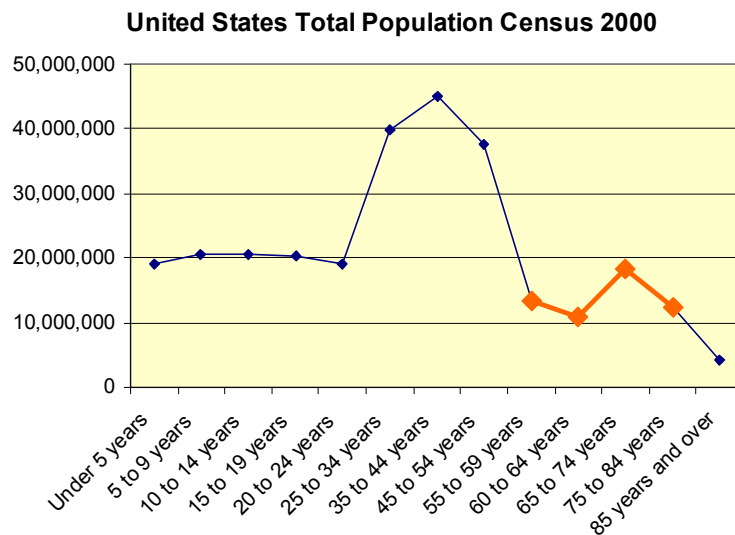


## Changing American Dietary Patterns for “near-seniors” and “seniors”:

Whether they are called “near-seniors”, “early-middles” or “don’t you dare call me elderly”, this demographic is comprised of Adults 55-84, possibly going through a major life change such as retiring, down-sizing and/or a major medical condition. They are most likely members of AARP, are possibly enjoying senior discounts but do not *consider* themselves “senior”. The psychological age of the consumer drives this target audience, not the chronological age. In general, this audience tends to be educated, affluent, involved in community and activities.

This audience comprises approximately 55 million people or 19 percent of the general population in the United States. (<http://factfinder.census.gov> 2005)



## **What are current trends in American food patterns?**

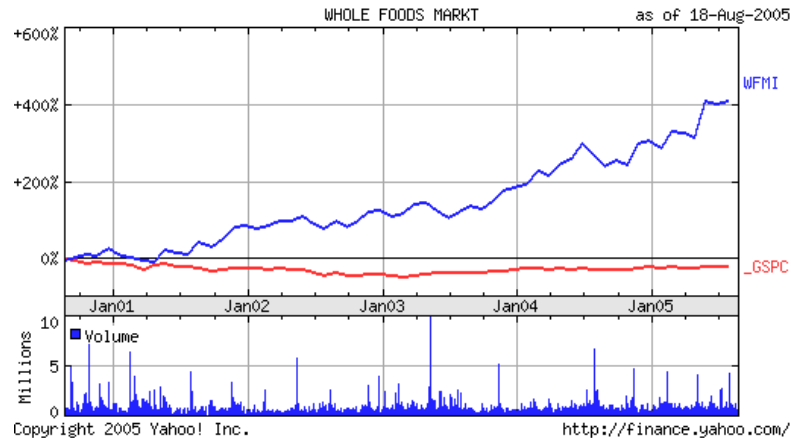
The fat are getting fatter but consumer behavior patterns are causing a noteworthy shift. Obesity has reached epidemic proportions. An estimated thirty percent of the world's population is considered to be obese.

(<http://www.who.int/en/> 2005) Fortunately, some consumers know better.

The boom in the organic industry is a signal of this growing awareness:

- Fastest growing U.S. food segment (20% annually)
  - 2002 sales approximately \$9 billion
  - Accounts for 1-2% total U.S. food sales
  - U.S. market projected at \$30.7 billion by 2007
  - Certified cropland in 2001: 2.35 million acres
  - Organic products sold in 73% of mainstream supermarkets
- (Robinson 2004)

Another indicator is the corporate success of Whole Foods, Inc., (WFMI). Even taking into consideration the slight acceleration in retail food price inflation this year, the numbers are impressive. Their stock has been a darling of Wall Street.



### **What indicates the need for change? Give examples**

The responsibility of who should pay health care costs continues to be an issue of debate but most concede that the costs are going to eat a nice chunk out of social security as well as be a burden on insurance providers, health care programs and consumers.

According to the World Health Organization, "Obesity accounts for 2-6% of total health care costs in several developed countries; some estimates put the figure as high as 7%." (<http://www.who.int/en/> 2005) From 1998 to 2004, the number of bariatric surgery operations performed in the United States increased five-fold. (Spurlock 2005)

Another major source of health care costs includes osteoporosis and associated fractures commonly due to poor nutrition. "It is estimated that the annual number of hip fractures worldwide will rise from 1.7 million in 1990 to around 6.3 million by 2050." (<http://www.who.int/en/> 2003)

Imagine the strain on the insurance providers and Social Security as this demographic group of 55 million continues to age.

### **What factors shape the eating pattern of most Americans?**

To name a few: advertising, convenience, life-style, society, price, friends and family.

### **What recommendations for change have 3 experts made?**

The general consensus is that it's never too late to make a difference with a healthier diet. Change in adult lifestyle, i.e. losing weight and eating healthier, is necessary for reduction in type-2 diabetes. According to a new study by the University of Newcastle upon Tyne, UK, "the life you lead as an adult has the biggest influence on your health, in terms of diabetes risk, in later life." (New Nutrition Business 2005)

It is also to the government's best interest to work on a program to educate this audience with the importance of nutritional intake for optimum health *and* to provide affordable outlets for such programs. (New Nutrition Business 2005)

Education is essential for making changes. Another recommendation is to create an ethical change in society with a program such as a major, national campaign to promote "eat less, move more". (Nestle 2002)

### **What recommendations would you emphasize in this area?**

Create awareness. In talking to this audience it is imperative that they are encouraged to ask questions and learn. Do they have control over their

diet? Are they in a retirement home? What is keeping them from having a better regime – is it access? Cost? Awareness?

**What strategies for implementation would you advise?**

1. Get seniors online! “A recent national survey that the Kaiser Family Foundation (Menlo Park, Calif) released in January showed that less than one third (31%) of individuals in the United States aged 65 years or older have ever gone online, including e-mail use. The figure drops to 18% for those aged 75 years or older. But of the so-called near seniors—those aged 50 to 64 years, which includes a large segment of baby boomers—some 70% have used the Internet.” (Voelker 2005) Apple Computer could start an “Apples for everyone” campaign. Cable companies could provide special services for senior facilities with discounted pricing, hands-on training and more.
2. Create a convenient and affordable fresh food program. Partner farmers, markets and home-delivery programs to provide fresh food for all communities within this target audience. Look at government subsidies and other programs to create an affordable product to both the supplier and consumer. Use same concept as the Farm to School program to provide farm fresh produce to senior living associations. The possibilities are endless and the timing is now.

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