

Individual and community-level interventions to address neighborhood barriers to fruit and vegetable consumption among older adults in the United States

Emily J. Nicklett

University of Michigan School of Social Work, USA

The health benefits of eating fruits and vegetables are acknowledged by scientists and by the general public. Consequently, widespread policy and program initiatives have been developed to increase the availability and consumption of these foods, particularly among children. The older adult population, however, has unique nutritional needs and barriers, and many of these interventions (such as school-based programs) do not benefit older adults. Certain subgroups of the older adult population are at heightened risk of nutritional insufficiency, particularly those living in rural areas and in low-income communities.

Social isolation, frailty/disability, and community-level access to fresh produce are strong predictors of intake among older adults. Successful interventions address all three circumstances. As numerous state and federal programs are cut and the sustainability of such programs is uncertain, the need to consider low-cost interventions is of heightened importance. Fruit and vegetable intake are strong predictors of chronic disease outcomes, postponing/avoiding institutionalization, and mortality (disease-specific and all-cause). As older adults are the fastest growing segment of the world population, the need for cost-effective interventions to increase consumption cannot be underestimated.

Individual- and community-level interventions that have been successful in improving consumption are discussed. Particular attention is given to why successful interventions address barriers in social isolation, frailty/disability, and community access. The elements of successful interventions are discussed in the context of new and innovative approaches to address the interplay of nutritional barriers. Suggestions for interventions are discussed for researchers, practitioners, and policy-makers at the individual and community levels.

Biography

Emily J. Nicklett completed her Ph.D. in Health Management & Policy and in Sociology at the University of Michigan. She conducted a postdoctoral fellowship at Johns Hopkins University's Center on Aging and Health, which focused on nutrition and geriatric epidemiology. She is an assistant professor of Social Work at the University of Michigan and is a Health & Aging Policy Fellow, through which she is partnering with the Centers for Disease Control and Prevention and the Environmental Protection Agency. She is also a Geriatric Fellow through the Claude D. Pepper Center at the University of Michigan.