

Abstract

# Dietary Patterns and Associations with Socio-Demographic Factors in Older New Zealand Adults: The REACH Study <sup>†</sup>

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Dietary patterns examine how combinations of foods are eaten. Little is known about the dietary patterns of older adults living in New Zealand, and how these dietary patterns are associated with various socio-demographic factors. This study investigates dietary patterns and socio-demographic factors in older adults (65–74 years) living in the community in Auckland, New Zealand.

Dietary data (109-item food frequency questionnaire) collected in the Research Eating, Activity and Cognitive Health (REACH) study ( $n = 367$ , 36% male) was collapsed into 57 food groups. Using principal component analysis followed by rotation, two dietary patterns (DP) were extracted. Associations between dietary pattern scores and sex, age, work situation, education, living situation, self-perceived financial security and index of multiple deprivation based on residential location were investigated using linear regression analysis.

Results showed DP1, a ‘healthy’ pattern characterised by ‘vegetables’, ‘nuts and seeds’, ‘legumes’, ‘meat alternatives’, ‘fruit’, ‘fish and seafood’, ‘spices’ and ‘dried fruit’ was more likely to be followed by females ( $p < 0.001$ ) and participants with a university education ( $p = 0.004$ ). DP2, a ‘western’ style pattern characterised by ‘processed meats’, ‘sauces and dressings’, ‘biscuits and cakes’, ‘takeaway food’, ‘confectionary’, ‘chocolate’, ‘vegetable oils’, ‘cheese’, ‘beer’ and ‘breakfast cereals’ was more likely to be followed by males ( $p < 0.001$ ), people living with others ( $p < 0.02$ ) and younger participants ( $p = 0.02$ ). The two dietary patterns explained 14% of the variance in dietary intake. No associations between dietary patterns and working situation, self-perceived financial security or index of multiple deprivation were observed.

These results confirm dietary patterns differ by sex and also suggest the male population, in particular, would benefit from targeted advice on healthy eating, through reducing discretionary foods and increasing vegetables and fruit consumption.



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