



DietWise

SYSTEMIC CHANGES | EMPOWERED CITIZENS

Deliverable D5.5

The pilot implementation plan for LT

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<https://www.dietwise.eu>



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This work is dedicated to the memory of Justina Baršytė, author of the DietWise project idea, whose vision and commitment were invaluable to this project

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Abbreviations

Abbreviation	Full Form
AI	Artificial Intelligence
GDPR	General Data Protection Regulation
KPIs	Key Performance Indicators
MRP	MyRecipeWatch
RCA	Responsible Cooking Alliance
SM	Social media
WP	Work Package

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1. Introduction & Background

The DietWise project aims to design and implement innovative nutrition approaches and behaviour change interventions in order to assess the effectiveness of systemic solutions that promote both health and sustainability through structured pilot activities. To this end, two AI-enabled digital tools - MyRecipeWatch and Responsible Cooking Alliance (RCA) - are being developed and operationalized to support improved citizen decision-making within digital food environments, with a specific focus on recipe-related content. These tools will be implemented and evaluated across three pilot countries: Belgium, Greece, and Lithuania. This report presents the Lithuanian pilot, which is structured around three complementary components: (i) the MyRecipeWatch pilot with vulnerable citizens, (ii) the MyRecipeWatch dissemination pilot with the general public, and (iii) the Responsible Cooking Alliance (RCA) pilot with food influencers.

MyRecipeWatch is a mobile app designed to help users make healthier and more sustainable food choices. It analyzes user-submitted online recipes, suggests evidence-based ingredient substitutions, and provides personalized guidance based on demographic information and the Global Burden of Disease framework (Afshin et al., 2019). The MyRecipeWatch app implementation plan includes two separate testing streams, each targeting different groups of citizens and using different methods. The MyRecipeWatch pilot with vulnerable citizens will evaluate the effectiveness of the app in enhancing food literacy (operationalized by nutritional knowledge) and adherence to healthy and sustainable dietary habits in adolescents and senior citizens. The pilot will engage vulnerable citizens via cooking classes focused on cooking healthy and affordable meals. During these cooking classes, participants will also receive full onboarding on the use of the MyRecipeWatch app and support for integrating it into their daily lives. The MyRecipeWatch pilot will not be limited to the inclusion of vulnerable groups. In addition, the relevance and inclusiveness of the app will be validated and tested with diverse target audiences during MyRecipeWatch dissemination pilot to ensure broad accessibility and applicability across different user segments.

The Responsible Cooking Alliance (RCA) Pilot aims to support food influencers (e.g., dietitians, food bloggers, chefs) in aligning their recipe-related content with national dietary guidelines and sustainability principles. As key actors within the digital food environment, influencers exert significant influence on consumer food choices. However, the extent to which their content consistently reflects ethical, responsible, and evidence-based nutrition practices remains insufficiently understood. To address this gap, the RCA introduces a voluntary reporting and self-assessment framework designed to guide influencers in evaluating the alignment of their online recipe content with established dietary guidelines and sustainability criteria. The implementation of the pilot will be supported through a twofold capacity-building approach, comprising (i) an awareness-raising training to strengthen knowledge on healthy and sustainable dietary practices, and (ii) a technical onboarding process to facilitate effective use of the RCA tool. Together, these activities aim to enhance influencers' competencies, promote responsible content creation, and foster greater transparency and accountability within the digital food environment.

2. Overview & Aims

The pilots in Lithuania aim to evaluate the effectiveness of MyRecipeWatch and the RCA in combination with cooking classes and trainings. The Lithuanian pilot is structured around three complementary components, all contributing to the overarching objective of improving dietary behaviors and food literacy across diverse target groups, settings, and intervention pathways. The interventions focus on strengthening food-related knowledge, attitudes, and intentions to use the applications, with success measured by testing the tools with 100 vulnerable citizens and the effectiveness of the interventions.

Firstly, the MyRecipeWatch pilot with vulnerable citizens seeks to evaluate the effectiveness of the MyRecipeWatch application in promoting healthier and more sustainable dietary practices among vulnerable citizens. In Lithuania, we identified two essential vulnerable groups, namely adolescents and senior citizens. **Adolescents** are particularly vulnerable when it comes to healthy and sustainable cooking and eating for a mix of psychological, social, and environmental reasons. For instance, adolescents are highly sensitive to social norms. Eating habits become part of identity-building; what you eat can signal belonging. If peers favor fast food or meat-heavy diets, it's harder to adopt healthier or sustainable alternatives without feeling socially different. Also, they're in a transition phase still dependent on family for food availability, but increasingly making independent choices (school cafeterias, snacks, eating out). Moreover, they are often characterized by low food literacy and cooking skills and are more easily persuaded by social media content and marketing. **Senior citizens** face a different set of vulnerabilities than adolescents when it comes to healthy and sustainable cooking and eating. The issue is less about impulsivity and more about constraints: physical, social, and economic. For example, food practices are deeply ingrained over decades. Many seniors tend to stick to familiar recipes and routines, therefore becoming less aware of healthier options. Many older adults live on fixed incomes. As a result, sustainable or healthier foods are often perceived as more expensive or riskier to try. We will invite adolescents and senior citizens to participate in healthy cooking workshops introducing and familiarizing these vulnerable groups with MyRecipeWatch tool.

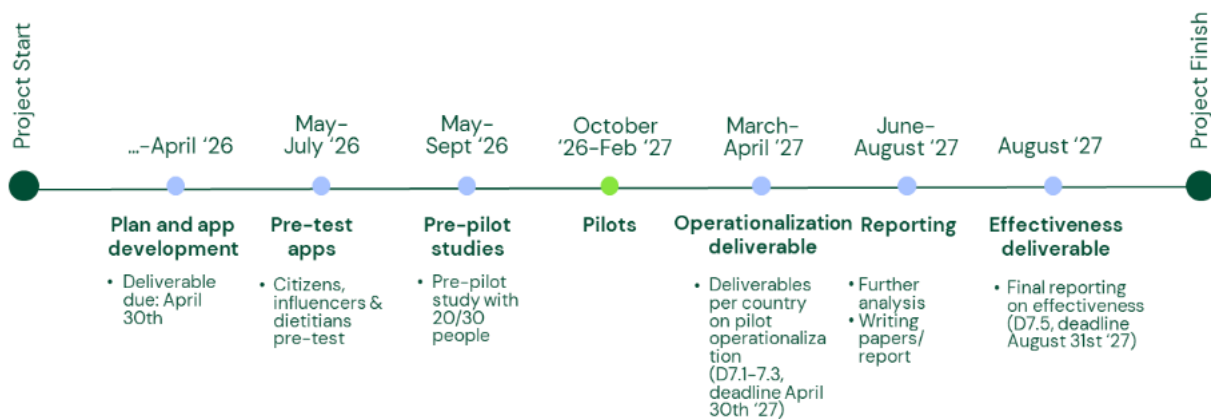
The MyRecipeWatch dissemination component aims to assess the attractiveness and usability of the application among the general population. This component will engage a broad audience to test uptake potential, with a target of at least 5,000 users interacting with the application across all pilot partners (Lithuania, Belgium, Greece). Furthermore, it will include the demonstration of compliance with suggested "corrections" of recipes using MyRecipeWatch, targeting an implementation rate of 15–30%, as well as the correction of at least 45 typical recipes by citizens.

Finally, the Responsible Cooking Alliance (RCA) Pilot is designed to evaluate whether a structured capacity-building programme, combined with a purpose-developed digital tool, can effectively equip food influencers with the competencies required to align their content with national dietary guidelines and sustainability principles. Key performance indicators include training of 15–20 influencers, a minimum 15% increase in knowledge following training, enrolment of 15–20 participants into the RCA, and at least a 20% improvement in self-reported confidence to apply the RCA tool in practice.

The timeline that will be followed for all pilots aligns with the one set under D5.1 (Figure 1). To ensure enough time for reporting, pilots' activities will conclude by April 2027 (M30). Pre-testing will take place between May–September 2026.

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Figure 1. Provisional pilot implementation timeline.



3. Scope & Pilot Description

This deliverable focuses on establishing the methodology, timeline and details of the pilot in Lithuania. The pilot implementation plan is based on SMART goals adapted for Lithuania, testing various behavioral interventions, and engaging relevant stakeholders. The Lithuanian pilot is designed to validate and demonstrate the MyRecipeWatch application and Responsible Cooking Alliance (RCA) across diverse stakeholder groups, delivery formats, and levels of intervention. The pilot implementation is organized into three complementary components:

- i. **MyRecipeWatch Pilot with Vulnerable Citizens**, including senior citizens and adolescents, delivered through cooking classes focused on preparing healthy and affordable meals. These sessions will integrate hands-on training on the use of the MyRecipeWatch application, ensuring participants gain the knowledge and capability to integrate the tool into their everyday food practices. To rigorously assess the effectiveness of the intervention, a structured evaluation framework will be employed. This will include pre- and post-intervention questionnaires designed to measure changes in participants' nutritional knowledge, motivation toward healthy eating, as well as the usability and perceived value of the MyRecipeWatch application. For the questionnaires, see Appendix. In addition, the evaluation will capture potential behavioral impacts, such as improvements in meal planning, food choices, and confidence in preparing healthy meals.
- ii. **MyRecipeWatch dissemination pilot** will include dissemination and engagement activities targeting the general public, aimed at increasing awareness, engagement, and active use of the MyRecipeWatch application. Stakeholder engagement will be achieved through a combination of organic outreach and targeted promotional channels ensuring broad reach and scalability of impact.
- iii. The Responsible Cooking Alliance (RCA) pilot will engage local food influencers such as food bloggers, nutritionists, and chefs in testing the RCA. Influencers who were involved in co-creation activities (WP4) will be encouraged to align their meal recipes with nutritional guidelines voluntarily and will also invite other influencers, such as bloggers and celebrity chefs to consider adapting the RCA initiative. To systematically evaluate the effectiveness of the intervention, a structured evaluation framework will be applied. This will include pre- and post-intervention questionnaires

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assessing changes in influencers' nutritional knowledge, motivation to adopt healthy eating behaviours, as well as the usability and perceived value of the RCA application.

In terms of roles and responsibilities, PHB will set up the pilots and contribute to the field work, and AdC will be responsible for the analysis and reporting of the results. The timeline for all pilot activities will run during M19-M30 of the project, as part of WP7 activities.

4. MyRecipeWatch Pilot

The MyRecipeWatch pilot is structured into two complementary components, each designed to reach distinct target groups and applying differentiated methodological approaches to ensure tailored engagement and effective implementation. The pilot activities targeting vulnerable populations will focus on adolescents and senior citizens. The effectiveness of the interventions will be evaluated by assessing changes in participants' behavior, attitudes, and food and cooking literacy. This assessment will enable the pilot to identify which interventions are most effective for specific population groups and under particular contexts.

For the second component, the Public Health Bureau (PHB) will utilize both organic and promotional communication channels to promote MyRecipeWatch among a broad segment of the general public. Effectiveness will be measured by the number of application downloads, in-app analytics, and the level of user engagement, including demonstrated compliance with the suggested recipe "corrections", the number of recipes modified, time in app per session .

4.1 Description of cooking classes

Separate cooking classes will be implemented for adolescents and older adults to better address their distinct needs, abilities, and learning contexts. A total of 5–6 cooking classes will be delivered for adolescents and 5–6 for seniors, with each group comprising approximately 10 participants. Each cooking class will last between 1.5 and 2 hours. The cooking classes will promote the preparation of traditional and familiar dishes while encouraging participants to replace less healthy ingredients with more nutritious alternatives, thereby supporting healthier dietary habits and increased awareness of balanced nutrition.

The intervention will be designed to replicate real-life usage scenarios of the MyRecipeWatch application, simulating home cooking situations in which users receive in-app recommendations and nutritional suggestions. During the cooking classes, participants will receive hands-on training in the use of MyRecipeWatch and will be asked to apply the tool independently over a one-week period following the sessions.

4.2 Research design

The MyRecipeWatch pilot, implemented by PHB will roll out the MyRecipeWatch app in Lithuania through tailored cooking classes focused on the preparation of healthy and affordable meals targeting vulnerable citizens, specifically adolescents and seniors. We follow a pre-experimental within-person design, whereby the same individuals participate in all parts of the research and we use pre-post measurements to analyze within-person changes.

The design proceeds as follows:

Recruitment. PHB will recruit participants who fulfil the eligibility criteria through their network. Adolescent participants will be recruited from Vilnius University. Older adults will be recruited through the PHB initiative “Social Recipe” participant network. Participants will be informed about the procedure and time required for this activity.

Baseline survey. During recruitment, participants will receive a request to fill out the baseline survey. We will measure socio-demographic variables, food literacy, healthy and sustainable eating motivations, healthy eating behavior, openness to use apps, and potential vulnerability variables that will align with pilot partners’ measurements. Moreover, we will measure **Applied food literacy** by including a task to improve the recipe by making it healthier and/or more sustainable.

Follow-up survey. Immediately following the cooking classes, participants will be asked to complete a follow-up survey assessing food literacy, healthy cooking intentions, ambivalence related to healthy cooking as well as their evaluation of the app. The effectiveness of the intervention will be evaluated by comparing changes in key dependent variables—such as food literacy, ambivalence, and motivation to cook healthily—between baseline and follow-up measures. In addition, the questionnaire will also include the task related to recipe improvement, just as in the baseline survey, but this time it will be a different but similar recipe. Next, we will compare the **Applied food literacy** composite task score between baseline and follow-up surveys. Finally, to evaluate the intervention, we will include close- and open-ended questions about participants’ perceptions of MyRecipeWatch, and the learning and knowledge outcomes of the cooking classes using MyRecipeWatch app. The results will inform the overall assessment of the intervention’s impact and its potential for broader implementation.

4.3 MyRecipeWatch Dissemination Pilot with General Public

The promotion of MyRecipeWatch will be implemented in parallel with the pilot activities targeting vulnerable populations. The promotional strategy will primarily rely on organic dissemination channels to ensure broad and sustainable engagement.

The Public Health Bureau (PHB) will leverage its established social media presence, including Facebook and Instagram, to encourage the general public to download and actively use the application. To enhance user engagement, a series of promotional initiatives incorporating incentive-based activities (e.g. prize draws or challenges) will be organized.

In addition, internal dissemination will be conducted through PHB staff members (approximately 300 employees), extending outreach to their families and social networks. Further organic promotion will be

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achieved through school communities where PHB has an established presence, thereby engaging parents and teachers.

Further organic promotion will be achieved through school communities where PHB has an established presence, thereby engaging parents and teachers.

During the pilot implementation, informational stands with QR codes will be installed in PHB office premises, providing easy access to the application and key information about its objectives, benefits, and functionality. All visitors attending exercise classes, lectures, and events, etc. at the PHB will be systematically encouraged to download and engage with the MyRecipeWatch application.

Additionally, outreach activities will be carried out during city events in Vilnius, where dedicated stands and trained staff will promote the MyRecipeWatch application and encourage attendees to download and test it.

This multi-channel organic promotion approach is designed to maximize reach, foster sustained engagement, and support meaningful uptake of the MyRecipeWatch application.

4.4 SMART Goals

The SMART goals guiding the MyRecipeWatch pilot implementation in Lithuania are presented below in Table 1.

Table 1: SMART Goals details for MyRecipeWatch Pilot.

Specific (S)	Measurable (M)	Achievable (A)	Relevant (R)	Time-bound (T)
Engage vulnerable citizens in testing MyRecipeWatch	Number of vulnerable participants trained (goal: ≥ 100).	Hands-on training of MyRecipeWatch delivered through cooking classes for adolescents and elderly.	KPI-35: Testing intervention for adolescents and elderly # of people reached >100 Support behavioral change and healthier dietary practices.	By M30
Improve knowledge among vulnerable citizens	Demonstration of improved knowledge through a baseline and follow-up questionnaire.	The questionnaire is consistent and targeted to MyRecipeWatch.	KPI-32*: Demonstration of improved food and cooking literacy of vulnerable people: up to 15% in all pilot countries	By M30

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<p>Engage general public in testing MyRecipeWatch</p>	<p>Number of MyRecipeWatch users (target: 5000 for all pilot countries, 1700 for Lithuania alone).</p>	<p>Active promotional campaign leveraging organic and promotional channels, complemented by direct face-to-face engagement strategies.</p>	<p>KPI-21: # of users testing possibilities of MyRecipeWatch app: 5000 Supports digital behavior change tools.</p>	<p>By M30</p>
<p>Enable sustained adoption of MyRecipeWatch</p>	<p>Demonstration of compliance with suggested 'corrections' up to 30%. 45 or more corrected recipes.</p>	<p>Expert-based tools and behavioral messages.</p>	<p>KPI-22*: Demonstration of compliance with suggested 'corrections' of recipes using MyRecipeWatch: 15-30% KPI-23*: Corrected # of typical recipes by citizens: 45 or more</p>	<p>By M30</p>
<p>Evaluate usability and effectiveness of MyRecipeWatch through user feedback and analytics</p>	<p>Collection of app usage data (downloads, active users, session duration). Completion of post-intervention feedback questionnaire.</p>	<p>Use of built-in app analytics and structured feedback tools. Integration of evaluation within intervention design.</p>	<p>KPI-21 and KPI-23: User uptake and engagement. Supports validation and scalability of digital solution</p>	<p>By M30</p>

**KPI target shared across pilots in GR, BE, LT.*

4.5 Target sample

The target sample for the MyRecipeWatch pilot with vulnerable citizens is presented in Table 2. The target sample for MyRecipeWatch dissemination pilot with general public is shared across all partners and aims to reach **5,000 users**.

Table 2: Target sample by population group – The MyRecipeWatch pilot with vulnerable citizens.

Population Group	Number
Adolescents	>50
Elderly	>50

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This sample size is based on PHB capacity to carry out the cooking classes, as one class usually involves not more than 8-10 participants.

4.6 Inclusion/Exclusion Criteria

Participants to join cooking classes for adolescents will be recruited based on the following criteria (Table 3).

Table 3: Inclusion and exclusion criteria for recruitment of adolescent participants – MyRecipeWatch pilot with vulnerable citizens.

Criteria	Inclusion	Exclusion
Age	18-22 years old	> 22 years.
Biological Gender	All	-
Student status	Registered Vilnius University (VU) student	Not a VU student
Health status	Has no severe allergies or dietary restrictions.	Has severe allergies or dietary restrictions.
Access to smartphone	Owens a smartphone compatible with the MyRecipeWatch.	Does not own a smartphone compatible with the MyRecipeWatch.
Willingness to download and test MyRecipeWatch application	Sign a consent form to test MyRecipeWatch and provide feedback.	Does not sign a commitment to test MyRecipeWatch and provide feedback.

Participants to join cooking classes for elderly will be recruited based on the following criteria (Table 4)

Table 4: Inclusion and exclusion criteria for recruitment of elderly participants– MyRecipeWatch pilot with vulnerable citizens.

Criteria	Inclusion Criteria	Exclusion Criteria
Age	>60	< 60
Biological Gender	All	-
Health status	Has no severe allergies or dietary restrictions.	Has severe allergies or dietary restrictions.
Access to smartphone	Owens a smartphone that is compatible with the MyRecipeWatch application.	Does not own a smartphone compatible with the MyRecipeWatch.
Willingness to download and test MyRecipeWatch application	Sign a commitment to test MyRecipeWatch individually for a week after the cooking classes and provide feedback.	Does not sign a commitment to test MyRecipeWatch and provide feedback.

Participants to test MyRecipeWatch will be recruited based on the following criteria (Table 5).

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Table 5: Inclusion and exclusion criteria for recruitment of general public – MyRecipeWatch dissemination pilot with general public.

Criteria	Inclusion Criteria	Exclusion Criteria
Age	>18	<18
Biological Gender	All	-
Access to smartphone	Owens a smartphone compatible with the MyRecipeWatch application.	Does not own a smartphone compatible with the MyRecipeWatch.
Willingness to participate	Willing to download and test the MyRecipeWatch application.	Not willing to download and test the MyRecipeWatch application.

4.7 Data Collection, Types & Measures

The questionnaire for vulnerable citizens will include the sections outlined in Table 6.

Table 6: List of data types, measurements and methods – MyRecipeWatch pilot with vulnerable citizens.

Data Category	Data Type/Variables	Measure	Collection mode
Socio-demographics and vulnerability dimensions	<ul style="list-style-type: none"> • Age • Gender • Country of residence • Ethnic background • Education and occupation • Household situation • Ethnic background • Household income 	Categorical/ordinal frequencies (e.g., N, %)	Questionnaire
Key outcome variables	<ul style="list-style-type: none"> • Nutrition literacy • Evaluation of the MyRecipeWatch (Perceived usefulness, necessity, and informativeness, Ease of use, Accuracy/ appropriateness of suggestions, Satisfaction, Likelihood to recommend) 	Likert Scale Ratings	Questionnaire
Other food-related questions	<ul style="list-style-type: none"> • Healthy eating motivation • Sustainable eating motivation • Ambivalence towards sustainable/ 	Likert Scale Ratings	Questionnaire

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	<p>healthy dietary change</p> <ul style="list-style-type: none"> • Intention to use recipe improvement tools • Frequency of home-cooking • Frequency of using recipes 		
ICT Usage Data	<ul style="list-style-type: none"> • App downloads • Unique users • Recipe entries • Acceptance occurrences • User time and activity (e.g., clicks on the info button) 	Frequencies and descriptive data	App data

Table 7: List of data types, measurements and methods – MyRecipeWatch dissemination pilot with general public.

Data Category	Data Type/Variables	Collection mode
Socio-demographics	<ul style="list-style-type: none"> • Country of residence 	App data
ICT Usage Data	<ul style="list-style-type: none"> • App downloads • Unique users • Recipe entries • Acceptance occurrences • User time and activity (e.g., clicks on the info button) 	App data

4.8 Evaluation & Analysis Plan

We will descriptively compare the means before and after using a t-test. Next, we will employ a linear mixed effect model to analyze the change, while being able to control for other characteristics and add interaction effects to see whether the effect is larger or smaller for certain people.

Table 8: List of relevant KPIs and evaluation details – MyRecipeWatch pilot

# KPI	Description	Evaluation Measure	Evidence
21*	5000 users testing MyRecipeWatch	# registered users or #downloads or #unique logins	MyRecipeWatch in-app metrics
22*	15-30% compliance with recommendations	# acceptance occurrences	MyRecipeWatch in-app metrics
23*	≥45 corrected recipes by citizens	# corrected recipes	MyRecipeWatch in-app metrics

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32*	15% improved food and cooking literacy	Improvement on KAP	Pre-post questionnaire %
35	Reach >100 people (vulnerable citizens)	# individuals attending workshops	Consent, Pre-post questionnaire submissions

**KPI target shared across pilots in GR, BE, LT*

5. Responsible Cooking Alliance pilot

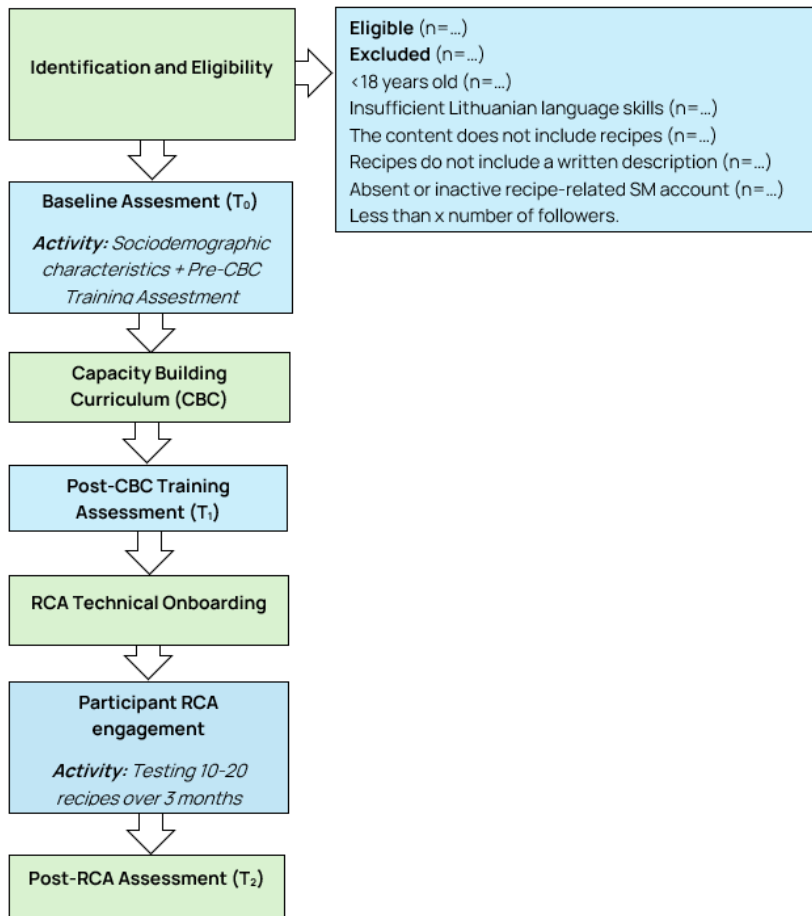
The Responsible Cooking Alliance (RCA) pilot is designed to engage local food influencers in aligning their recipe content with national nutrition guidelines. In this context, Task 5.5 defines the overarching methodological framework and evaluation protocol for the implementation of the pilot with influencers participating in the RCA. The objective is to assess the extent to which structured training interventions enhance influencers' knowledge and capacity to adapt their recipe-related content in line with national dietary recommendations and sustainable food practices. Given that the RCA pilot's relevant KPIs (i.e. 13, 15, 20 and 29) are shared across the Greek and Lithuanian influencer pilots, both countries will implement a harmonised pilot design developed by IHU to ensure methodological consistency and comparability of results.

5.1 Pilot Design and Methodology

The intervention comprises two complementary components: (i) a structured awareness training, namely SAFE's CBC (developed under Task 4.3, delivered in task 8.3) aimed at strengthening influencers' knowledge of food-based dietary guidelines, principles of sustainable food systems, and responsible nutrition-related communication; and (ii) an RCA Technical Onboarding, designed to familiarize participating food influencers with the interface, functionalities, and practical use of the RCA platform. Following completion of both training components, participants will engage with the RCA by testing between 10 and 20 recipes each over a three-month implementation period. In terms of evaluation, participants will complete (i) a pre- and post-intervention questionnaire to capture changes in knowledge and capacity, and (ii) a second questionnaire assessing the usability and overall performance of the RCA. A step-by-step overview of the food influencers' pilot in Lithuania is illustrated in Figure 2 below.

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Figure 2. RCA pilot with influencers implementation plan LT.



5.1.1 Nutrition and Sustainability Training (SAFE Capacity-Building Curriculum)

The SAFE CBC serves as the main training component for influencers, aiming to build their capacity to responsibly and effectively apply national nutrition guidelines when creating recipes and communicating about healthy and sustainable food practices. The training will be delivered through a self-paced online curriculum, organized into clear, sequential thematic modules and available throughout WP7. The content will be (i) adapted to the Lithuanian context, including national dietary guidelines, (ii) interactive, and (iii) supported by peer learning and practical use cases, including hands-on elements to encourage the application of knowledge in practice. In addition, the training is designed to encourage participants to engage with and contribute to the RCA initiative. Further details on the structure and modules are provided in Deliverable 4.3 “Capacity Building Curriculum”. Upon completion, participants will be expected to meet defined learning objectives to ensure alignment with the RCA framework and the evaluation tools used to assess knowledge improvement. Completion of the SAFE CBC is required before proceeding to the RCA Technical Onboarding.

5.1.2 Responsible Cooking Alliance Onboarding

Following completion of the SAFE CBC, participating influencers will proceed to the RCA Technical Onboarding, which constitutes the operational phase of the pilot and focuses on the practical application of the RCA in recipe-related content creation. This component is distinct from the SAFE CBC in both content and delivery format, with the objective of introducing the platform interface and ensuring its effective use in practice. The onboarding will be delivered through a synchronous online workshop, consisting of a facilitated session that guides participants through the step-by-step use of the RCA tool. The key operational parameters, core thematic areas, delivery approaches, and KPI alignment for both training components are outlined in Table 9 below.

Table 9: Structure and content of pilot training components.

Component	SAFE CBC	RCA Technical Onboarding
Objective	Enhance food influencers' core knowledge of national nutrition guidelines and sustainable food practices.	Strengthening practical application skills and effective use of the RCA tool.
Delivery mode	<ul style="list-style-type: none"> Asynchronous Self-paced Online modules 	<ul style="list-style-type: none"> Synchronous Expert-led Online workshop
Delivery platform	TBD	Microsoft Teams with screensharing for real-time RCA tool demos and queries.
Duration	Approx. 15-30 minutes (each module).	Approx. 60-90 minutes.
Content	1st module: Introduction to healthy and sustainable diets. 2nd module: Understanding national dietary guidelines. 3rd module: Sustainability in food choices. 4th module: Creating healthy and sustainable recipes. 5th module: Integrity principles of cooking advice provision. 6th module: The Responsible Cooking Alliance (RCA) initiative. 7th module: From learning to action.	<ul style="list-style-type: none"> RCA tool navigation (15 mins) Data entry (15 mins) Optimization (20 mins): Modification of recipes via RCA's suggestions/feedback Q&A (10-30 mins)
KPI relevance	KPI-13: Trained influencers: 15-20 or more KPI -15: Demonstration of improved knowledge of	KPI-13: Trained influencers: 15-20 or more KPI -15: Demonstration of improved knowledge of

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	influencers after training: at least 15%	influencers after training: at least 15%
Evaluation tool	Pre-/Post CBC Questionnaire	RCA Feedback Questionnaire

5.1.3 SMART Goals

The SMART goals guiding the RCA pilot with influencers implementation are outlined in Table 10 below. These goals will be assessed by collecting data from participants before and after the intervention to track the relevant KPIs, which will then be analyzed to evaluate the pilot's impact.

Table 10: SMART Goals for RCA pilot with influencers.

Specific (S)	Measurable (M)	Achievable (A)	Relevant (R)	Time-bound (T)
Engage food influencers with RCA	Number of influencers joining the RCA (target: 15-20)	Utilize established networks. Protocol completeness is confirmed with evaluation tools.	*KPI-13: Trained influencers: 15-20 or more. *KPI-20: # of influencers joining RCA: up to 12	By M30
Improve food influencers' knowledge of nutrition and sustainable food practices	Introduction of CBC Demonstration of increased influencer knowledge based on pre- and post-questionnaire results.	The questionnaire is consistent with the content of the CBC.	KPI-15: Demonstration of improved knowledge of influencers after training: at least 15%.	By M30
Evaluate the RCA through empirical testing and user feedback	Completion of RCA post training questionnaire	The questionnaire is concise and targeted to the RCA.	KPI 29: Influencers perceived readiness to use tools and interventions: +20%	By M30

**KPI target shared across pilots in GR and LT.*

5.1.4 Target sample size

A shared target across the Lithuania and Greece influencer pilots is the recruitment of **15-20** individual food influencers in total. Participants will be engaged in testing the RCA, with the aim of evaluating approximately 150-400 recipes in total.

Recruitment of food influencers during WP7 will be carried out using a phased, continuous approach, allowing recruitment and training activities to run in parallel. This approach helps reduce recruitment risks,

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provides operational flexibility, and ensures consistency across pilot groups. The exact number and timing of each recruitment phase will depend on recruitment progress, ensuring both feasibility and timely completion of training activities within the project timeline.

5.1.4 Inclusion/Exclusion criteria

Regarding the identification of food influencers, existing professional, academic, and project-related networks of consortium partners will be used, alongside targeted searches on major social media platforms (e.g., YouTube, Instagram), food blogs, and relevant websites. Food influencers who meet the predefined eligibility criteria (Table 11) will be contacted using publicly available professional contact details, such as email addresses or direct messages on professional social media accounts. Follow-up communication will be conducted after initial expressions of interest to confirm participation intent and clarify enrolment requirements.

Table 11: Inclusion/exclusion criteria for the influencers' recruitment.

Criteria	Inclusion Criteria	Exclusion Criteria
Age	≥ 18 years old	< 18 years old
Biological Gender	All	-
Language	Able to use app and complete surveys in Lithuanian language.	Insufficient Lithuanian language skills.
Content	Most of the content consists of recipes. Recipes have a written description included.	The content does not include recipes. Recipes do not include a written description.
Digital presence	Active digital presence (at least 1 post/month). Active food-related account on ≥1 social media platform. X number of followers.	Absence or inactive food-related account on social media platforms, less than x number of followers.

5.1.5 Data Collection, Types and Measures

Two questionnaires will be used in the food influencer pilot. Pre- / post-evaluation questionnaires will be employed immediately before the completion of the SAFE CBC (pre-evaluation questionnaire) and after (post-evaluation questionnaire) to evaluate improvement in nutrition- and sustainability-related knowledge, attitudes, and practices. Within these questionnaires, basic sociodemographic and professional characteristics of participating influencers will also be captured. Lastly, the RCA Feedback Questionnaire will be distributed upon completion of the RCA Technical Onboarding to assess usability, feasibility, acceptability, and perceived burden of using the RCA (Table 12).

Table 12: List of data types, measurements, and timing.

Data Category	Data Type/Variables	Measure	Timing

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Socio-demographics	<ul style="list-style-type: none"> • Age • Gender • Country of residence • Level of education • Professional background 	<ul style="list-style-type: none"> • Categorical/ordinal frequencies (e.g., N, %) 	<ul style="list-style-type: none"> • Baseline Assessment
Knowledge (Nutrition and Sustainability)	<ul style="list-style-type: none"> • Nutrition Literacy Scores (pre-/post- training) 	<ul style="list-style-type: none"> • Raw scores (discrete/continuous integers) 	<ul style="list-style-type: none"> • Baseline Assessment • Post-CBC Training Assessment
Feasibility, Usability, Acceptability, Perceived burden	<ul style="list-style-type: none"> • RCA Feedback Questionnaire 	<ul style="list-style-type: none"> • Likert Scale Ratings 	<ul style="list-style-type: none"> • RCA Assessment
ICT Usage Data	<ul style="list-style-type: none"> • Downloads/installations • Number of unique users • Recipe acceptance occurrences • Time in app, per session • Completion of CBC training module • Number and timestamp of logins • Number and descriptions of technical errors encountered 	<ul style="list-style-type: none"> • Frequencies and descriptive data 	<ul style="list-style-type: none"> • Throughout RCA pilot

5.1.6 Evaluation and Analysis plan

Pilot outcomes will be evaluated against the following list of relevant KPIs (Table 13).

Table 13: List of relevant KPIs and evaluation details – The RCA pilot with food influencers.

# KPI	KPI Description	Evaluation Measure	Evidence
(13 & 20) *	Number of trained influencers/ Number of influencers joining the RCA: 15-20	Completion of SAFE Capacity-Building Curriculum Completion of RCA Technical Training	RCA in-app metrics Pre- / post CBC training questionnaire RCA feedback questionnaire
15	Demonstration of improved knowledge of influencers after training - at least 15%	Change in nutrition and sustainability knowledge	Pre- / post- CBC Training Evaluation Questionnaire
28	Number of stakeholders involved: at least 5 per pilot.	# of unique stakeholder organizations or entities actively engaged with pilot design, training, or evaluation activities.	RCA in-app metrics

29*	Influencers perceived readiness to use tools and interventions: +20%	Confidence to use RCA	Evaluation of RCA via the Post-RCA Feedback Questionnaire
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**KPIs 13, 20 and 29 are shared between the Greek and Lithuanian Influencers' pilot.*

KPI 28 is shared across three Lithuanian pilots.

Analysis plan

Data analysis will be conducted in line with the objectives of this deliverable, and will be reported under deliverables 7.2 and 7.5. Baseline data obtained through questionnaires will be summarized using descriptive statistics to characterize the study sample. Categorical variables (e.g., sex, education level, employment status) will be presented as frequencies and corresponding percentages. Continuous variables (e.g., age, scale scores) will be reported as means and standard deviations (SD) where normally distributed, or as medians and interquartile ranges (IQR) where distributional assumptions are not met. Missing data patterns will be reported.

Knowledge acquisition will be assessed comparing identical items administered in the pre- and post-questionnaire. For each participant, item score responses will be calculated. Descriptive statistics (mean ± SD or median [IQR], depending on distribution) will be used to summarize pre- and post-training scores. Exploratory analyses will assess whether baseline characteristics influence knowledge improvement.

Regarding the evaluation of feasibility, usability, acceptability, and perceived burden of using the RCA, user-related parameters will be treated as ordinal data (using frequencies). In addition, ICT usage data collected via in-app metrics will be summarized descriptively to explore engagement and technical performance.

6. Stakeholder engagement

To maximize reach and recruitment efforts for Lithuanian pilot components, PHB will engage relevant stakeholders of their target populations respectively. Examples of such stakeholders include but are not limited to the list presented in Table 14 below.

Table 14: List of relevant stakeholders per pilot component in Lithuania.

Pilot	Stakeholders	Network/Source
MyRecipeWatch pilot with vulnerable citizens	<ul style="list-style-type: none"> • Adolescents, 1st-4th year university students • Seniors 	<ul style="list-style-type: none"> • Vilnius University students • "Social recipe" participants
MyRecipeWatch dissemination pilot with general public	<ul style="list-style-type: none"> • General public 	<ul style="list-style-type: none"> • PHB social media audience • PHB employee network • School communities (teachers and parents) where PHB has an established presence • Residents of Vilnius • PHB visitors and services' recipients

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<p>RCA pilot with influencers</p>	<ul style="list-style-type: none"> • Dietitians active on SM • Nutritionists active on SM • Food bloggers active on SM 	<ul style="list-style-type: none"> • Public digital platforms like SM, food blogs, websites • Existing professional/academic networks
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7. Data Management plan

7.1 Data protection

All data collected within Task 5.5 will be treated in alignment with the General Data Protection Regulation (GDPR), using minimal and non-sensitive personal data (e.g., age, gender, country of residence), targeted to our evaluation objectives. All types of questionnaires will be subjected to pseudonymization, and no identifiable personal data will be reported in the final analysis. Raw data accessibility will be restrained solely to authorized project partners. A detailed plan including data management and protection, is outlined in D1.1 and/or D1.2.

All research participants will be fully informed about the purpose and nature of the study, as well as any potential risks and benefits. They will have the opportunity to ask questions and receive clear answers in an accessible language and format. Participation is voluntary, and participants may withdraw at any time without consequence. Informed consent will be obtained from all participants prior to any data collection

8. Risks and Limitations

Potential risks that could affect pilot implementation are relevant to recruitment targets and intervention design and are presented in Table 15 below.

Table 15: Risks and limitations and relevant pilot impact.

#	Category	Detailed risk	Pilot Impact	Mitigation Measure	Owner	Probability
1	Technical	App functionality and readiness	Delay of studies; usability	Proactive planning, together with an extended implementation period (Month 19 to Month 34), helps mitigate potential delays. As a last-resort back-up plan, the pilots can focus on the workshops and training rather than the tools.	ICCS	Medium
2	Recruitment	Low engagement in the training.	KPI-13, KPI-15, KPI-20 not met	The training materials will be	PHB	High

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				developed in line with stakeholders' needs to minimize resistance. In addition, engaging and interactive learning methods will be applied, including case-based teaching and learning-by-doing approaches. (Paid) promotion.		
3	Recruitment	Low reach and limited downloads of MyRecipeWatch.	KPI-21 not met	Active promotional campaign leveraging organic and promotional channels, complemented by direct face-to-face engagement strategies.	PHB	High
4	Recruitment	Limited willingness of influencers to engage with and support the initiative.	KPI-13, KPI-15 not met	Provide monetary incentives for influencer engagement.	PHB	High
5	Retention	High participant dropout rates.	Insufficient usage data, and limited evidence of behavior change or knowledge improvement.	One-to-one outreach and adaptation to individual availability based on scheduling constraints. Monetary incentives	PHB	High
6	Vulnerable groups (seniors)	Interested only in participating in cooking classes and not testing the MyRecipeWatch	Limited impact of MyRecipeWatch, with findings that may not be fully generalizable to the target population.	Pre-session one-to-one training to clarify the objectives and purpose of the cooking classes.	PHB	High

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7	GDPR-compliance	Unauthorized or accidental access, disclosure, or misuse of sensitive personal data during recruitment and/or monitoring activities.		Obtaining informed consent from all participants, implementing robust data security measures, and ensuring the confidentiality and privacy of participant data.	VU, PHB	Low
8	Algorithmic bias	Proposed substitutions that are culturally inappropriate, impractical, or not relevant to the recipe.	Reduced trust and increased dropout rates.	Controlled development based on expert-curated dataset. Manual review of commonly generated AI substitutions prior to full-scale rollout.	ICCS	Medium
9	Confounding	The non-randomized, within-person design does not allow the testing of causal effects.	Reliability and interpretation of effectiveness results.	Being transparent about the limitations of the design and interpretation, controlling for participant characteristics	VU, PHB	High

9. Ethics

A separate ethics submission will be filed for each pilot component by the respective responsible partner at Vilnius University.

10. Reporting & Dissemination

Results and outputs will be summarized and presented as part of the public Deliverable D7.3 – “The pilot operationalization in Lithuania”.

11. ANNEX

Pilot Questionnaire

Codes:

[V] – vulnerable citizens.

[INF] – influencers

[UNI] – universal/both target groups

Following the pre-testing phase, the questionnaire may undergo minor amendments, in order to incorporate feedback and ensure clarity, relevance, and methodological robustness prior to its final implementation.

A more complete information sheet and consent form will be added at a later stage.

Dear respondent,

We invite you to participate in this survey. Our aim is to assess the effectiveness of MyRecipeWatch/Responsible Cooking Alliance (RCA) across diverse user groups participating in the interventions, with an emphasis on promoting sustainable cooking practices.

If you agree to participate in this survey, please answer the questions. This survey is anonymous. The survey results will be published in aggregated form, preventing any possibility of identifying the participants of this study.

Thank you for your time and contribution to this research.

1. Date of completion: [UNI]

DD/MM/YY

2. Please indicate your biological sex [UNI]

- Male
- Female
- Prefer not to say

3. Please indicate your age [UNI]

4. What is your current living situation? [V]

- I live alone

- I live with roommates
- I live with a partner
- I live with children
- I live with a partner and children
- Other
- Prefer not to say

5. Please select the highest level of education you have achieved to date: [V]

6.

- Less than primary education
- Primary education
- Secondary education
- Post-secondary non-tertiary education (vocational)
- Bachelor's Degree
- Master's Degree
- Doctoral Degree

7. Which of the following best describes your family structure? [V]

- Two-parent family
- Single-parent family
- Blended family (step-parents and/or step-siblings)
- Extended family (parents and children living with grandparents or other relatives)
- Other (please specify)

8. How many adults (aged 18 or over) live in your house (yourself included)? [V]

- 1 (I live alone)
- 2
- 3
- 4
- 5 or more

9. How many children do you have at home? [V]

- 0
- 1
- 2
- 3
- 4
- 5 or more

10. Professional background [INF]

- Student
- Self-taught/Food content creator (e.g., food blogger)
- Nutrition-related background (e.g., dietitian, nutritionist)

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- Cooking-related background (e.g., chef, culinary trainer/book author)
- Media/communication-related background (e.g., journalism, marketing)
- Other (please specify: ...)

11. Please select the option which best describes your occupation: [V]

- Student
- Student working part-time
- Student working full-time
- Self-employed professional (i.e., physician, lawyer, accountant, etc.)
- Employed professional (i.e., physician, lawyer, accountant, etc.)
- Manual labor occupation
- Housewife/househusband
- Retired (with previous occupation)
- Unemployed
- Other [please specify]

12. What is your ethnic background? Please indicate the cultural group with which you most closely identify. [V]

- Lithuanian
- Polish
- Russian
- Belarusian
- Multiple ethnic groups (please specify)
- Other (please specify)

- Prefer not to disclose

13. Average monthly net household income (after taxes and deductions)? [V]

- Under 500 EUR
- 500 EUR to 1500 EUR
- 1501 EUR to 2500 EUR
- 2501 EUR to 3500 EUR
- 3501 EUR to 4500 EUR
- 4501 EUR to 5500 EUR
- 5501 EUR or above
- Prefer not to say

14. How motivated are you to cook healthy meals? 1= not motivated at all; 7 = very motivated

15. How motivated are you to cook environmentally friendly (i.e., energy-efficient cooking methods, products with low emissions, reducing food waste)? 1= not motivated at all; 7 = very motivated

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16. Food literacy (nutritional knowledge) [UNI]

According to the national dietary guidelines, what is the ideal intake level for the following foods? Choose one out of the following options: Encourage (eat more): This food is good for your health; national guidelines say most people should increase their intake.

- Moderate (maintain/balance): This food is neutral or has a specific limit; it should be eaten in balance, not excessively.
- Limit (eat less): This food is associated with disease risk; national guidelines say intake should be kept as low as possible.
- I'm not sure: I don't know the current recommendation for this food.

Food category	Encourage (increase)	Moderate (balance)	Limit (reduce)	I'm not sure
Whole grains				
Vegetables				
Oily fish (instead of omega-3)				
Vegetable oil (instead of omega-6)				
Nuts & seeds				
Milk (and dairy)				
Legumes				
Fruits				
Fiber				
Calcium				
Fried foods & pastries (instead of TFA)				
Sugar sweetened beverages				
Salt				
Red meat				
Processed meat				

17. Cooking-related Ambivalence [UNI]

Please indicate the extent to which the following words describe your feelings toward changing your cooking habits/content to become/include healthier habits/options. (5-point scale, where 0 means „don't harbor this feeling“, 1 means „slightly“ and 5 „extremely“)

- Conflicted
- Mixed
- Indecision

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Please indicate the extent to which the following words describe your feelings toward changing your cooking habits/content to become/include healthier habits/options. (5-point scale, where 0 means „don't harbor this feeling“, 1 means „slightly“ and 5 „extremely“)

- Conflicted
- Mixed
- Indecision

18. Intention to use cooking apps and tools [UNI]

Imagine that you are about to cook dinner at home/Imagine you are in the process of deciding what to cook for your next content post, and you are searching for a recipe on the internet.

1. Would you be willing to use a novel online recommendations tool that can suggest you how to make your recipes you find/upload online healthier? (1 = not willing at all, 5 = very much willing)
2. Would you be willing to use a novel online recommendations tool that can suggest you how to make your recipes you find/upload online more environmentally friendly (i.e., energy-efficient cooking methods, reducing food waste)? (1 = not willing at all, 5 = very much willing)

19. Dietary Habits (7-point scale; Never/Less than once per month; 1-3 times/months; 1 time/week; 2 times/week; 3-4 times/week; 5-6 times/week; 1 time/week; ≥ 2 times/week)[V]

Grains
1. White bread, white rusks, breadsticks, etc.
2. Whole wheat bread, rusks, etc.
3. Breakfast cereals or granola bars
4. Rice, pasta, orzo, lasagna, and other white flour pasta
5. Brown rice, whole-wheat pasta
6. Potatoes
Raw Vegetables
7. Tomato, carrot, pepper, pumpkin
8. Lettuce, cabbage, spinach, arugula
9. Onion, leek, garlic
Boiled Vegetables
10. Broccoli, cauliflower, zucchini
11. Greens, spinach, leek, celery, etc.
12. Peas, green beans, okra, artichokes
Fruits
13. Orange, mandarin
14. Apple, pear
15. Banana
16. Other winter fruit (e.g., kiwi, pomegranate)
17. Summer fruit (e.g., watermelon, peach, cherries)
18. Dried fruit (e.g., raisins, plums, etc.)

Legumes & Nuts
19. Legumes (e.g., lentils, beans, chickpeas)
20. Olives
21. Nuts, seeds
Dairy Products
22. Milk, full fat
23. Milk, low fat
24. Yoghurt, full fat
25. Yoghurt, low fat
26. Chocolate milk
27. Yellow cheese
28. Yellow cheese
29. Cream cheese
30. Feta cheese
31. No-fat or low-fat cheese
Meat, Egg, & Fish
32. Egg
33. Red meat (beef, pork, lamb, goat, etc.)
34. Chicken, turkey
35. Cold cuts (sausage, turkey, ham, bacon, sausage)
36. Fish and seafood
Sweets and Snacks
37. Sweets (cake, cookies, croissants, wafers, ice cream, chocolate, etc.)
38. Honey, jam, sugar
39. Chips, popcorn, cheese puffs etc.
Non-alcoholic beverages
40. Coffee
41. Fresh fruit juice
42. Packaged fruit juice
43. Soda
44. Energy drinks (e.g., Powerade, Gatorade, etc.)

20. When preparing food and cooking, do you usually use/use (tick as many answers as applicable): [V]

- Olive Oil
- Seed Oil
- Margarine
- [utter

Evaluation of the MyRecipeWatch (to be integrated in the post-intervention questionnaire) [V]

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1. How often did you use MyRecipeWatch in the past two weeks?
 - Daily
 - 3–6 times per week
 - 1–2 times per week
 - Less than once a week
 - Never
2. How easy was it to navigate and use MyRecipeWatch? (7-point scale; “very easy” to “very difficult”)
3. How useful was MyRecipeWatch in helping you identify healthier recipes? (7-point scale; “very useful” to “no useful at all”)
4. Did MyRecipeWatch help you make healthier food choices? (7-point scale; “very useful” to “no useful at all”)
5. How easy was it to incorporate MyRecipeWatch suggestions into your daily cooking? (7-point scale; “very easy” to “very difficult”)
6. How logical did you find the suggestions provided by MyRecipeWatch? (7-point scale; “very logical” to “no useful at all”)
7. Overall, how satisfied are you with MyRecipeWatch? (7-point scale; “very satisfied” to “no satisfied at all”)
8. How likely are you to use MyRecipeWatch in the future? (1= not likely at all; 7 = very likely)
9. How much would you like to share information about MyRecipeWatch with your friends? (1= not at all; 7= quite a bit)
10. How often do you eat home-cooked meals?
 - Never
 - Rarely (less than once a month)
 - Occasionally (a few times a month)
 - About once a week
 - Several times a week
 - Almost everyday
 - Everyday
11. How often do you use recipes when cooking meals?
 - Never
 - Rarely (less than once a month)
 - Occasionally (a few times a month)
 - About once a week
 - Several times a week
 - Almost everyday
 - Everyday
12. To what extent do you find the MyRecipeWatch recommendations for you personally: (1 = not at all; 7 very much)
 - Useful
 - Needed
 - Informative

Pre- and Post-Training Questionnaire

Evaluation of the Responsible Cooking Alliance (RCA) (to be integrated in the post-intervention questionnaire) [INF]

1. How often did you use Responsible Cooking Alliance in the past two weeks?
 - Daily
 - 3-6 times per week
 - 1-2 times per week
 - Less than once a week
 - Never
2. How easy was it to navigate and use Responsible Cooking Alliance? (7-point scale; “very easy” to “very difficult”)
3. How useful was Responsible Cooking Alliance in helping you create healthier recipes? (7-point scale; “very useful” to “no useful at all”)
4. How useful was Responsible Cooking Alliance in helping you create more environmentally friendly recipes? (7-point scale; “very useful” to “no useful at all”)
5. How easy was it to incorporate Responsible Cooking Alliance suggestions into your existing content style and values? (7-point scale; “very easy” to “very difficult”)
6. How logical did you find the suggestions provided by Responsible Cooking Alliance? (7-point scale; “very logical” to “no logical at all”)
7. Overall, how satisfied are you with Responsible Cooking Alliance? (7-point scale; “very satisfied” to “no satisfied at all”)
8. How confident do you feel in your ability to use Responsible Cooking Alliance in your recipe-related content creation? 1= not confident at all; 7 = very confident
9. How likely are you to use Responsible Cooking Alliance in the future? 1= not likely at all; 7 = very likely

Evaluation of the nutrition and sustainability education program (to be integrated in the post-intervention questionnaire) [INF]

10. How easy was it to understand and follow the information provided during the education program? (7-point scale; “very easy” to “very difficult”)
11. Did the education help you improve your nutrition knowledge? (7-point scale; “a lot” to “not at all”)
12. Did the education help you improve your sustainability knowledge? (7-point scale; “a lot” to “not at all”)
13. How easy was it to apply the education content into your existing content style and values? (7-point scale; “very easy” to “very difficult”)
14. How important is the healthiness aspect in the development of the content you share with your followers? (1= not important at all; 7 = very important)
15. How important is the sustainability aspect in the development of the content you share with your followers? (1= not important at all; 7 = very important)
16. How motivated are you to cook environmentally friendly after taking this education program? (1= not motivated at all; 7 = very motivated)
17. Overall, how satisfied are you with the nutrition education program? (7-point scale; “very satisfied” to “no satisfied at all”)

