

## Abstract

**Cite this article:** Bray B, Clegg ME, Woodside JV, Lovegrove JA, and McEvoy CT (2025). Exploring UK older adults' perceptions of age-related changes and their influence on food behaviours. *Proceedings of the Nutrition Society* **84**(OCE3): E237. doi: [10.1017/S0029665125101067](https://doi.org/10.1017/S0029665125101067)

# Exploring UK older adults' perceptions of age-related changes and their influence on food behaviours

B. Bray<sup>1</sup>, M.E. Clegg<sup>2,3</sup>, J.V. Woodside<sup>1</sup>, J.A. Lovegrove<sup>2</sup> and C.T. McEvoy<sup>1</sup>

<sup>1</sup>Centre for Public Health, The Institute for Global Food Security, Queen's University Belfast, UK; <sup>2</sup>Hugh Sinclair Unit of Human Nutrition, University of Reading, UK and <sup>3</sup>School of Food and Nutritional Sciences University College Cork, Ireland

Healthy life expectancy is not increasing at the same rate as life expectancy in UK <sup>(1)</sup>. The health of older adults can impact on their dietary needs. Furthermore, dietary needs change with age, with diet offering the potential to prevent and/or lessen the impact of poor health. There is a need for research that identifies the barriers to accessing healthy foods for older adults, and how these barriers might be addressed. This qualitative study of preliminary data aimed to explore the perceptions of age-related influences on food behaviours (purchasing, preparation, food choice and intake) of older community-dwelling adults.

Semi-structured interviews were conducted with older UK adults living independently. Views were sought on potential barriers and enablers for healthy eating and explored food purchasing, preparation and consumption and nutrition knowledge in the context of getting older. Interviews were recorded and transcribed verbatim and a reflexive thematic approach was used to analyse the data <sup>(2)</sup>. The study was approved by the Faculty of Medicine, Health, and Life Sciences Research Ethics Committee, Queens University Belfast (REC MHLS 24\_26).

To date 20 interview results have been analysed of participants in England (Berkshire n=15) and Northern Ireland (n=5), comprising the following people (n=8 men; n=12 women; white n=15 (75%), black n=2 (13%), other n=3 (12%), and mean age; female 72 years (range 65 - 82, SD 5.24); men 71 years (range 65 -80, SD 5.14).

Themes that emerged included the food environment (availability, accessibility and quality), eating habits and influences, nutrition awareness and source of nutrition knowledge, life changes (e.g. divorce, retirement, relocation) and management strategies (e.g. improvements to cooking equipment and seeking assistance in shops). Chronological age was not seen as an influencer of food behaviours.

Within the food environment theme, food quality and eating experience were highly valued regardless of budget. A subtheme of nutrition awareness was how dietary misinformation and past behaviours affected food choices, such as choosing low-fat and low-calorie foods to facilitate weight loss rather than focusing on increasing the nutrient density of their diet.

Overall, participants demonstrated that changes in their food behaviours are predicated in a large part by life events, and the need to adapt to these and the evolving food environment in which they find themselves. This concurs with previous research on environmental supports for healthy ageing diets <sup>(3)</sup>.

Strategies to improve nutritional intake could consider current consumption patterns, and the themes of food environment, eating habits and influences, nutrition awareness and source of nutrition knowledge, life changes and management strategies.

The analysis will be completed with the results from all 40 participants. The output will inform stakeholder co-creation workshops to design food solutions that can support people to eat familiar foods with increased nutrient density.

**Acknowledgments:** This research was funded by UKRI doctoral training grant no: BB/T008776/1

## References

1. Public Health England. Gov.uk. (2017) Chapter 1: life expectancy and healthy life expectancy.
2. Braun, Clarke. University of West Auckland. (2023) Thematic Analysis.
3. Sylvie AK, Jiang Q, Cohen N. (2013) J Nutr Gerontol Geriatr. 32(2):161–74.