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Field Testing a Food Purchasing Survey: Progress from the Residential Environment and Coronary Heart Disease Risk Factors (REACH) Pilot Study

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Objective: Testing a novel instrument for assessing the perceptions of the food environment, and personal and family factors influencing food purchasing behaviors in community-living older women.

Methods: Women 65 years and older residing in Worcester County were enrolled into the study and returned a 26-item food purchasing survey. The survey inquired about timing and frequency of food purchasing by participants and/or their family, location and type of food stores frequently visited, and transportation modes. Eating habits outside of the home at restaurants, cafeterias, community meal sites, and fast food outlets were also assessed. Food stores were defined as any stores selling cooked/uncooked foods, including grocery and convenience stores, wholesale clubs, and farmer’s markets. Food shopping was described as purchasing a relatively large quantity of foods.

Results: Complete data were available for 52 women at the time of this progress report. The mean age was 72 years (range 65-85yrs), 88% White race, 75% with baccalaureate degree and 42% with annual family income over $50,000. Most women drove and went food shopping for their household themselves, and less than 10% traveled more than 20 minutes to reach the food store. Factors most important to store choice included parking, safety and distance from home. The most important store features included organized aisles, sales/promotion items, one-stop shopping, clean, and fast checkout. Approximately 60% did not know if a nutritional rating system was available. Less than one-third of women reported eating foods from restaurants more than once per week. Most participants reported unawareness of the availability of healthful options (e.g., low/fat-free dairy, whole grains, low sodium foods) in restaurants.

Conclusion: This food purchasing instrument captures information on factors influencing food purchasing behaviors. Preliminary results suggest general lack of awareness of nutritional rating and healthy food options available. Further exploration of these factors and close coordination with community interventions can assist older women with improvements to dietary patterns.