

**NUTRITIONAL, HEALTH AND SOCIOECONOMIC STATUS OF THE
ELDERLY IN ST. ANDREW**

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The elderly are a rapidly growing segment of the population with specific needs. This study examined the nutritional, health and socioeconomic status of the elderly and its conversant impact on their quality of life. In addition, the findings were compared with those of studies conducted in 1989 and 1995 for any similarities or differences.

Persons aged 60 years and over were interviewed, height, weight, waist and hip measurements assessed, while haemoglobin, cholesterol, urine glucose and albumin were assessed for 27% of respondents.

Fifty-four percent of respondents were the young elderly while 45.5% were 75 years or older and so the old elderly. The majority of respondents (84.8%) were head of the household, with 48.5% being the sole occupant of their dwelling.

Respondents were reluctant to divulge information on their source of income but for 60.6% the family was the main source.

Despite the fact that 78.8% participated in community activities, 48.5% described themselves as being lonely sometimes.

The distribution of basic facilities saw 81.8% having a kitchen, 87.9% had a water supply within the home or yard and all respondents had a toilet.

An assessment of eating habits revealed that 54.5% shopped for themselves, 60.6% prepared their own meals and 66.7% had three meals each day. Fifty-eight percent were in the habit of eating alone and 75.7% described their appetite as good.

Only 6.1% of respondents gave a history of a heart attack or stroke. The distribution for other disease processes was 30.3% had high blood pressure, 27.3% arthritic and 9.1% diabetic. Vision was impaired for 63.6% of respondents and 3% experienced difficulty in hearing. Sixty-three percent of respondents fell within the normal BMI grouping with 9.4% being obese. Haemoglobin and cholesterol results fell within acceptable ranges and urinalysis for albumin revealed normal values for all respondents. Fifty-two percent of respondents felt they were in good health while 42.5% assessed their health as fair.

The employment status, sources of financial support and nutritional status of respondents was similar to that of 1989 and 1995. The elderly were fairly health

individuals and for those who had illnesses, the pattern of chronic diseases as diabetes, hypertension and arthritis along with deterioration in vision and hearing was similar in all three studies.