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ACTIVITIES AND ACHIEVEMENTS QUESTIONNAIRE

1. Non-Technical Summary

A 1000 word (maximum) summary of the main research results, in non-technical language, should be provided below. The summary might be used by ESRC to publicise the research. It should cover the aims and objectives of the project, main research results and significant academic achievements, dissemination activities and potential or actual impacts on policy and practice.

Background

We use food to express ourselves socially and culturally. Older women often experience reduced involvement in purchasing, preparation and cooking of food, which may have specific effects on their identity, sense of well-being, and engagement with family and friends. The impact of these changes on social services provision and policy had previously been little explored.

The CAFÉ study explored how older women respond to reduced contact with food.

Aims and purpose

* To discover the impact on older women of reduced contact with food in terms of meanings of food, social engagement and well-being

* To understand how this impact alters over time

 \ast To explore the potential for intervening to restore greater contact with food for these women

* To contribute to service and policy development

Participants

40 women took part in CAFÉ in Norfolk in 2007/8. Twenty women had individual interviews, with follow-up interviews 5 months later. A further twenty women took part in group interviews. To participate women had to be aged at least 65 and have recently started to cook fewer than 3 main meals per week from scratch. The average age of participants was 82, and many were contacted through our consumer advisors. About half lived in sheltered accommodation and half independently. All had previously been responsible for shopping and cooking for a partner and/or family. About half regularly used ready meals, half attended a lunch club or day centre, and five used mobile meals. Almost half relied on others for their main shop.

Interviews and analysis

Qualitative interviews were audio-taped and typed in full, using a pseudonym participants themselves chose. Interview questions were adjusted by the

advisory team after reflecting on the first two interviews. The follow-up interview (about 5 months after the first) was based on a summary of the first interview, to allow women to validate what they had said, and help them discuss changes between the interviews. The seven focus group interviews, each of 2 to 4 participants, used similar topic guides and examined how participants discussed food and food-related work.

In working to understand underlying meanings we noted previously published theories, but also looked for distinct new meanings. Differing points of view were noted and reported. Ethical principles were maintained throughout.

What did we learn from CAFÉ?

Impact of reduced contact with food on social engagement and well-being

Women were found to make active choices in shopping, cooking and eating that helped to maintain and enhance their socialising and enjoyment of life. Many had actively chosen to cook from scratch less frequently, and appeared well supported in using a combination of arrangements including meals shared with friends and family, ready meals, meals eaten out in cafes, pubs, lunch clubs and day centres, and mobile meals, plus occasional cooking from scratch. The choice to cook less often allowed women to spend more time and energy on social and preferred activities, so appeared life-enhancing. However, women who had been prevented from cooking by deterioration in their health often found not cooking less satisfactory.

Many women found that food shopping was more important than cooking in maintaining quality of life and independence. All CAFÉ participants shopped if they were able to – even if they said they didn't enjoy it. Shopping got them out, helped them meet friends and family, and enabled them to stay organised and in charge. Loss of capacity to do their own food shopping appeared to affect the quality of food eaten, making it more monotonous.

Meanings

Three main themes emerged for meanings of food, shopping, food preparation and eating:

- Social food (social roles constructed around food). CAFÉ participants often missed the role of cooking the 'proper meal' and their place at the centre of family life, although some were pleased to relinquish the burdens this role had imposed. Looking after others, in providing food and/or drink, remained central to socialising, and women often found simpler ways to provide food for visitors. Women who found it harder to simplify their provision for others sometimes found their social lives reduced. Cooking for 'just myself' daily was often not seen as worth the time and energy.
- * Being organised and in charge (maintaining control over ones own life

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and health). Demonstrating being organised and in charge through food purchase and preparation appeared to be an important way for older women to express their engagement, skills, problem solving and competence in the world.

 Hedonism (emotional and pleasurable aspects of food) Eating was enjoyed by most women, even when the tasks of cooking, shopping and/or preparing were not. Food provided comfort, new experiences, wicked pleasure, a boost to the spirits, tactile enjoyment, memories of past food and reflected emotional state.

Change in impact over time

Nearly all the CAFÉ women experienced a high rate of continuing change, that affected shopping, cooking and eating, which they actively managed in creative ways.

The potential for intervening to restore greater contact with food in these women

Women need better information on services to support them in doing their own shopping, more transport choices and more food marketed in individual portions.

Dissemination

The CAFÉ researchers and advisory group, including our partners and consumer representatives*, have been involved in: local newspaper articles and radio interviews; results leaflets sent to all participants, Norfolk lunch clubs, sheltered housing and day centres and 250 delegates at a Norfolk POPPs (Partnerships for Older People Projects) meeting; Age Concern Norfolk mailing to 530 interested Norfolk organisations; websites; two conferences (British Society for Gerontology 2007, Copenhagen 2008; and writing academic papers (one submitted to Social Science and Medicine, several more in preparation).

Impact on policy and practice

We are feeding CAFÉ's results into Norfolk County Councils 'More Choices, Better Choices' consultation on service provision for older people, into Norfolk-wide planning via Hilary MacDonald of Age Concern Norfolk (advisory team member), and our presentation at 'Transforming Care' (Copenhagen, June 2008) will widen CAFÉ's impact beyond Norfolk.

*Our three consumer representatives are members of PPIRes, Patient and Public Involvement in Research (see www.norfolkhealthresearch.nhs.uk/nhr/47.html)