

Investigation on the Cognition of Catering Health of the Elderly in Liaoning Province

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Abstract

At present, population aging has become a topic of concern in all sectors of society. China entered the population aging society in 1999. Especially in recent years, the proportion of population aging has been increasing. The dietary health of the elderly should be paid attention. In order to keep pace with the times to meet the dietary health needs of the elderly, we should have an in-depth understanding of different societies, economies According to the requirements of the elderly for dietary health under the cultural background, this paper investigates the dietary habits of the elderly in Liaoning Province by means of questionnaire. It is concluded that most of the elderly have less understanding of dietary health and more needs. Meeting such needs is of great significance to improve the life happiness index of the elderly.

Keywords

Population Aging; Nutritional Health; Elderly Groups.

1. Introduction

Nationwide, according to the statistics of the National Bureau of statistics, in 2020, the population aged 60 and above accounted for 18.7% of the total population, of which the population aged 65 and above accounted for 13.5% of the total population. Internationally, the proportion of people aged 65 and over in the total population is generally 14% as a sign of a country's deep aging. Therefore, from the two indicators in 2020, China has been in the stage of transition from an aging society to a deeply aging society.

From the perspective of Liaoning Province, according to the data of the statistical bulletin of Liaoning Provincial Bureau of statistics, in 2020, the population aged 60 and above in Liaoning province accounted for 25.7% of the total population. Among them, the population aged 65 and over accounted for 17.4% of the total population. It can be seen from the above data that the degree of aging in Liaoning Province is much higher than the national average level, and has entered the stage of deep aging ahead of schedule.

How to meet the dietary health needs of the elderly is still under exploration and has not formed a complete system. At this stage, how to grasp the dietary needs of the elderly, provide diversified services, and establish and improve the community elderly service system is an important topic we will discuss.

2. Survey Design

In view of the most prominent problems in the aspect of dietary health and the promotion of nutritional restaurants, such as nutritional collocation, three meal eating habits, the needs of nutritional restaurants, etc., a complete set of questionnaire is designed. The questionnaire has 32 questions about the dietary health of the elderly and the promotion of nutritional restaurants. Among them, questions 1 to 6 are to investigate the basic situation of the elderly, Questions 6 to 28 investigate the eating habits and meal expenses of the elderly, and questions 29 to 32 investigate a series of questions about the service of nutrition restaurants.

The survey realized the combination of online and offline, forwarded the questionnaire through the circle of friends, talked face-to-face with the elderly and took relevant information.

When issuing the questionnaire, first ensure that the respondents meet the requirements of the survey. After collecting the questionnaire, each questionnaire was screened and confirmed to ensure the authenticity and accuracy of the questionnaire.

3. Findings

3.1. Basic Information of Respondents

Taking Anshan area as the sample space, a questionnaire survey was conducted on 57 elderly people from different communities. These elderly people also have great differences in age, gender, income and lifestyle. Among the investigated elderly population, men accounted for 37% and women accounted for 63%. The age group of the survey is mainly 60-70 years old, accounting for 42.11%, accounting for about half of the total. The health status of the elderly accounted for 33.33% and the general accounted for 57.9%. The monthly income of less than 2000 yuan accounts for 56%, that of 2000 yuan to 4000 yuan accounts for 24%, and that of more than 4000 yuan accounts for 20%. Among them, 52% of the income of the elderly comes from children, 23% of the income of the elderly comes from pensions, 15% of the income of the elderly comes from self-sufficiency, and 10% of the income of the elderly comes from state subsidies. In terms of pension mode, 59% of the elderly live alone, 21% of the elderly live with their children, 13% of the elderly live at home in the community and 7% of the elderly provide for the elderly in institutions.

3.2. It is a Common Phenomenon that the Elderly have Disordered Three Meal Time and do not Pay Attention to Nutrition Collocation

The survey results show that the elderly basically don't eat breakfast, accounting for 15.8%; The proportion of regular breakfast was 22.8%, and the proportion of daily breakfast was 61.4%; Secondly, the elderly often eat snacks, accounting for 15.7%; 43.8% of them eat snacks occasionally; Never eat snacks accounted for 40.5%. Only 52% of the elderly eat three meals a day on time, and nearly half of the elderly eat three meals a day in disorder. Only 22.8% of the elderly paid attention to the nutritional collocation of three meals, and most of the elderly paid no attention to the nutritional collocation of three meals at will.

The survey results show that 54% of the elderly choose steamed buns, 30% choose fried dough sticks and soybean milk, 26% choose noodles or flour, 19% choose cakes, 21% choose egg milk and fruit, 49% choose porridge, of which 72% eat with their wives for breakfast, 32% of the elderly eat with their children, 18% eat with their grandchildren, and 7% eat alone. For lunch, 74% of the elderly choose to eat rice, 65% choose to eat vegetables, 33% choose to drink soup, 12% choose to drink porridge, 37% choose pasta, 47% choose meat, 7% choose Western fast food and 23% choose fruit. Among them, 77% of the elderly will eat with their wives, 37% of the elderly will eat with their children, and 11% of the elderly will eat with their grandchildren. For dinner, 54% of the elderly choose rice, 56% choose vegetarian dishes, 49% choose soup, 39% choose porridge, 33% choose pasta, 37% choose meat dishes, 9% choose Western fast food and 25% choose fruit. Among them, 77% of the elderly will eat with their wives, 40% of the elderly will eat with their children, and 16% of the elderly will eat with their grandchildren.

The elderly do not pay attention to nutritional collocation in the collocation of three meals a day. At the same time, they may not pay attention to healthy diet in order to accommodate the tastes of their children or grandchildren.

3.3. The Old People's Habit of Eating Health Products is Related to Their Illness

The survey results show that 56.14% of the elderly have no diseases, 26.32% have chronic diseases, and 73.7% of the elderly have the habit of eating health products, but 77.3% of the elderly pay little attention to nutrition knowledge. The choice of health products needs to be improved.

3.4. Most of the Elderly have a Demand for Nutrition Restaurants

The survey results show that 63.16% of the elderly want to have a nutrition restaurant for the elderly; 21.05% of the elderly urgently need nutrition restaurants for the elderly; 15.79% of the elderly said it didn't matter. If there is a nutrition restaurant for the elderly near the community, 64% of the elderly say they are very willing to solve three meals a day in the nutrition restaurant. Therefore, most of the elderly have a great demand for nutrition restaurants. The results showed that 73.08% of the elderly expected to be able to live at home and 13.46% of the elderly expected to live at home and 13.46% of the elderly expected to live in institutions. Home pension is still the mainstream pension model of society.

3.5. The Elderly's Demand for Nutritional Restaurants is Personalized

The survey results show that in terms of diet, 52.63% of the elderly say they want to be distributed according to their personal health plan, 26.32% of the elderly say they want to be distributed according to their personal preferences, and 19.3% of the elderly say they want to be economical and convenient. What aspects do the elderly nutrition restaurants pay attention to? 66.67% of the elderly pay attention to nutrition and health, 61.4% of the elderly pay attention to dining environment, 56.14% of the elderly pay attention to food price, 47.37% of the elderly pay attention to dining distance, and 40.35% of the elderly pay attention to service attitude. When investigating the taste of the elderly, the moderate proportion was 36.84%, and the light proportion was 22.81%.

The elderly have different requirements for nutrition restaurants. Nutrition restaurants for the elderly should pay more attention to the personal health of the elderly to match the nutritional diet, pay attention to the health problems of the elderly to rationalize the diet, and also pay attention to the taste of the elderly to meet the public taste as much as possible. At the same time, the nutrition restaurant should be located near the elderly community to make it more convenient for the elderly to eat.

3.6. Price Demand of Nutrition Restaurants for the Elderly

The survey results show that in terms of breakfast price, the proportion of 3-5 yuan is 24.56%, the proportion of 5-8 yuan is 42.11%, and the proportion of 8-12 yuan is 21.05%. In terms of lunch price, the proportion of 5-8 yuan is 17.54%, the proportion of 8-12 yuan is 19.3%, the proportion of 12-15 yuan is 36.84%, and the proportion of more than 15 yuan is 22.81%. In terms of dinner price, the proportion of 3-5 yuan is 7%, the proportion of 5-8 yuan is 17.54%, the proportion of 8-12 yuan is 24.56%, the proportion of 12-15 yuan is 22.81%, and the proportion of more than 15 yuan is 24.56%.

Nutrition restaurants for the elderly should pay more attention to the ability of the elderly to pay, and the service level should be linked to the dietary conditions to control the cost and meet the price needs of most of the elderly.

4. Conclusion

For this survey, it is learned that it has become an important topic of widespread and key attention to provide services suitable for the needs of the elderly, such as the popularization of nutrition knowledge, the improvement of eating habits, nutrition restaurants and so on, so as

to improve the quality of life of the elderly. As a special group in today's society, the elderly are significantly different from other age groups in physiology and psychology. The health status of the elderly is worse than that of other age groups, which leads to the greater demand for dietary health.

In order to improve the elderly's cognition of food and beverage health, the following suggestions are provided: first, we should vigorously carry out nutrition education and correct the elderly's bad eating behavior. Firmly establish the concept of "health education first", constantly integrate nutrition education resources, take various forms, and make use of traditional media and new media platforms to popularize and promote "Chinese citizens' health literacy - basic knowledge and skills", "66 health items", "citizens' food index south", and vigorously disseminate knowledge and skills such as "Chinese citizens' TCM health care literacy". At the same time, the joint efforts of hospitals, schools, health promotion organs, communities, enterprises and other health places and institutions should be brought into play, so as to spread more nutrition knowledge to the elderly, correct the current wrong eating behaviors and habits, and improve their own nutrition and health water. Guide and encourage the elderly to develop healthy life behaviors and lifestyles, encourage them to be responsible for their own health, and improve the elderly's cognition of catering health.

Two, we should build a collocation restaurant for the elderly, which can meet the needs of the elderly. We can set up a fixed meal collocation. For example, the calorie adjustment package is for the elderly with hypertension, diabetes and so on, and it will control food, salt, calories and fat. Kidney disease package will control protein, phosphorus, calcium and other components in food. The elderly can choose the package according to their physical condition. The restaurant is located near the elderly community and the elderly care center. Meal distribution services can also be arranged so that the elderly who are inconvenient to move can also enjoy nutritious meals. Imitate the Japanese meal delivery service for the elderly and the door-to-door service for the elderly. In order to ensure that the price is reasonable and the service is in place, the Japanese Civil Affairs Department launched the Japan Life Coordination Association to find ways to contact many farms, food manufacturers and fishery associations. Through them, they can get fresh ingredients without price increase by distributors and wholesalers at all levels, which reduces the cost of catering. All meals delivered to the door for the elderly are made under the guidance of professional nutritionists. They are nutritious, chewy and digestible foods with low salt and oil and reasonable matching. When choosing ingredients and cooking methods, nutritionists try to ensure that the food is moderately soft and hard, so that the elderly with dentures can chew. The food content of the meal is not only cost-effective, but also the design of the dishes is made with full respect for the aging characteristics of the elderly. For example, the contrast color of the dishes is particularly prominent, so that the elderly can see clearly, and the dishes are delicious and pleasing to the eye.

In short, there is a long way to go to deal with the dietary health problems of the elderly, which requires the active participation of all sectors of society to jointly build a healthy aging society.

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