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## **Meat thermometer usage amongst European and North American consumers: A scoping review**

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## Abstract

Improper cooking of meat contributes to many foodborne illnesses worldwide. The use of meat thermometers during cooking is recommended by food safety authorities in North America, but not yet in Europe. This scoping review investigated meat thermometer usage trends, consumers' barriers and facilitators, and usage-enhancing interventions, with the aim of informing potential policy changes as necessary towards enhancing meat thermometers usage. The study revealed that Europe is far behind North America in meat thermometer research and consumer use. The study results highlighted the increased compliance among mid-aged and higher socio-economic consumer groups. A considerable percentage of people do not use a meat thermometer, despite owning one and knowing its importance. Barriers to meat thermometer usage among consumers included: cooking habits, non-practicality, and the influence of society and media, whereas responsibility to dependents and enhancing meat quality were strong facilitators. Intervention studies showed that knowledge gain does not necessarily translate to behavior change, unless consumers' barriers and facilitators are addressed; hence behavioral theory-based interventions were most effective. The review concludes with recommendations for food safety authorities, starting with filling the research gap to understand consumers' attitudes and behaviors, followed by implementation and scaling-up of evidence-based interventions, associated with cost-effectiveness studies.

**Keywords:** proper cooking; foodborne illness; intervention; consumers' attitudes; barriers

# 1. Introduction

## 1.1. Foodborne illnesses and outbreaks from undercooked meat

Foodborne illness is a major public health problem, which affected 10% of the world population in 2010, and resulted in almost 420,000 deaths (World Health Organization, 2015). The problem results in about 23 million illnesses in Europe, among which one million cases occur in the UK, resulting in around 500 deaths annually (Food Standards Agency, 2017). About one sixth of Americans, one eighth of Canadians, and one quarter of Australians are affected by foodborne diseases annually (Santacruz, 2016).

Foodborne illnesses are usually linked to improper food-handling practices, such as inadequate cooking, improper storage, and cross-contamination. The top causes of foodborne illnesses in developed countries include *Campylobacter*, *Salmonella*, *norovirus*, *Listeria* and *Escherichia coli* O157:H7 (*E.coli*). *Salmonella*, *Listeria*, and *E. coli* O157:H7 are mainly found in raw or undercooked meat, including beef, poultry, lamb and pork, while *Campylobacter* is mainly common in poultry products (National Health Services, 2018). Many *Salmonella* and *Campylobacter* outbreaks have been linked to the consumption of undercooked poultry products, whereas consumption of undercooked ground (minced) beef or pork has been associated with many *E. coli* O157:H7 outbreaks (Food Safety Authority of Ireland, 2017a; Moawad et al., 2017; Huusko et al., 2017).

## 1.2. Proper cooking procedures and current guidelines

Cooking meat to a safe temperature is an important prophylactic measure to eliminate harmful pathogens (Maughan, 2015). The safe cooking temperature depends on meat type. The Food Standards Agency (FSA) (2018), and Food Safety Authority of Ireland (FSAI) (2017b)

1 recommend cooking meat until the core temperature  $\geq 75^{\circ}\text{C}$ . On the other hand, the New South  
2 Wales (NSW) Food Authority (2018), the US Department of Agriculture (USDA)- Food Safety  
3 and Inspection Service (FSIS) (2015a), and Government of Canada (2015) have issued charts  
4 for safe minimum cooking temperatures for different meat types (Table 1).

5 Food safety authorities in Europe recommend cooking meat products until the fulfilment of  
6 three visual signs, namely; meat is steaming hot, no longer pink, and juices are running clear  
7 (Food Standards Agency, 2018, Food Safety Authority of Ireland, 2017a). However, research  
8 findings have revealed that these visual cues are not reliable indicators of safety (Bergsma,  
9 Fischer, Van Asselt, Zwietering, and De Jong, 2007; Maughan, 2015)

### 10 *1.3. Meat thermometers*

11 The usage of meat thermometers for identification of the safe cooking temperature has been  
12 ranked by food safety experts as of primary importance, compared to other safe food-handling  
13 behaviors (Lacroix, Li, and Powell, 2003). Therefore, the food safety authorities in the US,  
14 Canada and Australia urge catering and domestic consumers to regularly use meat  
15 thermometers for accurate measurement of cooking temperatures (Gouvernement of Canada,  
16 2015; NSW Food Authority, 2018; FSIS, 2015a). There are different commercially available  
17 types of meat thermometers, which vary in terms of accuracy, speed, level of technology,  
18 insertion method and price (FSIS, 2011). These include digital, dial, and liquid-filled  
19 thermometers. Of these types, food safety experts advise consumers to use digital ones, given  
20 their accuracy, ease of usage, and instant read provision (Gouvernement of Canada, 2015).

21 Proper usage of thermometers is essential to ensure accurate measurement of meat temperature.  
22 Generally, different food safety authorities recommend the thermometer tip to be inserted in  
23 the centre of the thickest part of meat, and waiting until a stable temperature is reached (FSIS,

1 2011). Core temperature should be measured in several locations, particularly with irregularly  
2 shaped cuts of meat. Meat thermometer probes should be properly cleaned before and after each  
3 use in order to prevent potential cross-contamination (FSIS, 2011).

4 The aim of this scoping review of scholarly and grey literature was to map what is known from  
5 research about subjects' knowledge, attitudes, and behaviors towards the usage of meat  
6 thermometers, to inform recommendations for future research and policy changes as necessary  
7 for enhancing meat thermometer usage. To the authors' knowledge, this is the first review  
8 focusing on meat thermometers usage across the developed countries. The objectives of this  
9 review were (1) to investigate the perceptions and trends in meat thermometers usage among  
10 consumers, (2) to analyze the barriers and facilitators to meat thermometers usage, and (3) to  
11 explore previously conducted interventions aiming at enhancing meat thermometer usage.

## 12 **2. Methodology**

13 Given the broad nature of the study topic, a scoping review was conducted in order to categorize  
14 existing literature in terms of its nature, features and volume. In contrast, systemic review is  
15 designed to collect empirical evidence and answer precisely defined, narrow questions. Both  
16 methodologies employ systematic search strategies. The scoping review plan of this study  
17 followed the six-stage methodological framework developed by Arksey and O'Malley (2005)  
18 as follows:

### 19 *2.1. Identifying the research question*

20 A broad research question was set to scope the literature: *What is known from literature about*  
21 *the use of meat thermometers to decrease the incidence of foodborne illnesses arising from*  
22 *undercooked meat?*

## 2.2. Identification of relevant studies

A flexible comprehensive search strategy was developed and implemented to locate any relevant literature. The key concepts were identified in the research question, namely, *meat thermometers, foodborne illnesses and undercooked meat*. A total of 25 search terms were operated through two different combinations using Boolean operators ‘AND’ and ‘OR’. The search procedure included various automated and manual search methods to minimize the chance of missing pertinent information.

The automated search was implemented in four databases, namely, Medline, Embase, Scopus and ProQuest, using the selected search terms. The search process had no date limits in order not to exclude any potentially relevant studies. The search strategy also included bibliographies of potential search results, physically examining journals, researching key authors, theses, and technical reports provided by both governmental and non-governmental organizations.

## 2.3. Study selection

Only English articles were included in the review. Studies were included, if they addressed consumers’ meat cooking behaviors, trends of meat thermometer ownership and usage, as well as barriers and facilitators to the usage of meat thermometers. The review also included studies concerned with interventions enhancing meat thermometer usage. The following types of papers were excluded: (1) studies addressing microbiological strains of foodborne pathogens; (2) articles concerned with general food safety practices, and/or proper storage conditions.

Included studies were selected from among the search results in a two-step process, where the titles and abstracts of the search results were first subjected to preliminary screening against the inclusion and exclusion criteria by one author. When there was uncertainty about the eligibility

1 for inclusion, the records were saved for further assessment by the other authors in order to  
2 minimize the possibility of selection bias. The remaining articles were then re-assessed by  
3 reviewing their full text, together with the articles identified through bibliographies and manual  
4 web search (Fig. 1). The included sources were cited using reference manager software and  
5 duplicates were removed (Mendeley Desktop v1.19.3; Mendeley Ltd, UK).

#### 6 *2.4. Charting the data*

7 Data were extracted in standardized forms developed in Microsoft Excel. These included  
8 authorship, study title, study objective/aim, study design, study subjects and major findings.

#### 9 *2.5. Collating, summarizing and reporting of results*

10 The analysis phase was divided into several steps in order to classify complex data in a way  
11 that provided answers to the research question, as well as link findings to overall research  
12 purpose and objectives. Firstly, the data in the extraction form was synthesized descriptively  
13 through numerical summary in order to map the different aspects in the literature as outlined in  
14 the key question. Secondly, the data were classified into themes. Finally, the implications of  
15 results were considered within a broader context to ensure that the results will have practical  
16 implications for future research, policy and practice.

#### 17 *2.6. Consultation exercise*

18 The authors considered consultation with *safefood*; a governmental administration of food  
19 safety in Ireland (Safefood 2018), through a face-to-face meeting between two authors and  
20 *safefood* representative in order to inform and validate the review findings (Tricco et al., 2016).

21 The meeting included presentation of the study aim, objectives, research methodology, and the  
22 main themes of the extracted results, followed by mutual discussions and recommendations

1 from all participants. The outcomes of the consultation exercise were taken into account during  
2 further progress of the study.

### 3 **3. Results**

4 A total of 1009 potential articles were initially retrieved from the searched databases, with an  
5 additional 35 sourced from bibliographies and web searches. These were eventually reduced to  
6 75 studies based on the exclusion criteria (Fig. 1). The majority of these studies were conducted  
7 in North America (70% in the US and 13% in Canada), while the remainder were conducted in  
8 the UK, Ireland, the Netherlands, Austria and Malaysia. The median year of publication was  
9 2009 (range 1991- 2018). The three predominant study designs were statistical survey (40%),  
10 combined survey and observation (19%) and uncontrolled before-after study (16%). The data  
11 were classified into three major themes: perceptions and trends in the usage of meat  
12 thermometers; barriers versus facilitators to meat thermometer usage; and interventions aiming  
13 at enhancing meat thermometers usage.

#### 14 *Perceptions and trends in the usage of meat thermometers*

15 This theme included 56 studies, which addressed safe food-handling knowledge and behaviors  
16 among consumers, with a special focus on the trends in meat thermometers ownership and  
17 usage. The studies were classified according to the country of origin: US (n=38), Canada (n=7),  
18 and Europe (n=11).

#### 19 *3.1.1. Perceptions and trends in the US*

##### 20 *3.1.1.1. The knowledge-compliance and ownership-usage gaps*

21 Studies revealed low adherence to the usage of meat thermometers, with the presence of a  
22 significant ‘knowledge-compliance’ gap (Table 2). Food safety trained store managers were



1 found to lack essential knowledge about food safety, including the safe temperature of different  
2 meat types (Rhynard, 2001; Burch and Sawyer, 1991). Direct observation also highlighted a  
3 significant meat thermometer ‘ownership-usage’ gap (Table 2). In the majority of the studies,  
4 participants relied on sensory cues, such as meat color and texture, clarity of juices, poking with  
5 a utensil, as well as tasting to check doneness of meat (Koepl, 1998; Teague and Anderson,  
6 1995). Shapiro, Porticella, Jiang, and Gravani et al. (2011) designed a questionnaire to measure  
7 participants’ intentions to use a meat thermometer based on the theory of planned behavior  
8 (TPB), which proposes that individuals’ intention to perform a certain behaviour is an effective  
9 predictor of the actual behavior. The study revealed that nearly half of respondents disagreed  
10 that they were likely to use one. The transtheoretical model (TTM) suggests that any behavior  
11 change process progresses through five stages of change (SOC) namely; precontemplation,  
12 contemplation, preparation, action, and maintenance, which can be described as not ready,  
13 getting ready, ready, current action, and monitoring, respectively (McCurdy et al., 2006). Based  
14 on TTM, Takeuchi, Edlefsen, McCurdy, and Hillers (2006) and McCurdy et al. (2006) designed  
15 questionnaires, with the aim assessing consumers’ readiness to adopt meat thermometers usage.  
16 Both studies reported that the usage of meat thermometer was a new experience for the majority  
17 of participants.

18 Despite these low levels of meat thermometers usage, there are indications of positive shifts  
19 over time. Lando and Chen (2012) reported a significant increase in meat thermometers  
20 ownership in the US from 49 to 70% over the period (1998-2010). Cody and Hogue (2003) also  
21 identified an increase in meat thermometers usage from 22 to 25% over the period (1999-2002).

### 22 *3.1.1.2. Trends of usage of meat thermometers with different types of meat*

1 Several studies addressed meat thermometer usage with different meat types and found a lower  
2 trend of meat thermometer usage with small cuts of meat, compared with large cuts of meat and  
3 whole poultry (Table 3). Likewise, studies by Cates, Carter-Young, Durocher, Williams, and  
4 Conley (2002b) and Feng, Bruhn, and Marx (2016) revealed that most participants only used  
5 meat thermometers with roasts and whole poultry. Despite the low usage with small cuts of  
6 meat, Lando and Chen (2012) reported a significant improvement by 20% and 9% in the usage  
7 of a meat thermometer with chicken parts and hamburgers respectively, over the period 1998-  
8 2010.

### 9 *3.1.1.3. Meat thermometer usage among different groups of consumers*

10 The trends of meat thermometer ownership and usage varied with age. Meat thermometers  
11 usage is generally more common among mid-aged adults (30-59 years), relative to adults of  
12 either older or younger ages (Yarrow, 2006; Koeppl, 1998; Lin, 2018; Cates et al., 2009; Cates,  
13 Karns, Kosa, and Godwin, 2013). In contrast, Lando and Chen (2012) reported a higher trend  
14 of meat thermometers usage for roasts among older adults relative to younger ones. A. L.  
15 Anderson, Verrill, and Sahyoun (2011) reported that older adults were significantly more likely  
16 to own a meat thermometer than younger adults (73% vs. 67%, respectively).

17 Concerning the effect of gender on safe food-handling knowledge and practices, several  
18 reviews and cross-sectional studies showed that women had poor food safety knowledge and  
19 were less likely to own and use a meat thermometer relative to men (Scheule, 2004; Patil, Cates,  
20 and Morales, 2005; A. L. Anderson et al., 2011; Lando and Chen, 2012). In contrast, Patil,  
21 Morales, Cates, Anderson, and Kendall (2004) reported that males were more likely to adopt  
22 poor food safety practices than females.

1 Trends in thermometer ownership may also vary among different ethnic subgroups. In a survey  
2 by Henley et al. (2015), the percentage of meat thermometers ownership among Caucasian,  
3 African-American, Hispanic and Asian participants were 64%, 56%, 47% and 35%,  
4 respectively. A. L. Anderson et al. (2011) reported that non-white participants were less likely  
5 to own a meat thermometer relative to white participants (54% vs. 76%, respectively), although  
6 the former were more knowledgeable about the importance of using one.

7 Education and socioeconomic status were also found to impact thermometer ownership and  
8 usage. A. L. Anderson. et al. (2011) analyzed the 2006 US Food and Drug Administration  
9 (FDA) Food Safety Survey, and concluded that more educated people were more likely to own  
10 a meat thermometer (79% vs. 69%, respectively). In contrast, Shapiro et al. (2011) identified  
11 education level as a significant negative predictor of the intention to adopt meat thermometer  
12 use. This negative relationship between education level and meat thermometer use was  
13 confirmed by Lando and Chen (2012) who reported that those who had a college degree were  
14 less likely to use meat thermometers relative to those with a high school certificate, but that  
15 meat thermometer ownership was higher among individuals with higher income. In another  
16 context, A. L. Anderson et al. (2011) reported that people who lived alone were less likely to  
17 own a meat thermometer.

#### 18 *3.1.1.4. Usage of meat thermometers in gatherings/outings*

19 Koeppl (1998) reported that meat thermometers were mostly used over holidays and special  
20 occasions, such as Thanksgiving turkey. In contrast, Yavelak et al. (2018) reported that only  
21 33% of the tailgaters in five American universities used meat thermometers.

#### 22 *3.1.1.5. Usage of meat thermometers on TV shows*

1 Lack of meat thermometers usage was reported to be a common behavior among celebrity  
2 chefs. A content analysis of 100 US TV shows by Maughan, Chambers, and Godwin (2017)  
3 showed that 75% of the shows did not use a meat thermometer or give temperature information  
4 for different types of meat. Similar results were reported by Woods (2015) based on 60 TV  
5 cooking shows in the US.

#### 6 *3.1.1.6. Trends of correct usage of meat thermometers*

7 Maughan (2015) reported that about 36% of meat thermometer users failed to insert it correctly  
8 while cooking poultry products. In contrast, Bruhn (2014) reported that all the participants who  
9 used a meat thermometer (34% of total 120 participants) knew where to insert it correctly in  
10 chicken, except one participant failed to remove the thermometer from its casing. Dedonder et  
11 al. (2009) also reported that two of 41 study participants tried to use the meat thermometer with  
12 chicken without removing its casing.

#### 13 *3.1.1.7. Consumers attitude towards different types of thermometers*

14 RTI reports (2002; 2004) showed that some respondents in the focus group couldn't distinguish  
15 between thermometer types. Digital-instant read and disposable thermometers were most  
16 preferred by participants, due to their convenience, rapid response, easiness to read, and  
17 portability while picnicking, yet some didn't trust the accuracy of the latter. However, Kosa  
18 and Cates (2004) reported the preference of some participants to dial thermometers, because  
19 they don't require batteries.

### 20 *3.1.2. Perceptions and trends in Canada*

#### 21 *3.1.2.1. The knowledge-compliance gap*

1 Nesbitt et al. (2014) published a review of 26 Canadian food safety studies, which inferred that,  
2 although food safety knowledge among Canadians is good, meat thermometers usage is limited.  
3 This good food safety knowledge vs. low meat thermometer usage, or ‘knowledge-compliance  
4 gap; among Canadian consumers was confirmed by different surveys published during the  
5 period 2009-2017, which showed that > 75% of studies participants reported their awareness of  
6 proper cooking instructions, the importance of thorough meat cooking, and the risks associated  
7 with consumption of undercooked meat, yet < 30% of the participants reported using meat  
8 thermometers (Ekos Research Associates Inc., 2010, Murray et al., 2017) (Table 2).  
9 Nonetheless, Ekos Research Associates Inc. (2010) reported an exceptionally higher trend of  
10 meat thermometer usage among immune-compromised individuals (33%).

#### 11 *3.1.2.2. Trends of usage of meat thermometers with different types of meat*

12 Similar to the US, surveys by Fraser Health and Vancouver Coastal Health (2010), and Murray  
13 et al. (2017) reported that higher usage was associated with large cuts of meat, relative to  
14 smaller cuts (Table 3).

#### 15 *3.1.2.3. Meat thermometer usage among different groups of consumers*

16 Nesbitt et al. (2009) reported that the urban residents in the Waterloo region were significantly  
17 less likely to use meat thermometers than residents in rural areas (12% vs. 22%, respectively).  
18 Concerning the effect of gender on meat thermometer usage, women reported higher usage of  
19 meat thermometers relative to men (32% vs. 26%, respectively) (Murray et al., 2017).

#### 20 *3.1.2.4. Usage of meat thermometers on TV shows*

21 Meat thermometers were reported to be rarely used by Canadian TV chefs, which is consistent  
22 with the trends in the US. A content analysis of 116 TV cooking shows on Food Network

1 Canada during 2002-2003, revealed that use of meat thermometers to check meat doneness was  
2 only observed eight times, whereas relying on color was three times more frequently  
3 (Mathiasen, Chapman, Lacroix, and Powell, 2004).

### 4 *3.1.3. Perceptions and trends in Europe*

5 Redmond and Griffith (2003), and Wright, Canham, and Masrani (2011) published reviews  
6 which concluded that most people in the UK and Ireland know that improper cooking is a risk  
7 factor, but generally have low awareness of cooking guidelines, and fail to adopt meat  
8 thermometer usage. Different surveys conducted among British and Irish consumers revealed a  
9 meat thermometer usage trend of only 2-4%, with the majority of British and Irish consumers  
10 using subjective methods to determine doneness (Table 2). Redmond and Griffith (2004)  
11 reported that about 45% of Welsh consumers were neutral about the usefulness of meat  
12 thermometers. Recent surveys in Ireland showed that food safety is perceived as a risk to health  
13 most by those with higher educational attainment, and higher socio-economic status (Safefood,  
14 2012; Corcoran and Porter, 2017). In contrast to the US, Irish women had higher knowledge  
15 about food safety compared to men (Safefood, 2012).

16 Surveys among Dutch consumers by Bergsma et al. (2007) and Fischer et al. (2006) showed  
17 that most participants used subjective methods while cooking, and were unlikely to use meat  
18 thermometers, despite perceiving adequate cooking as very important.

### 19 *3.2. Barriers versus facilitators to meat thermometers usage*

20 This theme included 25 studies, which discussed a total of 20 barriers and 14 facilitators to  
21 meat thermometers usage. These barriers and facilitators were classified into six descriptive  
22 themes according to Young and Waddell (2016).

### 3.2.1. *Confidence and perceived risk*

Five US studies revealed that home cooks, particularly those of older age, had confidence in their own experience to cook meat safely with no need to use meat thermometers, and did not believe that foodborne diseases were likely to affect them (Koepl, 1998; ORC Macro, 2006; Porticella, Shapiro, and Gravani, 2008; Cates et al., 2002b; Shapiro et al., 2011). Responsibility was a strong facilitator among participants of four different studies who reported that they would use a meat thermometer, if messages assured its importance for the safety of their dependent children or elderly (Koepl, 1998; Cates et al., 2002b; Takeuchi, 2004; McCurdy et al., 2006). Most participants in four focus group studies highlighted the effect of risk motivation, reporting that assuring that meat thermometers usage is the only reliable way to ensure meat safety would be a powerful facilitator (Takeuchi, Hillers, Edwards, Edlefsen, and McCurdy, 2005b; Cates et al., 2002b; McCurdy et al., 2006; ORC Macro, 2006). Similarly, a case study by Starke, Ralston, Brent, Riggins, and Lin (2002) revealed evidence of a positive association between risk motivation and adhering to cooking guidelines. A TTM-based questionnaire study by Takeuchi, Edlefsen, McCurdy, and Hillers (2005a) revealed that responsibility towards dependent children, and risk motivation were the most common facilitators among 89% of participants among all SOCs. A focus group study by Porticella et al. (2008) also revealed that increased perceived susceptibility would motivate consumers to adopt meat thermometer usage.

### 3.2.2. *Knowledge and perception*

Participants in several focus group studies reported that their lack of knowledge about the importance of meat thermometers, and the safe temperatures for different meat types was a perceived barrier to adopting meat thermometers usage (Koepl, 1998; McCurdy et al., 2006;

1 Cates et al., 2002b; York et al., 2009). Lack of awareness was also inferred by Kosa et al. (2015)  
2 as a possible barrier to meat thermometer usage. Nonetheless, Porticella et al. (2008) reported  
3 that knowledge alone did not always lead to meat thermometers usage. This is consistent with  
4 the previously mentioned significant gap between levels of knowledge about safe cooking  
5 behaviors and actual meat thermometer usage. Koepl (1998) reported that some focus group  
6 participants had false perceptions about the benefits and risks of meat thermometers. While  
7 some participants were sceptical about whether using a meat thermometer would guarantee  
8 meat safety, others believed that using a meat thermometer might cause a false sense of security  
9 during cooking. On the other hand, participants in two focus group studies among US adults  
10 recommended that including pictures in educational material packages showing that color is not  
11 a reliable indicator would be an effective facilitator (McCurdy et al., 2006; ORC Macro, 2006).  
12 Takeuchi et al. (2005a) also reported that the message of “appearance and color are not good  
13 indicators of meat doneness” was one of the most effective messages in the intervention that  
14 was designed to enhance meat thermometers usage.

### 15 *3.2.3. Habits and heuristics*

16 A focus group study by Koepl (1998) revealed that many study participants, particularly young  
17 adults, were reluctant to change their current habits. A report by the RTI (2002) also mentioned  
18 that participants in a focus group study were sceptical about the probability of changing their  
19 current cooking habits. Participants recommended that repeating the meat thermometer  
20 message could be a potential facilitator (Cates et al., 2002b). Educating children at early ages  
21 in school and including thermometer messages in science text books were mentioned by parents  
22 in a number of focus group studies (Koepl, 1998; Cates et al., 2002b; Porticella et al., 2008).

### 23 *3.2.4. Practical and lifestyle constraints*



1 Participants in nine different focus groups studies in the US considered meat thermometer use  
2 as inconvenient and/or impractical, particularly while cooking small cuts of meat, cooking  
3 individual portions, or grilling large number of hamburgers. Reported barriers in this context  
4 included lack of time, laziness, difficult usage, forgetfulness, and labor intensiveness (Koepl,  
5 1998; Cates et al., 2002b; Takeuchi et al., 2005a; 2005b; Porticella et al., 2008; Takeuchi, 2004;  
6 Kosa, Cates, Godwin, and Chambers, 2017; Phang and Bruhn, 2011; McCurdy et al., 2006).  
7 Concerning the barriers at different SOC, Takeuchi et al. (2005a) ranked the difficulty of usage  
8 as the main barrier, which was reported by 44% and 33% of the participants in the preparation  
9 and action stages, respectively. This barrier is of importance among older consumers, as they  
10 were more likely to have to put their glasses on to be able to read the thermometer (Bruhn,  
11 2014). Furthermore, Takeuchi et al. (2005a) reported that lack of time was identified as a barrier  
12 by 15% of participants across all SOCs. York et al. (2009) reported unfamiliarity, lack of  
13 experience, unavailability or inaccessibility among the main barriers to usage of meat  
14 thermometers by restaurant chefs. Other studies also attributed the low usage of meat  
15 thermometers among consumers to the same barriers (Kosa et al., 2015; Lando and Chen, 2012;  
16 Shapiro et al., 2011; DeDonder et al., 2009; Bergsma et al., 2007; Fischer et al., 2006).

17 Cost of meat thermometers was controversially considered as barrier. Takeuchi et al. (2005a)  
18 reported that 9% of participants across all SOCs identified cost as a potential barrier. A focus  
19 group study by Porticella et al. (2008) also identified financial cost as a probable barrier. In  
20 contrast, Koepl (1998) reported that most focus group participants considered thermometer  
21 price to be affordable. The cost barrier may be restricted to those with lower incomes, as  
22 suggested by both Scheule (2004) and Lando and Chen (2012).

23 In a TPB-based questionnaire study by Shapiro et al. (2011) developed a TPB-based  
24 questionnaire utilizing two constructs; perceived behavioral control and subjective norms.

1 The former was concerned with person's perception of the extent to which adopting meat  
2 thermometers usage is easy or difficult, and was found to be the most significant predictor of  
3 the intention to use a meat thermometer. This was followed by subjective norms, which  
4 addressed person's recognition and acceptance of expectations of other people to meat  
5 thermometers usage. Participants in several studies reported that they would consider meat  
6 thermometer usage if practical constraints were removed, such as if thermometers could save  
7 time or be placed easily on thin cuts of meat (Takeuchi et al., 2005b; Koepl, 1998; ORC  
8 Macro, 2006). Takeuchi et al. (2005a) noted that 87% of participants demonstrated ease of  
9 meat thermometer usage as a strong facilitator, yet most participants cited having a reminder  
10 posted in their kitchen as the least powerful facilitator. Other authors suggested that  
11 increasing the availability of meat thermometers in the market might be a potential facilitator.  
12 (Lando and Chen, 2012; Fischer et al., 2006; McCurdy et al., 2006).

### 13 *3.2.5. Doneness preference*

14 While some consumers prefer the taste of undercooked meat, others prefer it well-done or even  
15 overcooked. Porticella et al. (2008) and Starke et al. (2002) reported that some participants did  
16 not use meat thermometers, due to its perceived negative impact on taste. On the other hand,  
17 many participants in other studies indicated that they would consider meat thermometer usage,  
18 if it enhanced quality of meat besides improving safety (Koepl, 1998; Starke et al., 2002; Cates  
19 et al., 2002b; Maughan, 2015).

### 20 *3.2.6. Social and societal influences*

21 Koepl (1998) reported that participants acquired their current cooking behaviors from family  
22 members. Takeuchi et al. (2005a) also identified that 81% of their participants who didn't use  
23 a meat thermometer don't know anyone who uses one. Many other studies reported the effect

1 of media as a perceived barrier to meat thermometer usage, such as the lack of meat  
2 thermometer usage on TV shows and in magazines (Phang and Bruhn, 2011; Shapiro et al.,  
3 2011; Mathiasen et al., 2004; Phang, 2010; Woods, 2015; Maughan, 2015; McCurdy et al.,  
4 2006). In the same context, appearance and perceived social costs were cited as perceived  
5 barriers to meat thermometers usage by most participants in separate studies (Koepl, 1998;  
6 Porticella et al., 2008). Participants in several focus groups studies reported that directing cooks  
7 to use a meat thermometer in recipes, cookbooks, food safety labels, as well as TV cooking  
8 shows would be a powerful facilitator (Koepl, 1998; Porticella et al., 2008; McCurdy et al.,  
9 2006; Phang and Bruhn, 2011). Takeuchi et al. (2005a) reported that 87% of participants across  
10 all SOC found including temperatures of different meat types with recipes as a strong facilitator.  
11 Furthermore, some participants in the focus group studies by both Koepl (1998) and Porticella  
12 et al. (2008) suggested invoking social pressure by conveying the meat thermometer message  
13 through celebrities, dieticians, and the government. Participants indicated that they had great  
14 concerns with regards to pride in their cooking skills, and that they would use a meat  
15 thermometer, if others valued this behavior. In the same studies, participants recommended  
16 media stories and in-depth coverage of foodborne illness outbreaks as being powerful  
17 motivators for behavioral change.

### 18 *3.3. Interventions aiming at enhancing meat thermometers usage*

19 This theme included a total of 20 studies utilizing various interventions to improve meat  
20 thermometer usage among consumers through increasing knowledge (12 studies) and  
21 addressing attitudes (14 studies) towards thermometer usage. The interventions varied between  
22 using educational materials, training programs, campaigns, mixed approaches using different  
23 intervention types, temporary closure of restaurants in response to poor food safety practices,  
24 advising thermometer usage in recipes, as well as positive deviance focus groups, which is a

1 novel educational intervention where participants discuss their current practices and decide to  
2 try adopting the recommended behaviors modelled by people like themselves.

### 3 *3.3.1. Educational materials*

4 Takeuchi (2004) and Takeuchi et al. (2005a) applied the TTM to evaluate an educational  
5 intervention among 2500 randomly selected American consumers, who were distributed among  
6 the five different SOCs. Educational material packages comprised a brochure, a video, recipe  
7 cards and a refrigerator magnet, but without meat thermometer. The study revealed that the  
8 educational materials resulted in a significant increase in thermometer ownership (from 34 to  
9 42%), and usage (from 4 to 16%). The proportion of participants in the precontemplation stage  
10 significantly decreased from 80 to 46%, meaning there was a significant increase total  
11 proportion of participants who were in the preparation, action or maintenance stages from 12  
12 to 41%. In another study, Takeuchi et al. (2005b) used a similar educational package to assess  
13 the impact of each element of the package on enhancing meat thermometers usage. The  
14 brochure was the most effective component, which motivated 63% of participants, followed by  
15 recipe cards (45%) and the video (38%). The brochure was particularly useful for those in the  
16 precontemplation and contemplation stages, whilst participants in the action and maintenance  
17 stages found the video most useful.

18 Edwards, Edlefsen, Hillers, and McCurdy (2005) used a teaching kit including the materials  
19 designed by Takeuchi et al. (2005a) to target 326 American high school students, yet additional  
20 items were included in the kit (four 50-min teaching lessons, handouts, homework activities,  
21 four posters and an instant-read digital thermometer). These were utilized by students through  
22 both theoretical and practical classes, allowing students to know about the importance of  
23 adopting thermometers usage, besides giving them the chance to use one. The pre- and post-

1 intervention surveys revealed that the students' mean knowledge score significantly increased  
2 by 2.7, with 42% of the students reporting an increase in their confidence in using a meat  
3 thermometer. The mean SOC score significantly increased from 2.3 to 2.6, with 30% of the  
4 students making progress toward a higher SOC. Later on, McCurdy et al. (2006) published a  
5 study with similar findings. The evaluation report of Pathogen Reduction, Hazard Analysis and  
6 Critical Control Point System (PR/HACCP) published by the RTI (2002) mentioned using the  
7 same educational materials among six groups of parents of young children, among whom,  
8 participants of only three groups received meat thermometers. After a one-month intervention,  
9 surveys revealed that 63% of participants who received a meat thermometer reported that they  
10 began to use one, compared to only 13% of those who did not receive one. Moreover, 50 and  
11 42% of those who received a thermometer used it with chicken pieces and hamburger,  
12 respectively, compared to only 22 and 0% of those who did not receive one.

### 13 *3.3.2. Food safety training*

14 Six studies investigated the effect of food safety training on the knowledge, attitudes and  
15 behavioral compliance with safe cooking practices among both catering and domestic  
16 consumers. Robert et al. (2008) held a four-hour food safety training covering three food safety  
17 practices, including meat thermometer usage for 402 foodservice employees in the US. The  
18 post-training assessment showed a significant improvement in knowledge scores related to  
19 proper thermometer usage, yet with no significant improvement in adopting meat thermometer  
20 usage. Surprisingly, Pilling et al. (2008) reported that food workers in restaurants where training  
21 was mandatory for all food handlers had significantly lower knowledge score about food safety  
22 compared to those working in restaurants where only managers were knowledgeable about food  
23 safety (12.8 vs. 14.3 out of 18, respectively). However, there was no significant difference  
24 between the two groups in terms of compliance with meat thermometer usage. A four-hour

1 TPB-based training among food workers in 16 Malaysian school canteens also failed to increase  
2 participants' knowledge about using thermometers while cooking (Nik Husain, Wan Muda,  
3 Noor Jamil, Nik Hanafi, and Abdul Rahman, 2016). The failure of this intervention may be  
4 attributed to its focus on covering the concept without providing a meat thermometer to the  
5 canteen workers during the training. In contrast, McIntyre (2011) showed that trained food  
6 safety workers in British Columbia used meat thermometers more often than untrained workers.  
7 Finch and Daniel (2005) also showed that food safety training of 267 food handlers working at  
8 emergency food relief organizations in New York State increased meat thermometers usage  
9 among handlers, and significantly improved participants' knowledge. On comparing different  
10 types of food safety training, Yeung (2014) showed that both web-based training and workshops  
11 for 110 American participants improved their knowledge about the importance of cooking meat  
12 to its safe temperature.

### 13 *3.3.3. Campaigns*

14 Several campaigns have been conducted by food safety authorities in the US to address  
15 improper cooking practices among food preparers, utilizing print advertisements and radio  
16 public service announcements. In 1997, the Partnership for Food Safety Education in the US  
17 (2018) conducted the "Fight BAC!" campaign to convey food safety messages to home cooks  
18 including "cook to proper temperature". In order to enhance meat thermometers usage among  
19 consumers, the USDA launched the "Thermy" campaign in 2000, followed by "Is it DONE  
20 yet?" campaign in 2004. The latter was particularly designed to target parents of young children  
21 (FSIS, 2015b; 2016).

22 Cody and Hogue (2003) examined the impact of the "FightBAC" campaign. Post-campaign  
23 surveys indicated that, although a knowledge-compliance gap remained, significantly more

1 consumers reported using meat thermometers. Kosa and Cates (2004) assessed the effectiveness  
2 of the “Is it DONE yet?” campaign, where they reported an increase in participants’ knowledge,  
3 ownership and frequent usage of meat thermometers.

#### 4 *3.3.4. Mixed approach*

5 The FSIS (1996) published the PR/HACCP final rule with the aim of reducing the risk of  
6 foodborne diseases. This was followed by PR/HACCP farm-to-table initiatives, which included  
7 education campaigns, promoting farm-to-fork strategies, and training of food handlers (Institute  
8 of Medicine and National Research Council (US) Committee 1998). Cates, Kosa, and Carter-  
9 Young (2002a) analyzed the US FDA Food Safety Surveys (1998-2001) to assess the  
10 effectiveness of PR/HACCP farm-to-table initiatives. Consumers demonstrated increased  
11 knowledge, with increase in meat thermometer ownership from 46 to 60% during the period  
12 1998-2001. During the same period, meat thermometer usage increased from 22 to 32% with  
13 large cuts of meat, from 6 to 12% with chicken pieces, and from 3 to 6% with hamburgers.

14 Yavelak et al. (2018) assessed the usefulness of combining positive deviance interventions and  
15 educational materials with meat thermometer provision for food handlers working in temporary  
16 food settings. Follow-up observation and surveys showed that there was a significant increase  
17 in the number of participants using meat thermometers more frequently.

#### 18 *3.3.5. Comparing different types of interventions*

19 Feng et al. (2016) compared the effectiveness of three different intervention types (positive  
20 deviance with meat thermometers provision, standard educational materials without meat  
21 thermometers, and story-based materials) among 182 US adults. Post-intervention evaluation  
22 revealed that the three intervention types significantly increased participants’ knowledge about

1 correct cooking temperatures of different meat types. The active discussions resulted in higher  
2 knowledge gain compared to the other intervention types. Participants who were involved in  
3 the active discussions reported higher self-efficacy of meat thermometers usage relative to the  
4 other interventions.

5 York et al. (2009) compared the usefulness of two approaches in food service establishments  
6 in the US using four different groups of workers receiving either standard food safety training,  
7 a TPB-based intervention program, both interventions, or none of them. The participants in the  
8 combined training and TPB-based intervention group had better compliance with meat  
9 thermometers usage than those in the training and control group. Those who received the  
10 combined intervention had significantly higher control over barriers to meat thermometer usage  
11 than those in the training and control groups.

#### 12 *3.3.6. Other methods to enhance meat thermometers usage*

13 Maughan (2015) investigated the usefulness of including meat cooking temperatures in  
14 different poultry recipes via direct observation. A total of 155 participants were randomly  
15 allocated into two groups: with or without food safety instructions. Participants who received  
16 recipes with food safety instructions were significantly more likely to use meat thermometers  
17 while cooking either chicken pieces (85% vs. 30%) or turkey burgers (86% vs. 20%). About  
18 58% of those who used meat thermometers among the instructed group were able to insert it  
19 correctly in chicken pieces compared to only 16% of the non-instructed group. Similar results  
20 were obtained on evaluating proper insertion of thermometer in turkey burgers (76% vs. 13%  
21 for instructed vs. non-instructed groups, respectively). On the other hand, Mandarino (2017)  
22 reported that temporary closure of Canadian restaurants with improper food-handling practices



1 did not improve the employees' practices, and food workers continued to demonstrate low  
2 thermometer usage.

### 3 *3.4. Consultation exercise*

4 The *Safefood* representative supported the study findings, advising that many European  
5 consumers lack knowledge about safe food-handling practices, including meat thermometer  
6 usage. The *Safefood* representative's input contributed to making sensible recommendations  
7 for Europe, and offered helpful guidance for determining next research steps and eventually  
8 triggering a process of changing cooking guidelines in Ireland towards recommending meat  
9 thermometers usage. This process is expected to be gradual, passing through conducting  
10 surveys and focus groups to investigate meat thermometers ownership and usage, and barriers  
11 as well as facilitators to meat thermometers usage. Future steps would also include increasing  
12 consumers' awareness about the importance of using meat thermometers.

## 13 **4. Discussion**

14 This scoping review aimed to make recommendations for future research, and to inform  
15 necessary policy change of cooking guidelines towards promoting meat thermometers usage.  
16 The results of this study highlighted the low or improper usage of meat thermometers among  
17 both domestic and catering consumers worldwide. Although surveys in the US and Canada  
18 showed relatively high awareness about food safety practices among consumers, with the  
19 majority owned a meat thermometer, consumers reported low thermometer usage, revealing  
20 both ownership-usage and knowledge-compliance gaps. The usage trends were even lower  
21 when observing consumers' cooking practices, indicating possible social desirability bias and  
22 response bias (Redmond and Griffith, 2003). Therefore, we believe that the results of direct  
23 observation studies are more reliable than the survey results, although the observation process

1 still sometimes influences the participants' behavior, leading to false reporting of compliance  
2 (Redmond and Griffith, 2003; Yavelak et al., 2018). Nonetheless, we identified a notable  
3 increase in the ownership and usage of meat thermometers over time in Canada and the US,  
4 which may be attributed to the different public health interventions and campaigns conducted  
5 by food safety authorities in both countries.

6 The review produced limited meat thermometer ownership/usage data from Europe, which  
7 suggested that meat thermometer usage was not a common food safety practice among  
8 European consumers. The reported low usage of meat thermometers in the UK and Ireland may  
9 be attributed to the lack of guidelines explicitly recommending their use in both countries (FSA,  
10 2018; FSAI, 2017a).

11 Direct observation, surveys, and focus groups indicated that meat thermometer usage differs  
12 among consumers according to their gender, age, ethnicity, level of education, socio-economic  
13 status, environment, and social norms. In spite of some inconsistencies, seniors (60+ years)  
14 generally exhibit resistance to adopt behavioral change and young adults (<30 years) exhibit  
15 low perceived risk of foodborne illnesses. Practicality is also a major concern for many  
16 consumers, where consumers find thermometer use inconvenient with smaller cuts of meat,  
17 which justifies the observed gap between thermometer usage with chicken pieces and  
18 hamburgers, compared to usage with large cuts of meat and whole poultry. Focusing on  
19 cooking time and other visual methods in popular sources such as magazine recipes and TV  
20 cooking shows contributed to a general feeling among consumers that using a meat  
21 thermometer while cooking contradicts with social norms.

22 Comparison of the effectiveness of different interventions developed in the US for enhancing  
23 meat thermometers usage revealed that the interventions based on behavior change theories  
24 were most effective. Educational materials and campaigns designed to address the perceived

1 barriers and facilitators to meat thermometers usage were effective in terms of enhancing usage  
2 among different types of consumers (e.g. adults, students, and foodservice employees). Active  
3 discussions with consumers were likely to improve consumers' attitudes and intentions, as well  
4 as induce behavioral change, particularly if combined with supportive educational materials.  
5 Conveying the thermometer usage message through recipes was also found to be effective in  
6 terms of behavioral change. In contrast, food safety training seems to be effective only in terms  
7 of improving foodservice workers' knowledge, but it had a little impact on their behaviors.  
8 These findings confirm that knowledge gain is not necessarily translated to adopting the  
9 recommended behaviors, and that addressing the perceived barriers and facilitators through  
10 evidence-based interventions is crucial to induce behavioral change among consumers (Patil et  
11 al., 2005).

12 We identified the presence of obvious gaps in research in Australia and continental Europe,  
13 and, to a lower extent, in the UK and Ireland, with regards to investigating meat thermometer  
14 ownership and usage, as well as barriers to and facilitators of using meat thermometers among  
15 consumers. Although many studies in both the US and Canada investigated the effects of  
16 different interventions on enhancing meat thermometers usage, the Canadian interventions  
17 relied on addressing barriers and facilitators extracted from other US studies, as a result of the  
18 lack of studies investigating consumers' perceptions in the Canadian community.

## 19 **5. Study limitations**

20 While a comprehensive approach was adopted for scoping of various sources in order to  
21 address the research question in a robust way, some limitations still exist. A potential limitation  
22 is that only English articles were reviewed and included, due to financial constraints for  
23 translation. This posed a possibility of missing potential articles from non-English speaking  
24 countries. The limited literature available from Europe also posed a limitation of not reflecting

1 the cultural and ethnic difference among European consumers. As a result of being a relatively  
2 under-researched area with a limited number of sources, the authors did not assess the evidence  
3 quality in order to include a broader range of evidence from both scientific and grey literature,  
4 avoid missing any potentially important documents, and to identify gaps in research to develop  
5 recommendations for future research.

## 6 **6. Recommendations and conclusions**

7 Based on the results of this scoping review, we recommend the following steps to enhance  
8 meat thermometers use among consumers in order to improve population health worldwide:

- 9 1. Conduct surveys and direct observation studies to investigate ownership and usage of meat  
10 thermometers (e.g. considering differences by gender, socioeconomic status, age, ethnicity,  
11 and in domestic and catering environments) utilizing well-validated TTM and/or TPB-  
12 based questionnaires.
- 13 2. Conduct qualitative research among consumers, utilizing appropriate behavioral theories,  
14 such as TTM and/or TPB as conceptual framework, in order to understand perceptions,  
15 attitudes, barriers and facilitators to meat thermometers usage in specific populations and  
16 population sub-groups.
- 17 3. Based on evidence from 1 and 2 above, design evidence-based interventions to promote  
18 meat thermometer usage, with testing in feasibility studies before wider exposure, and  
19 evaluate such interventions using validated questionnaires conducted pre- and post-  
20 intervention.
- 21 4. Scale up the interventions showing the most significant improvements in inducing behavior  
22 change.
- 23 5. Track incidence rates of foodborne illnesses in specific areas where interventions are being  
24 implemented.

1 6. Conduct cost-effectiveness studies evaluating the costs involved in promoting meat  
2 thermometer usage *vs.* anticipated decrease in the economic burden of foodborne illnesses.

3  
4 We also recommend the following actions to be adopted by food safety authorities to promote  
5 thermometer usage among both domestic and catering consumers:

- 6 1. Establish of partnerships with food safety authorities in the US to benefit from the four  
7 decades of US experience in conducting campaigns promoting of meat thermometer usage.
- 8 2. Ensure the availability of affordable types of meat thermometers in both urban and rural  
9 areas.
- 10 3. Encourage media (e.g. T.V cooking shows, recipes and magazines) to model and normalize  
11 meat thermometers usage and convey the thermometer message in recipes.
- 12 4. Urge food manufacturers to print the safe minimum cooking temperatures and thermometer  
13 advice on raw meat package labels.
- 14 5. Urge industrial and commercial settings to promote meat thermometer use in different  
15 ways, such as offering discount coupons for meat thermometers users, tracing domestic  
16 usage of meat thermometers through mobile applications, providing disposable  
17 thermometers with raw meat packaging...etc.
- 18 6. Conduct regular inspections in food service establishments to ensure adherence to the  
19 recommended cooking guidelines, including meat thermometers usage.
- 20 7. Include meat thermometers usage in the rating criteria of restaurants, and urge restaurants  
21 to declare to the public that they are using meat thermometers.
- 22 8. Encourage schools to focus on meat thermometers use in students cooking activities.

23 In conclusion, this review revealed low meat thermometer usage in the developed countries,  
24 particularly in Europe. Lack of knowledge does not appear to be the main barrier to meat

1 thermometers usage. Instead, the low usage may be attributed to consumers' negative  
2 perceptions and attitudes. Educational interventions addressing both consumers' knowledge  
3 and attitudes were more effective in changing consumers' behaviors, compared to those  
4 concerned only with addressing knowledge. Therefore, food safety authorities worldwide  
5 should focus on investigating consumers' beliefs and attitudes towards meat thermometers  
6 usage, in order to design effective tailored interventions.

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14 The authors declare no conflict of interest.

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1 **Tables captions:**

2 Table 1. Safe minimum cooking temperatures for different meat types recommended by USDA- FSIS (2015a), Government of Canada (2015),  
3 and NSW Food Authority (2018)

4 Table 2. Summary of the findings of direct observation studies and surveys concerned with trends of thermometers ownership and usage

5 Table 3. Summary of trends in meat thermometers usage with different meat types

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7 **Figures captions:**

8 Fig. 1. Flow diagram of the included studies

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1 Table 1. Safe minimum cooking temperatures for different meat types recommended by  
 2 USDA- FSIS (2015a), Government of Canada (2015), and NSW Food Authority (2018)

Meat type	Safe minimum cooking temperature (°C)		
	US	Canada	NSW
Beef, Veal, and Lamb	62.8	63	63
Pork	62.8	71	63
Ground/minced meat	71.1	71	71
Whole poultry	73.9	82	74
Ground/Pieces of poultry	73.9	74	74
Fish	62.8	70	63

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Table 2. Summary of the findings of direct observation studies and surveys concerned with trends of thermometers ownership and usage

Type of study	Participants	Country	Type of cooked food	Direct observation		Survey			% relying only on sensory cues (observation or survey)	Reference
				Cooking setting	% usage of meat thermometer	% ownership of meat thermometer	% knowledge of minimum safe cooking temperature	% usage of thermometers		
Direct observation + survey	Phone-recruited adults	US	Beef, chicken, or fish	Participant's home	5% voluntarily	30%	30%	N/A	89%	(J. B. Anderson, Shuster, Hansen, Levy & Volk, 2004)
Direct observation + survey	Adults recruited via advertisement	US	Burger	Participant's home	4% voluntarily	53%	35%	N/A	75%	(Phang and Bruhn, 2011)
Direct observation + survey	Adults recruited at shopping centres	US	Chicken	Participant's home	< 5% voluntarily	48%	53%	N/A	95%	(Bruhn, 2014)
Web-based survey	Online randomly selected adults	US	Burger	N/A	N/A	16%	N/A	19% of participants	59%	(Lin, 2018)
Direct observation + survey	Adults recruited by fliers, friends and family members	US	Poultry	Participant's home	5% voluntarily	43%	50%	25% of participants	95%	(Mazengia, Fisk, Liao, Huang, and Meschke, 2015)

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Type of study	Participants	Country	Type of cooked food	Direct observation		Survey			% relying only on sensory cues (observation or survey)	Reference
				Cooking setting	% usage of meat thermometer	% ownership of meat thermometer	% knowledge of minimum safe cooking temperature	% usage of thermometers		
Direct observation + survey	Adolescents and parents of youth basketball teams	US	Breaded chicken	Student food preparation kitchen in the university	12% (instructed on package)	73%	43%	20% of participants	37%	(DeDonder et al., 2009; 2012)
Web-based survey	Adult grocery shoppers	US	Poultry	N/A	N/A	62%	N/A	26-73%* of owners	N/A	(Kosa, Cates, Bradley, Chambers, and Godwin, 2015)
Survey	Seniors and parents of young children	US	Beef, pork, burger	N/A	N/A	42%	N/A	5-24%* of participants	N/A	(Cates and Anderson, 1999)
Survey	Students of East Carolina University	US	Burger and fish	N/A	N/A	23%	N/A	< 67% of owners	N/A	(McArthur, Holbert, and Forsythe III, 2007)
Direct observation + survey	Graduates of nutrition education program	US	Burger and chicken	Community kitchens	16% voluntarily	N/A	N/A	N/A	N/A	(Kendall et al., 2004)



Type of study	Participants	Country	Type of cooked food	Direct observation		Survey			% relying only on sensory cues (observation or survey)	Reference
				Cooking setting	% usage of meat thermometer	% ownership of meat thermometer	% knowledge of minimum safe cooking temperature	% usage of thermometers		
Direct observation + survey	Sample of consumers distributed among 2-3 states	US	Chicken breast and turkey patties	Home style kitchens	22-37% depending on type of food	63%	N/A	20-30% depending on type of food	6-22% depending on type of food	(Maughan, 2015)
Phone survey	Randomly phone-recruited adults of different ethnicities	US	Poultry	N/A	N/A	35-64% depending on ethnicity	20%	N/A	53%	(Henley, Stein, and Quinlan, 2015)
Survey	Students in 3 universities in 3 states from food and non-food related majors	US	General	N/A	N/A	N/A	N/A	6% of participants	91%	(Unklesbay, Sneed, and Toma, 1998)
Direct observation	Young adults – college students	US	Chicken	Food preparation laboratory	3% voluntarily	N/A	N/A	N/A	97%	(Byrd-Bredbenner, Maurer, Cottone, Clancy, and Wheatley, 2007)

Type of study	Participants	Country	Type of cooked food	Direct observation		Survey			% relying only on sensory cues (observation or survey)	Reference
				Cooking setting	% usage of meat thermometer	% ownership of meat thermometer	% knowledge of minimum safe cooking temperature	% usage of thermometers		
Survey	Phone-recruited adults in Waterloo region	Canada	Burger, chicken or fish	N/A	N/A	N/A	N/A	14% of participants	64%	(Nesbitt et al., 2009)
Survey	Phone-recruited adults (including high-risk groups)	Canada	Pork, poultry and ground meat	N/A	N/A	N/A	61-63%*	29% of participants	75%	(Ekos Research Associates Inc., 2010)
Survey	Phone-recruited adults from all Canadian provinces	Canada	Pork, poultry and fish	N/A	N/A	N/A	53%	29% of participants	65%	(Murray et al., 2017)
Survey	Undergraduate University students	Canada	Meat and chicken	N/A	N/A	N/A	N/A	21% of participants	N/A	(Courtney, 2017)
Survey	Phone-recruited residents in Vancouver area	Canada	Burger and chicken breasts	N/A	N/A	N/A	N/A	14-18%* of participants	N/A	(Fraser Health and Vancouver Coastal Health, 2010)

Type of study	Participants	Country	Type of cooked food	Direct observation		Survey			% relying only on sensory cues (observation or survey)	Reference
				Cooking setting	% usage of meat thermometer	% ownership of meat thermometer	% knowledge of minimum safe cooking temperature	% usage of thermometers		
Survey	Consumers interviewed in central London and Bexleyheath	UK	Meat and fish	N/A	N/A	N/A	N/A	4% of participants	91%	(Bates, Hovard, Sal, and Eaton, 2017)
Survey	Randomly selected households	Ireland	Meat and poultry	N/A	N/A	N/A	N/A	2% of participants	80%	(Kennedy et al., 2005)
Survey	Phone-recruited adults	Ireland	Beef	N/A	N/A	N/A	N/A	3% of participants	83%	(Mahon, Cowan, Henchion, and Fanning, 2006)
Direct observation + survey	Recruited by advertisement	Austria	Chicken	Participants' home	3%	N/A	N/A	N/A	78%	(Hoelzl et al., 2013)
Survey	Nationally selected adult participants	Netherlands	Meat and chicken	N/A	N/A	N/A	N/A	11% of participants	N/A	(Fischer, Frewer, and Nauta, 2006)

1 \* Different percentages depending on type of food

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Table 3. Summary of trends in meat thermometers usage with different meat types

Meat type	Percentage of usage	Reference
Whole poultry	24%	(Cates and Anderson, 1999)
Whole chicken	33 - 57%	(Kosa et al., 2015; Murray et al., 2017)
Whole turkey	42 - 73%	(Kosa et al., 2015; Murray et al., 2017)
Roasts	21 - 38%	(Cates and Anderson, 1999; FDA, 2016; Murray et al., 2017)
Chicken parts	18 - 37%	(Maughan, 2015; FDA, 2016; Fraser Health and Vancouver Coastal Health, 2010)
Turkey patties	22%	(Maughan, 2015)
Ground poultry	23%	(Kosa et al., 2015)
Hamburger, ground meat	5 - 14%	(Cates and Anderson, 1999; FDA, 2016; Fraser Health and Vancouver Coastal Health, 2010; Murray et al., 2017)
Fish	3.5%	(Murray et al., 2017)

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1 Fig. 1. Flow diagram of the included studies

