Vulnerable Groups and their Nutritional Needs

The Nutrition Education Needs of Older Adults in Rural Northern Ontario

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Introduction: Over 30% of community-dwelling Canadian seniors are at risk of malnutrition and only 25% of those receive nutrition counselling. Ethical screening emphasises the importance of optimizing nutritional status while results provide evidence needed to inform nutrition interventions.

Objectives: To determine key malnutrition risk factors, education needs and preventative strategies for seniors (65+) in the Timiskaming District.

Methods: Patient demographics and completed electronic SCREENIIAB© questionnaires, received in Excel© from two Family Health Teams (FHTs), were coded then analyzed using pivot tables with the most frequently identified nutrition risk factors used to develop a focus group (FG) guide. Community-dwelling seniors were recruited directly (e.g., phone calls) or indirectly (e.g., social media) to participate in two 90-minute FGs. Responses were transcribed using Word© and analyzed thematically. The FG participants completed paper SCREENIIAB© questionnaires which were entered into Excel© and compared to the FHT sample.

Results: The FHT sample (n=107) were 52% female (average age 75; range 65-91 years) and the FG sample (n=20) were 90% female (average age 74; range 66-83 years). Over half (58%) of the FHT sample consumed insufficient fruits and vegetables and 34% had low fluid intakes which was comparable to the FG sample (55% and 40% respectively). Barriers to healthy eating were produce cost, transportation, and access to public washrooms. Education needs included symptoms and strategies for chewing and/or swallowing issues, and understanding what constitutes total fluid intake. In-person group education sessions were the preferred method.

Conclusions: Despite a higher female:male ratio in the FGs, similar malnutrition risk factors were identified, suggesting reported barriers and education needs may inform a comprehensive upstream approach. Additional FGs and the full version of SCREEN© would capture potential gaps such as additional risk factors (e.g., protein intake).

Significance: Findings will inform program planning and advocacy to support seniors at risk of malnutrition.