



Characterizing Cooking Habits and Confidence in Food Skills in Adults with 22q11.2DS

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Background: Shifts in eating habits in the past few decades have led to a decrease in food skills and a subsequent increase in intake of high energy, low nutrient density convenience foods. Greater intake of these convenience foods can lead to increases in obesity and chronic disease such as diabetes and cardiovascular disease. The prevalence of obesity in adults with 22q11.2 deletion syndrome (22q11.2DS) is higher than in the general population, and low food skills may be a correctable barrier to improved eating habits and achieving a healthy weight. **Methods:** We surveyed adults with 22q11.2DS about their perceived food skills and current food preparation habits to determine whether a food skills deficit exists in this population. This pilot study comprises 25 individuals with 22q11.2DS to date who have attended clinical nutrition assessments at a Clinic for adults with 22q11.2DS. Respondents were asked to rate their confidence in their cooking skills on a scale from 1 to 10, and identify who the primary cook was in their household. **Results:** Of 25 participants, the median rating for confidence in food skills was 6 out of 10 (range 2.5 to 10). 56% (n=14) of participants reported they were responsible for all their own cooking, while 16% (n=4) were supported by a parent or caregiver for food preparation and 28% (n=7) shared food preparation responsibilities with a parent, caregiver, spouse or roommate. Qualitative data showed that just four (16%) participants had formal cooking training either through school or work, and another single participant was anticipating training through school in the near future. **Conclusions:** Adults with 22q11.2DS may not have high confidence in their food skills, even though many are responsible at least partly for their own food preparation. Self-reporting of food skills may overestimate ability to perform specific food preparation tasks. A larger sample size and use of a formal, objective, validated food skills assessment will help confirm these initial findings. Nonetheless, the results of this pilot study will help to inform the development of a food skills and cooking program for adults with 22q11.2 DS.