

ABSTRACT

Malnutrition, food insecurity, and health literacy is of concern within the older adult community and a barrier for healthful living.

Throughout academia, health care organizations, and community service opportunities, nutritional education is consistently provided; yet malnutrition, diet inconsistencies, and food insecurity within the community dwelling older adult population persists.

According to Callen (2010), the ability for nurses to detect correctable problems in attaining proper nutrition is paramount to the health and welfare of older adults.

Advocates of nutrition provide expert teaching sessions, but the reality for many older adults is there are multiple barriers to proper nutrition.

BARRIERS

Inability to read small print labels, health literacy, optimal food choices, food deserts, and in the retail sector food placement of nutritious yet affordable items are barriers incurred by elders.

In addition, financial barriers are evident within the older adult population which can lead to food insecurity (Hernandez, Reesor, & Murilo, 2017)

LITERATURE REVIEW

Donini, et al. (2013) evaluated older adults for malnutrition (n = 712) in all settings using the Mini Nutritional Assessment (MNA). Findings concluded that 26% of females, and 16.3% of males were malnourished; those who were at risk for malnutrition were 40.9% of the females and 35% of the males (Donini, et al, 2013, p. 9 ).

Community dwellers at risk for malnutrition noted they were "less autonomous and needed assistance" which led to difficulty in food preparation and selection Donini, et al, 2013, p. 13).

Findings by Melheim and Sandvoll (2018) noted that 50% of elderly patients receiving home care are “undernourished or are in danger of becoming so” (para 1). These findings correlate with the need for increased education, assistance, packaging of food products, food selection, accessibility, preparation, and advocacy as an important consideration to positively impact the nutritional status of our older adults.

Health literacy is also an important factor to address. The National Assessment of Adult Literacy noted that 71% of adults >60 years old had difficulty in using print materials, 80% had difficulty using forms or charts and 68% had difficulty with interpreting numbers and doing calculations (CDC, 2016).

PURPOSE

Nutritional screenings for overall health and wellbeing for community dwelling elders are often absent from assessment data.

Understanding older adult food choices, food insecurity or the ability to obtain food and or purchase food, and the assessment of health literacy can help the nurse to address nutritional concerns for community dwelling older adults.



METHOD

An ethnographic approach were utilized regarding the impact nutritional education had on community dwelling older adults inclusive of:

- Health literacy
- Foods commonly purchased
- Nutritional value of food items commonly purchased
- Financial concerns
- Barriers faced

STUDENT INVOLVEMENT

Students enrolled in an older adult nursing course examined grocery trends of community dwelling older adults.

Student observations and input included:

- What do you see upon inspection of the store and item location?
- Are items within reach?
- What type of items did the older adult purchase?
- Were there any differences in gender?
- What quantity of fresh foods vs. frozen foods were in their shopping cart?
- What was the nutritional value of the foods chosen?
- Were food labels large enough to read?
- What would you as the older adult advocate suggest to the store managers to improve their overall shopping experience?

FINDINGS

The majority of older adults could not manage to read the labels due to the print, and potential literacy issues.

Items holding the highest nutritional and economic value were often placed out of reach.

Lower nutritional value frozen single item meals, on sale, were the items most frequently purchased.

Limited fresh food items were selected. Bananas were the most common fresh food item purchased.

RECOMMENDATIONS

We can improve how we communicate with older adults and create materials and messages that match their health literacy skills.

- Meet with regional grocers
- Collaborate with local food banks for nutritious recipes using typical donations
- Collaborate with local churches for senior meal preparation, to guide appropriate and nutritious food choices and assistance in cooking.
- Work with senior centers, assisted living centers, and senior apartments to provide cooking courses and easy nutritious recipes.
- Online and prepackaged shopping options: Meals on Wheels, Church Groups, Hello Fresh, Amazon Pantry, Peapod, etc.
- Complete nutritional and literacy assessments on all older adults.

HEALTH LITERACY TOOL

Newest Vital Sign. (2011). Retrieved from <http://www.pfizer.com/health/literacy>