

Healthy Eating, Healthy Ageing – a study to explore the feasibility and effectiveness of nutritional screening and targeted nutrition interventions in community-living older people

S Watson,¹ K Zhang,¹ T J Wilkinson²

¹ Older Persons Health Service, Canterbury District Health Board

² University of Otago, Christchurch

Abstract

Background: In New Zealand there are limited data on the nutritional status and the prevalence of nutrition risk and malnutrition among community-living older people.

Objectives: The purpose of the study was to (1) identify the prevalence of poor nutrition among community-living older people in Christchurch, (2) establish and describe the frequently occurring risk factors that place older people at risk and (3) determine whether targeted nutrition interventions are acceptable and can help improve older people's food choices and dietary intake.

Methods: A convenience sample of 152 community-living older people was recruited from five medical centres and Presbyterian Support Older Persons Services in Christchurch. Baseline interview in the home included a brief demographic questionnaire, nutritional risk as measured by SCREEN II (Seniors in the Community: Risk Evaluation for Eating and Nutrition, version II) and measurement of weight and height. All participants at nutritional risk were offered referral to nutrition-related interventions and were followed up at four months in their home and again over the telephone at eight months after the initial interview. Participants not at nutritional risk were followed-up over the telephone at four months after the initial interview.

Results: As classified by SCREEN, 23% (n=35) of the sample were "at risk" of poor nutrition and 31% (n=47) were "at high risk." The common risk factors contributing to the prevalence of those "at high risk" were: unintentional weight change (79%), eating alone (72%), perception of own weight (68%), and low milk product intake (66%). The most common nutrition-related intervention for those initially at nutritional risk was consultation with a project dietitian at the time of interview. Ninety percent of these participants reported they found the service helpful and 69% reported positive dietary changes at Interview 2. The most frequently occurring positive dietary change reported was increasing milk and milk product intake. Participants at "high risk" of poor nutrition were more likely to be referred to specialist dietitians than those "at risk" (40% vs 17%). By the end of the study 43% of participants who were initially at nutritional risk and 24% of those initially "not at risk" believed their eating and nutrition had improved. The most common explanation for reporting this improvement was a raised awareness about eating well.

Conclusions: The prevalence of nutritional risk and nutrition problems found in this study population supports the need for implementing a nutrition risk screening programme in Christchurch and also the need for the development and provision of educational programmes that focus on decreasing the nutritional risk of community-living older people.