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Factors relating to protein consumption in older people in Northern Ireland: a focus group study

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Research has suggested potentially important declines in protein consumption in older people ⁽¹⁾. However, nutrition from protein could be particularly important for older people. For example, research has found support for a protective role of dietary animal protein in older women ⁽²⁾. In order to be able to increase protein consumption in older people, research needs to be carried out to explore the reasons influencing protein intake in this population. This study aimed to explore the factors influencing protein consumption in older people in Northern Ireland via the use of 4 focus groups with adults aged 65 and over.

The focus groups contained 1 male participant and 27 female participants (Mean age = 81). The discussions lasted approximately one hour each, and involved discussion of meat, poultry, fish, eggs, dairy products, nuts, beans and lentils. Two researchers were present; one acted as moderator and the other acted as assistant to the moderator. The moderator guided the discussion where necessary by asking questions about taste, texture, cost, health, knowledge, preparation and cooking. A demographic questionnaire was given to each participant to obtain details on age, marital status, living status, postcode, weight, and whether the participant was a vegetarian or not. Postcodes were converted into MDM scores to obtain a measure of socioeconomic status. Descriptive statistics showed that participants came from a range of socioeconomic backgrounds, 22 were widowed, 23 lived alone, none were vegetarians, and all considered themselves to be either normal weight or overweight.

The discussions were tape recorded and transcribed. They were then analysed independently by the 2 researchers using content analysis. The researchers then met to compare their results. The researchers identified 7 general issues and a group of smaller issues relating to protein consumption in older adults. These were liking (e.g. "I just think it's nice."); issues relating to eating (e.g. "Steak's too tough. You have an awful lot of chewing to do."; "It's tasteless I think."); issues relating to storage, preparation and cooking (e.g. "The only thing I find about pork is that I couldn't keep it the next day, because I imagine pork goes off quickly."); issues relating to health (e.g. "I've to watch cholesterol and have been told to cut eggs down."); cost (e.g. "When I see the price on meat I just say that's it. What I would do is I would buy less."); living and social factors (e.g. "If you're on your own and you buy the likes of a block of cheese from the shop, and before you know it it's starting to go off."); previous experiences, upbringing and habit (e.g. "I'm just used to it. It's habit.").

Other smaller issues that arose from the discussions were mobility and dependence (e.g. "There's an awful lot who can't move about the kitchen to do anything. So they're dependent on dinners being made for them."); variety (e.g. "They're nice for a change."); quality (e.g. "I don't eat them (eggs) if there's a mark on them or they have any cracks."); availability (e.g. "You can't get fresh fish here. You have to go to Comber to get fresh fish."); food origins (e.g. "I will trust the RSPCA, and if it puts it's stamp on and says this is inspected and yes they are free range eggs, then I will buy them and eat them."); and scandals, stories, and media influences (e.g. "The only other thing I can think that may put people off are the scandals – you know the chicken scandals, and this and that. That could put people off.").

Whereas this research indicates the various issues that may be important in relation to protein consumption in older adults, further research is needed to gain a quantitative measure of the factors relating to protein consumption in older adults. Therefore, the results of this study will be incorporated into a questionnaire, which will be distributed to a large sample of independent older adults living in Northern Ireland. It is hoped that the results of the questionnaire will indicate the relative importance of the issues that arose in the focus groups, and provide suggestions for practical interventions that may increase protein intake in older adults.

- 1. Wakimoto P & Block G (2001). Dietary intake, dietary patterns, and changes with age: An epidemiological perspective. J. Of Geront., 56, 65-80.
- 2. Promislow JHE Goodman-Gruen D, Slymen DJ & Barrett-Connor E (2002). Protein consumption and bone mineral density in the elderly: The Rancho bernardo Study. *Am. J. of Epid.*, **155**, 636–44.