On several occasions I found young people providing shelter for friends in a similar situation, or accompanying friends at times when this had a detrimental effect on their own interests and opportunities:

The boy was going with a friend to get on the bus. They came back after a while because his friend forgot his ticket, [...] [...] I had given more money to him, which he could have used, but did not want to use because he said then I wanted to have the money back. I said he [...] could have used this [...] we would have sorted things out afterwards. [...] He did not want to leave his friend behind "And then, what should he do?! He lives in town" I told him, he should have gone alone, I would have figured something with him. [...] He rather misses out his own opportunities than leaving his friend behind. (Fieldnote, 1.5.2014)

It seemed that relationships with their friends were particularly important in that they helped to provide security in a new living environment, security which had previously been provided by family. Some young people experienced their friends as particularly helpful during their homeless period, and thus proved more reliable than their own families.

4. Transition Theory

The experiences young people had previous to entering the organization are crucial to understanding their food choices *now*. I found Schlossberg's (1981) theory on transitions particularly useful in aiming to make sense of the complexities that I encountered during fieldwork, as well as in aiming to connect the young people's lived experiences to the rationales behind their food choices. It is important to note that Schlossberg's work grows out of the work of others. In line with Schlossberg, I define a transition as any event, or non-event that results in changed relationships, routines, assumptions, and roles. Events can be anticipated, e.g. graduation, or unanticipated, e.g. divorce, and non-events are impacts on an individual that do however not actually occur in an event, e.g. failing to be admitted to a course. Whilst a transition is linked to an event or a non-event it extends over a course of time. It is not the transition as such however which is important, but rather how that transition fits in with the person's life at the time. This is what Schlossberg calls 'adaptation': "a process during which an individual moves from being completely preoccupied with the transition to integrating the transition into his or her own life", from being "pervasive" to "bounded". Thus, transition is dependent on how a person is able to adapt to it. Three main sets of factors influence how someone adapts to transition. Firstly, "The characteristics of the transition itself", those include "role change" (gain or loss), "affect" (positive or negative), "source" (internal or external), "timing" (on time or off time), "duration" (permanent, temporary or uncertain), and "degree of stress". Secondly, "The characteristics of the pre- and posttransition supports, and physical setting". And thirdly, "The characteristics of the individual", that include "psychosocial competence", "sex" (and sex role identification), "age" (and life stage), "state of health", "race/ethnicity", "socioeconomic status", "value orientation", as well as "previous experience with a transition of similar nature". The actual degree of adaptation can be assessed in terms of the individual's resources-deficits balance or in terms of degree of similarity and difference between the pre- and posttransition environment. Figure 1 shows Schlossberg's model.

Surely, different factors have different salience depending on the transition and on the subgroup studied. In her later work, Schlossberg, simplified and more explicitly, named the four main factors that influence how an individual is able to cope during transition as "situation, self, support, and strategies", known as '4 S's' (Goodman, Schlossberg and Anderson, 2006). My analysis benefits from both, the earlier and later work.

Crucially, perception plays a key role in transition, as either an event or a non-event can only be a transition if it is understood as such by the person experiencing it. Also, transitions can be positive as well as negative, also dependent on the individual's perception. In this sense, in aiming to understand the meaning that the transition from being homeless to living in supported accommodation has on the young people participating in my study, I need to consider the type, context and impact of such transition, including the individual's emotional state. Whilst Schlossberg does not specifically relate her theory to any age group, but refers to transitions from young adulthood to adulthood, transitions during adulthood as well as during later life stages, and also notes that specific childhood

experiences influence the adult development, I will specifically relate to the experiences of vulnerable young people.

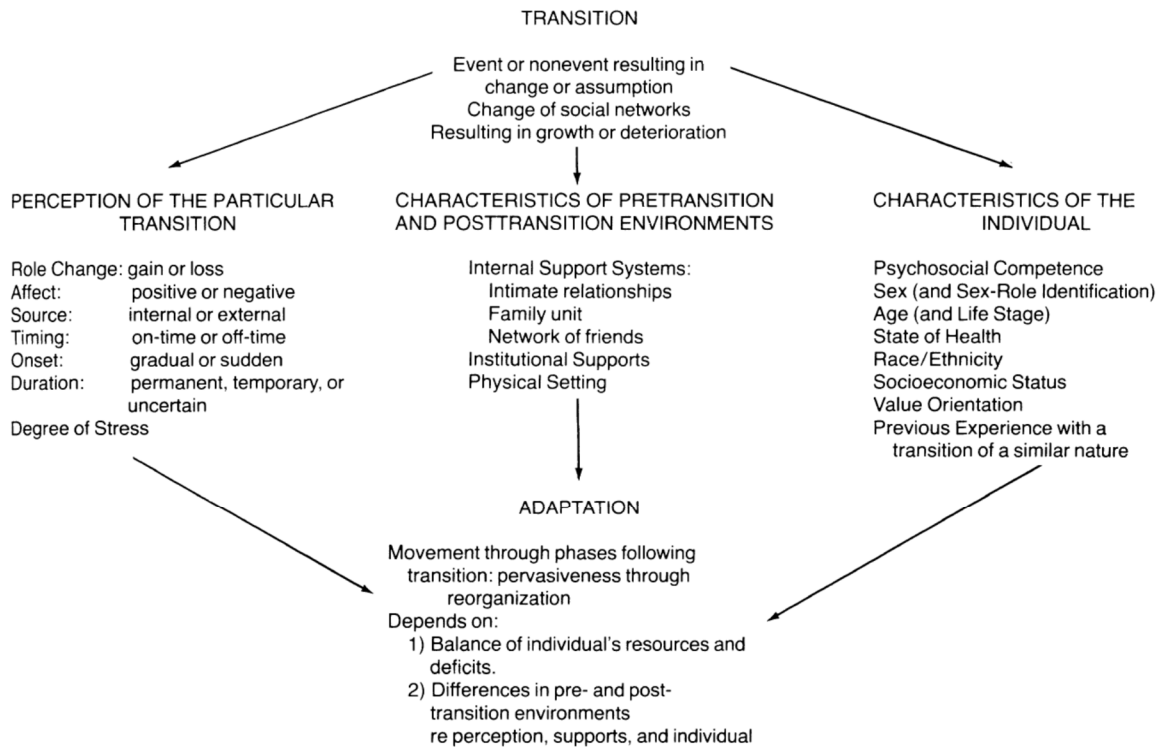


Figure 1. Schlossberg's Transition Theory Model

5. Connections to 'Understanding Food and Drink Choices'

If I consider the transition as the ultimate goal of 'independent living' including 'healthy food choices', from the beginning, Schlossberg's theory helps understand that assumptions about the ultimate goals of transition are flawed. The transition goal of 'independent living' can only be achieved if the young person perceives of it as the goal. In this sense, Schlossberg's model makes aware that what adults consider a worthwhile transition for young people needs to be adapted to the young person's perceptions of such transition in order to successfully achieve what they consider successful to themselves.

One such difference in perception became apparent with regards to what young people considered as influences on their food choices. Despite the importance of friends to young people, research literature suggests that the influence of *parents, upbringing, and family values* continue to be important into young adulthood (Flynn et al, 2014). Lee (2014) and Animosa (2015) emphasize that parents play an important part in young people's health behaviours. They find that while parental control does not differ between socioeconomic classes, parents in disadvantaged groups engage in less communication and activity with their children. Despite adolescence often being described as a period of rebellion and change, the family background and parental bonds are a causal influence on young people's health behaviour and, ultimately, food choices (Animosa, 2015). Members of staff were of the same opinion: *But there is no doubt, it goes back to mainly what they have been brought up with* (Interview, MS, 22.6.2014). Young people themselves, however, did not directly relate their food choices to their upbringing, but would spoke rather of *personal reasons* and their *lifestyle of being busy*, mainly related to seeing friends as noted above: *A lot of the time, I am out and about and I am doing stuff, [...] I am not in the house very much, so what I look for all the time is tinned food* (Interview, YP, 1.7.2014). This young person also told me about how, during the time in B&B accommodation, eating habits changed because of having to sustain themselves on a limited budget, with few cooking skills. In B&B, *I was living on a lot of ready meals, you know, way more than I am now, all I ever ate, was just sort of soup in boiling water, and microwaved stuff, that was all I ever ate, I got scurvy round about that time as well* (Interview, YP, 1.7.2014). When describing such situation by means of the 4 S's, I find that the young person firstly found

himself in a situation, that he himself had not wanted for himself, that had no time frame to it, and that was influenced by a number of stresses on the individual, such as how to move on. There was no previous experience for the young person to refer back to. Secondly, the young person's self (personal and demographic characteristics influencing how a person views life including socioeconomic status, gender, ethnicity/culture, age, stage of life, and stage of health and psychological resources (Goodman et al, 2006)), is limited by the situation of homelessness. The young person's socioeconomic status and stage of health at the time was not positively influencing his psychological resources. Support in this situation was hardly existent, but instead, the young person developed his own strategies of coping with the situation, the food choices at the time were part of the coping strategy. Making healthy food choices in homelessness situation understandably takes less priority. In supported accommodation, healthy food choices are to become part of the transition from an organization point of view. But support only functions with "affect, affirmation, aid, and honest feedback" (Goodman et al., 2006).

When in supported accommodation, participants told me that foods had to be *fast* to be prepared, *convenient*, and *filling*, but also *healthy*. Participants were not necessarily 'fussy' about their food choices (Fieldnote, 22.7.2015). *What do I like to eat? You know what? Everything.* (Interview, YP, 1.7.2014). One participant described food choices as *situational*. The main influence however, mentioned by both young people and members of staff, was *cost*. Whilst young people being accommodated are able to budget more than when homeless, their financial means are still limited. Some young people chose to use their money on *other priorities* such as toiletries, clothes, mobile phones or computer games. In some cases, also alcohol and drugs became a priority. One young person said that they would 'go mental' and spend the money just after it arrived in the bank account, on computer games, and then be left with hardly any money for food (Interview, YP, 6.8.2014). This is not to say that young people do not understand how to budget, but rather shows how limited finances restrict their abilities to take part in consumer society, which might be crucial to identity development, given the salience of consumption as a marker of inclusion in modern society (Stead et al, 2011). Here, the socioeconomic status, as an individual's characteristics, influencing the ability to adapt to transition, even when being supported, became most apparent. In fact, in light of other priorities, food choices become even more limited on a low budget and the possibility of *cooking with cheap ingredients* was put forward by members of staff, but: *although that's cheap, as an ingredient you have got to go out and buy it in the first place, and you don't want to be living on the same thing all the time* (Interview, MS, 14.7.2014). Not every young person necessarily wants to buy what is cheapest, as young people make statements about their desired identities through the products they consume (Stead et al, 2011). Stead et al (2011) suggest that young people from a lower social class may seek to distance themselves from that very same class. However, as far as aiming for *being seen* or accepted by their peers through *branded items* is concerned, I did not find direct evidence from young people themselves that they were consciously aiming for peer acceptance through such consumption, despite comments by staff and e.g. Stead et al (2011). Young people were observed with *branded items*, but from the point of view of some young people themselves their choices might be much more related to taste, e.g.: *I'm actually not keen on veg at all. I don't think it's the right kinda taste [...]* (Interview, YP, 3.7.2014). In fact, Grayson (2010) notes that the sense of taste evolved to be a front-line defence against toxins and a sensor to help detect the most energy-rich food, and cravings for sweets and fats are related to food intake in complex ways.

Potentially related to some young people being hungry, the *decision-making process* on their food choices in the shops was found to be *instant* and with *little planning*. Limited financial budget can be especially difficult for young people with specific needs, such as a diabetic young person which a staff member reported on:

So he had his £56 a week, and £57 now, [...] which he had to buy his electric and his gas and his council tax and all his bits and pieces and trying [...] to eat the proper meals that a diabetic should eat. So that was a real challenge, and I was very worried about him and still am. (Interview, MS, 26.6.2014)

Cost however also related to the cost of *proximity* of shops, the *weight of the food shopping*, and *time* spent shopping and preparing food.

Such potential conflicts between wanting to and being able to purchase particular foods, between health and taste, and between peer acceptance and desired identities, give a sense of the complexities surrounding not only the process of shaping young people's food behaviour within their perceived transitions, but also their identities. I found that, for young people in particular, the process of transition is complexly interlinked with a process of identity building. Identities are shaped by subjective ideas about cultural, structural, social, and individual meanings. People may have multiple identities in different social groups, and can be fluid over time (Bisogni et al, 2002). Food is a way to assign identity to oneself through what is considered edible, types of foods liked and disliked, and methods of preparation. We express a range of influences on our identities in eating. Mutually, our food choices shape our identities in light

of the different food environments we belong to (Bisogni et al, 2002). If a sense of identity reveals how people judge themselves and how they feel judged by others (Bisogni et al, 2002), experiences of food poverty, related to feelings of low self-worth, are detrimental to the young person's positive mental wellbeing. In this regard, Cosner Berzin and De Marco (2009), in their study looking at the effects of poverty on emerging adulthood, find that the outcomes of poverty leave young people with fortunate future opportunities for emerging adulthood. Given that young people living in marginalized circumstances not only have difficulties in sustaining a healthy diet, but also interrelated struggles in forming identities that are acceptable to themselves, it appears that identity shaping and food choices within a process of transition are mutually constructive or destructive. In line with Cosner Berzin and De Marco, the confined spaces of the participants' food choices might be rather destructive for their identity shaping in terms of developing self-confidence and finding a sense of belonging in society.

5.1 Connections to 'Food Practices'

I not only observed the actual food choices, but also how young people prepared foods, their shopping and eating behavior. According to staff, the young people's food practices, including cooking, could be very mixed:

[...]complete mixture, [...]. Some have obviously watched dad, grandma, whoever cooking and [...] they might have been shown, or they have picked up some skills. Others just didn't have a clue. (Interview, MS, 22.7.2014)

Young people themselves disagreed on whether they themselves or their peers would cook and which facilities would be used.

There is like, no means really. Because people just buy things that are fast and easy. Instead of [...] standing in a kitchen and making meal. (P3, YP, Focus Group, 22.7.2014)

Yeah, it is really handy, especially if you have food on the go. So if it takes like 10 minutes for rice. If I buy my shopping and spend like a little while chopping up vegetables, it is pretty easy to just make stir fry on the spot. (Interview, YP, 11.8.2014)

The hob hardly ever gets used. (P3, YP, Focus Group, 22.7.2014)

P2: Have you ever actually been standing in your kitchen and prepared a meal for yourself? P4: I have done that a lot of times, yeah. (P2, P4, YP, Focus Group, 22.7.2014)

I found that many young people had low self-confidence in being able to prepare a meal, despite their real abilities and education on food preparation as such. It seemed that young people's (poor) self-perception of their abilities to prepare foods were not necessarily accurate. I can only speculate that for some young people this might be due to negative previous experiences in being neglected by their homes, downgrading their self-worth and confidence. But perhaps for some young people, their self-confidence only needs some more time to develop. I found that in fact, it seemed as if the need for transition was being imposed on participants, whilst participants might not be ready. This is because, as Schlossberg notes, transitions are expected to happen at a certain time in a person's life cycle, such as transitioning from single to married life, or from student to working life. Achieving independent living and healthy eating practices as a young person between the ages of 16 and 25, in that sense, are expected from the participants to happen at this specific time of their lives. As the transition theory model however makes aware, again, "age and life stage" is complexly interlinked with "psycho-social competence", and influenced by other factors. Therefore, recently, the concept of "becoming" has been stressed in youth transition research (Worth, 2009). I found Schlossberg's theory in this regard realistic, but from a public health point of view it poses a dilemma. Whilst transition and adaptation are dependent on the young person's perception, in order for young people to gain long term positive health effects through making healthy food choices, guiding this perception is challenging, as supporting structures are complexly interlinked with self, strategies and situation.

What was categorized as 'chaotic' by members of staff, was perceived as 'keeping busy' by the young people themselves. Story, Neumark-Sztainer and French (2001) in their study find 'lack of time' as commonly cited by young people as a barrier to healthy eating, perhaps indicating the low priority accorded to this activity, compared to more social pursuits.

Because some people don't have enough money for breakfast and stuff like that, they just get the sort of lunch and dinner time sort of thing. (P4, YP, Focus Group, 22.7.2014)

[...] I don't eat in the morning, [...] because I feel sick anyway. [...] This morning I woke up and I had..... nothing. I haven't eaten all day actually. (Interview, YP, 1.7.2014)

Whilst daily routines and structure influence when and which foods are being consumed, at the same time, the difficulty of purchasing foods on a low financial budget, may also influence the daily structures. Some young people

may find themselves not able to start the day with a breakfast which could improve their overall dietary patterns, and which has consequences for their *mood* and vice versa (Matthys et al, 2007). It also influences how food is being perceived by young people, whether it is *enjoyable* or rather viewed as *fuel*, the latter was frequently the case for young people in my study. Some young people developed what I named *coping mechanisms*, strategies in Schlossberg's words, such as hiding money (from themselves), drinking alcohol, stealing or 'bin diving', some of activities which might impact on their future wellbeing.

Some young people considered foodbanks as a resource to supplement their food budget. For others however, food aid was not an option. This relates to how young people form their identity partly through the foods they consume, as noted above. Accepting food aid carries a sense of disempowerment (Douglas et al, 2015b:310). Not being able to provide oneself with food as the most basic human need, raises questions about the self-worth, wellbeing, and dignity (Douglas et al, 2015b). The following fieldnote reflects this:

I asked why he would not make something with the foods that [the local food aid network] brings in. It is definitely not the best, but it would keep you going. There was pasta last week, and some cereals, [...] ready-made soups and baked beans. He said it would be out of date most of the times, so he wouldn't feel comfortable to eat it. And they were asking me whether they should then have cereals without any milk. (Fieldnote, 20.2.2015)

Visiting a foodbank arguably makes little contribution to young people achieving independent living and would, for some, interfere with acceptance by peers. As Coufopoulos and Mooney (2012) point out, food plays a key role in social inclusion. That means sharing and eating food with others promotes a sense of community, and wellbeing. In line with other studies, the young people influenced each other in their food choices (Story, Neumark-Sztainer and French, 2001; Davison et al., 2015; Stead et al., 2011; Animosa et al, 2015). I found that for the young people in my study, whilst the taste of so called *fast foods* might be appealing, it was more the place as a social space that seemed appealing, one where young people could have fun and feel accepted. Social inclusion also relates to mainstream food practices, which means that how we prepare and purchase our food is also part of our social context, above and beyond the actual foods eaten (Goode, 2012). For example, the researcher group went out to eat at McDonalds after they had had dinner at the group meeting (Fieldnote, 2.2.2015).

There might be a tendency for vulnerable groups to avoid what might be labelled a healthy lifestyle as it would be associated with another social class, and could hence be seen as an act of 'betrayal' (Riddoch, 2013; Beagan, Power and Chapman, 2015). In this regard, Animosa et al (2015) found that the ability to distance oneself from the influence of peers involved in deviant behaviour was very important in determining whether a participant reported making a positive behaviour transition. Similarly, Stead et al (2011) describe it as 'emotionally and socially risky' for young people to be perceived by their peers as being interested in healthy eating. While such behavior might seem self-defeating, it still helps to provide a place in the group. In this light, what seems to be unhealthy and self-defeating behavior to some, is in fact an act creating safety for oneself – which is not only the case for vulnerable groups. Hence, the choice of health, and healthy eating, could be superseded by the question of choices that are socially 'safe', i.e. conforming with the social group we believe we belong to. In this sense, young people might be aiming for a sense of ontological and social safety within their new social environment, that of being accommodated by the charitable organization, which they did not experience when homeless. In this regard, Schlossberg emphasizes to consider the characteristics of the pre- and posttransition in order for an individual to adapt to the transition. The difference between the pre- and posttransition environment is significant insofar as that difference affects the young person's assumption about self and the world, and consequently, relationships in family, work and community.

But the ease of adaptation also depends on what Schlossberg calls "one's perceived and/or actual balance of resources to deficits" regarding "the transition itself, the pre-post environment, and the individual's sense of competency, well-being and health". In line with the above, this means that rather than considering a young person's adaptation to their new living environment in terms of health or sickness, I consider how material or non-material resources to support them in their transitions and ease to adapt relate to deficit. This view allows for changes in the relation between adaptation and transition as a young person's situation changes, as they adapt to what they perceive as transition. This also shows partially why a person can adapt differently to similar types of transitions, i.e. why some young people would make healthier food choices than others. Adaptation can be relatively easy when a person's resources outweigh the deficits. Others struggle with transitioning from pre to posttransition. As Schlossberg notes, someone might not necessarily be "ill", but they may experience a temporary balance from resource to deficit, which restricts them from progressing further in their transitions.

6. Conclusions

Gaining some insight into the issues homeless young people face, and continue to face even when supported and accommodated, helps to understand why the organization's services aimed at improving young people's food choices can struggle to have much impact. The amount of available income for the study participants is very low, even with extra support for accommodation by the organization, representing a major determinant of their food purchasing behaviors. In pointing to the complexities of factors interfering with those transitions that young people themselves perceive to undergo, my findings suggest that without supportive economic and/or social policy changes that would result in higher levels of income for these young people, education and skills-based nutrition interventions and food services would seem insufficient to support sustained behavioral changes desired of them. Even though this might seem a broad answer, it helps to show why transitioning to healthy food choices and practices as the norm is not easy to pursue. Furthermore, linking young people's experiences before and during their stay with the organization makes it clear that the rationales behind young people's food choices are based on a host of preceding factors, and make sense to them. The difficulties surrounding vulnerable young people's struggles to shape their identity within a dynamic process of transition, in ways acceptable to themselves and their peers, become particularly apparent when adding the food component. I find that young people are confronted with individual conflicting interests between identity shaping and their food practices. Despite young people understand the principles of healthy eating, a spiral of interrelated and converging social, economic and associated psychological issues, might render food and health of seemingly little value and low priority for young people (Davison et al., 2015; Stevenson et al., 2007).

In focussing on the lived experiences of the young people, *Foodways and Futures* raises the question of how much food choice vulnerable groups really have, and whether the expectations brought to the field by public health practitioners, as well as researchers, need to take into account the realities of the competing factors affecting young people's food choices. Food choices fit in with their individual activities, daily rhythms, routines, priorities and interests. Some of these derive from their experiences previous to gaining supported accommodation. In their new living environment, they are in the process of finding a sense of security and meaning, not least by finding a place in the group. Such reasons lie behind their visiting fast food places together, and spending money on mobile phones in order to stay in touch. Finding security takes priority over making healthy food choices, and financial restrictions further make it difficult to purchase healthy foods.

Whilst making sense to young people, however, their unhealthy food choices still presents a problem to public health, regardless of the rationales behind such choices. However, theories of human behavior can only be translated into an effective health message with knowledge and understanding of the target audience (Maibach and Parrott, 1995). While it is arguably difficult to integrate a "social matrix of meaning" into food-related health services, understanding why vulnerable young people make particular choices can help facilitate the development of effective interventions to create normative support for healthier eating, and assist them in adopting the recommendations (Story, Neumark-Sztainer and French, 2001). Behavior changes may stand more chance of being initiated when the lived experience which shapes young vulnerable people's food cultures is fully taken into consideration. It is critical to involve young people in planning nutrition intervention programs which make sense to them and fit in with their realities.

Acknowledgements

This paper has evolved from a 3.5 years PhD studentship in Applied Health Sciences at the University of Aberdeen, entitled *Foodways and Futures*, under the supervision of Dr Flora Douglas, Dr Sandra Carlisle, Dr Karen McArdle and Prof Geraldine McNeill. This work was supported by the by the Scottish Government's Rural and Environment Science and Analytical Services Division (RESAS). The project has been approved by the Ethics Committee of the Rowett Institute of Nutrition and Health.

References

- Animosa, L., Johnson, S., & Cheng, T. (2015). "I Used to Be Wild": Adolescent Perspectives on the Influence of Family, Peers, School, and Neighborhood on Positive Behavioral Transition. *Youth and Society*. <https://doi.org/10.1177/0044118X15586146>
- Attride-Stirling, J. (2001). Thematic Networks: an Analytic Tool for Qualitative Research. *Qualitative Research*, 1(3), 385-405. <https://doi.org/10.1177/146879410100100307>
- Beagan, B., Power, E., & Chapman, G. (2015). "Eating isn't just swallowing food": Food practices in the context of

- social class trajectory. *Canadian Food Studies*, 2(1), 75-98. <https://doi.org/10.15353/cfs-rcea.v2i1.50>
- Beasley, L., Hackett, A., & Maxwell, S. (2005). The dietary habits and nutritional status of residents in young people's homeless hostels. *International Journal of Health Promotion and Education*, 43(1), 23-28. <https://doi.org/10.1080/14635240.2005.10708031>
- Bisogni, C., Devine, C., Connors, M., & Sobal, J. (2002). Who we are and how we eat: A qualitative study of identities in food choice. *Journal of Nutrition Education and Behavior*, 34, 128-139. [https://doi.org/10.1016/S1499-4046\(06\)60082-1](https://doi.org/10.1016/S1499-4046(06)60082-1)
- Bottrell, D. (2009). Dealing with Disadvantage: Resilience and the Social Capital of Young People's Networks. *Youth and Society*, 40(4), 476-501. <https://doi.org/10.1177/0044118X08327518>
- Cosner Berzin, S., & De Marco, A. (2010). Understanding the Impact of Poverty on Critical Events in Emerging Adulthood. *Youth and Society*, 42(2), 278-300. <https://doi.org/10.1177/0044118X09351909>
- Coufopoulos, A., & Mooney, K. (2012). Food, Nutrition and Homelessness. Guidance for Practitioners. Retrieved from http://www.qni.org.uk/docs/Nutrition_Guidance_web.pdf
- Davison, J., Share, M., Hennessy, M., & Stewart Knox, B. (2015). Caught in a 'spiral'. Barriers to healthy eating and dietary health promotion needs from the perspective of unemployed young people and their service providers. *Appetite*, 85, 146-154. <https://doi.org/10.1016/j.appet.2014.11.010>
- Douglas, F., et al. (2015/a). *The nature and extent of food poverty*. NHS Health Scotland.
- Douglas, F., Sapko, J., Kiezebrink, K., & Kyle, J. (2015/b). 'Resourcefulness, Desperation, Shame, Gratitude and Powerlessness: Common Themes Emerging from A Study of Food Bank Use in Northeast Scotland'. *AIMS Public Health*, 2(3), 297-317. <https://doi.org/10.3934/publichealth.2015.3.297>
- Dowler, E., & Lambie-Mumford, H. (2015). How Can Households Eat in austerity? Challenges for Social Policy in the UK. *Social Policy and Society*, 14(3), 417-428. <https://doi.org/10.1017/S1474746415000032>
- Flynn, H., Felmlee, D., & Conger, R. (2014). The Social Context of Adolescent Friendships: Parents, Peers, and Romantic Partners. *Youth and Society*. <https://doi.org/10.1177/0044118X14559900>
- Friel, S., Hattersley, L., Ford, L., & O'Rourke, K. (2015). Addressing inequities in healthy eating. *Health Promot. Int.*, 30(suppl 2), 77-88. <https://doi.org/10.1093/heapro/dav073>
- Goode, J. (2012). 'Feeding the Family When the Wolves are at the Door: The Impact of Over-Indebtedness on Contemporary Foodways in Low-Income Families in the UK. *Food and Foodways: Explorations in the History and Culture of Human Nourishment*, 20(1), 8-30. <https://doi.org/10.1080/07409710.2012.652016>
- Goodman, J., Schlossberg, N. K., & Anderson, M. L. (2006). *Counseling adults in transition: Linking practice with theory* (3rd ed.). New York: Springer Publishing Company.
- Grayson, M. (2010). Food. *Nature*, 468(7327).
- Jenkins, S., & Horner, S. (2005). Barriers that Influence Eating Behaviors in Adolescents. *Journal of Pediatric Nursing*, 20(4), 258-267. <https://doi.org/10.1016/j.pedn.2005.02.014>
- Kennedy Elder, L. (2004). *Interactive Learning Exchange: Exploring Strategies to Reach and Work with Adolescents*. HNP discussion paper series. Washington: The World Bank.
- Larson, N., Neumark-Sztainer, D., Story, M., Wall, M., Harnack, L., & Eisenberg, M. (2008). Fast food intake: Longitudinal trends during the transition to young adulthood and correlates of intake. *Journal Of Adolescent Health*, 43(1), 79-86. <https://doi.org/10.1016/j.jadohealth.2007.12.005>
- Limb, M. (2014). Investigate scale and causes of food poverty, say public health specialists. *BMJ*, 348, 3081. <https://doi.org/10.1136/bmj.g3081>
- Lloyd, S., Lawton, J., Caraher, M., Singh, G., Horsley, K., & Mussa, F. (2011). A Tale of Two Localities: Healthy Eating on a Restricted Income. *Health Education Journal*, 70(1), 48-56. <https://doi.org/10.1177/0017896910364837>
- Maibach, E., & Parrott, R. (1995). *Designing health messages: Approaches from communication theory and public health practice*. Sage Publications.
- Matthys, C., De Henauw, S., Bellernans, M., De Maeyer, M., & De Backer, G. (2007). Breakfast habits affect overall nutrient profiles in adolescents. *Public Health Nutrition*, 10(4), 413-421.

<https://doi.org/10.1017/S1368980007248049>

- Perry, R. (2013). "A study of Diet and Nutrition in Young Homeless People Before and After Supported Accommodation at Aberdeen Foyer". (unpublished)
- Riddoch, L. (2013). *Blossom: What Scotland needs to flourish*. Edinburgh: Luath Press Limited.
- Schlossberg, N. (1981). A Model for Analyzing Human Adaptation to Transition. *The Counseling Psychologist*, 9(2), 2-18. <https://doi.org/10.1177/001100008100900202>
- Share, M., & Stewart-Knox, B. (2012). Determinants of food choice in Irish adolescents. *Food Quality and Preference*, 25(1), 57-62. <https://doi.org/10.1016/j.foodqual.2011.12.005>
- Shepherd, et al. (2005). Young people and healthy eating: a systematic review of research on barriers and facilitators. *Health Education Research*, 21(2), 239–257. <https://doi.org/10.1093/her/cyh060>
- Stead, M., McDermott, L., MacKintosh, A., & Adamson, A. (2011). Why healthy eating healthy is bad for young people's health: Identity, belonging and food. *Social Science and Medicine*, 72(7), 1131-1139. <https://doi.org/10.1016/j.socscimed.2010.12.029>
- Stevenson, C., Doherty, G., Barnett, J., Muldoon, OT., & Trew, K. (2007). Adolescents' views of food and eating: Identifying barriers to healthy eating. *Journal of Adolescence*, 30(3), 417-434. <https://doi.org/10.1016/j.adolescence.2006.04.005>
- Story, M., Neumark-Sztainer, D., & French, S. (2002). Individual and Environmental Influences on Adolescent Eating Behaviors. *Journal of the American Dietetic Association*, 102(3), 40–51. [https://doi.org/10.1016/S0002-8223\(02\)90421-9](https://doi.org/10.1016/S0002-8223(02)90421-9)
- Thompson, S., Ryan, T., Montgomery, K., Del Prado Lippman, A., Bender, K., & Ferguson, K. (2013). Perceptions of Resiliency and Coping: Homeless Young Adults Speak Out. *Youth and Society*,
- UK Government (2015). 'Benefits'. Retrieved from <https://www.gov.uk/browse/benefits>
- Webb, F. (2002). *Nutrition a Health Promotion Approach*. London, New York, New Dehli: Arnold.
- World Health Organization (WHO), (2014). Adolescent Nutrition: a neglected dimension. Retrieved from http://apps.who.int/adolescent/second-decade/files/1612_MNCAH_HWA_Executive_Summary.pdf
- Worth, N. (2009). Understanding youth transition as 'Becoming': Identity, time and futurity. *Geoforum*, 40(6), 1050–1060. <https://doi.org/10.1016/j.geoforum.2009.07.007>
- World Health Organization (WHO), (2012). A Framework for Implementing the Set of Recommendations on the Marketing of Foods and Non-alcoholic Beverages to Children. Retrieved from <http://www.who.int/dietphysicalactivity/MarketingFramework2012.pdf>