

FROM CHILDHOOD TO OLD AGE – A QUALITATIVE APPROACH TO THE STUDY OF PORTUGUESE ELDERLY'S PERCEPTION OF MEALS ACROSS THE LIFE CYCLE

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Abstract

Food in later life has been the focus of research in the past decades, especially in what refers to nutritional status and food consumption. Although biological, psychological, personal and economic determinants in food choice are well known, the relationship with the cultural environment has been less explored. Cultural rules determine daily and weekly sequence of meals, time and type of meal, what constitutes a meal, what is considered a proper meal, and distinguish a meal event from a snack.

The purpose of this study was to understand meals in the later life of Portuguese older people, focusing on the differences in the life cycle through a qualitative approach. Our research involved 80 Portuguese older people, free living in the community. We found that an easy childhood or the economic constraints in early childhood had a positive or negative impact in older people view of meals in past and present. The experiences in adult life (migration, marriage, having children, labour, disease) influenced daily routines, including eating, for both men and women. Meals across life were defined by gendered roles and discontinuity in relationships. Therefore, the presence of new relationships or life conditions will reflect in new challenges in domestic activities. In older age, being alone or isolated was an important determinant for eating habits. The loss of partner was the most reported situation, which was linked to eating alone and less satisfaction with meals. Having support from family or a specialized institution is central to the daily routines with meals. Understanding the meaning of meals in later life can be very useful in order to develop appropriate strategies for this population.

Key-words:

Life cycle; food habits; cultural aspects; social determinants; Portuguese elderly.

Resumo

A alimentação dos mais velhos tem sido alvo de investigação nas últimas décadas, especialmente no que se refere ao estado nutricional e ao consumo de alimentos. Embora os determinantes biológicos, psicológicos, pessoais e económicos da escolha de alimentos sejam bem conhecidos, a relação com o ambiente cultural tem sido menos explorada. As regras culturais determinam a sequência diária e semanal das refeições, o tempo e tipo de refeição, o que constitui uma refeição, o que é considerado uma verdadeira refeição, e distingue ainda uma refeição de uma merenda.

O objetivo deste estudo foi compreender as refeições em idade sénior numa população de idosos Portugueses, focando as diferenças ao longo do ciclo de vida, usando uma abordagem qualitativa. A nossa investigação incluiu 80 idosos portugueses a viver na comunidade. Verificou-se que a abundância ou as dificuldades económicas na infância apresentam um impacto positivo ou negativo na visão que os idosos têm sobre as suas refeições no passado e no presente. As experiências na vida adulta (migração, casamento, ter filhos, trabalho, doença) influenciaram as rotinas diárias, incluindo a alimentação, para homens e mulheres. As refeições ao longo da vida são definidas por papéis relacionados com o sexo e a descontinuidade nos relacionamentos. Assim, a presença de novas relações e circunstâncias de vida irá refletir-se em novos desafios nas atividades domésticas. Na velhice, estar sozinho e isolado era um importante determinante dos hábitos alimentares. A perda do parceiro foi a situação mais reportada, estando associada a comer sozinho e a

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menos satisfação com as refeições. Ter o apoio da família ou de uma instituição especializada era essencial para as rotinas diárias com as refeições.

Compreender o significado de refeições na velhice pode ser muito útil para o desenvolvimento de melhores estratégias para esta população.

Palavras-chave:

Ciclo de vida; hábitos alimentares; aspetos culturais; determinantes sociais; idosos Portugueses.

INTRODUCTION

Research on Food and Nutrition, particularly about older people, has been traditionally focused on nutritional requirements and food consumption of the different food groups. Quantitative data can be used for research of individual food habits and/or to obtain data about meal patterns. Nevertheless, cultural issues involving food consumption are not less important and some data are hardly obtained by quantitative approaches.

According to Fieldhouse, food habits exist and are maintained because they constitute behaviors with a practical or symbolic meaning in a specific culture¹. Or, as Peres stated, culture maintains what is useful². In this view we understand the importance of studying cultural aspects of food and meals, since they will reflect the way of living, thinking and acting of a particular population. When studying food habits other aspects have to be considered and those might achieve particular importance in some circumstances. In what refers to elderly people, there is a particular interest in collecting data about the behaviors of groups for genders and different ages, as well as living circumstances are concerned.

Men and women's attitudes and roles in terms of food and meal preparation are hugely different, which is more or less significantly according to each individual culture. When we think about living circumstances, habits that were acquired during life play an important role in the current attitude to food and meals as they may dictate the need to change or to adapt to new life situations. In the previous 200 years, women worldwide have increasingly joined the paid work force but according to social norms, work has been considered the main activity of men (providers) and a complementary activity for women (mainly the family caregivers). Paid work outside the family for women has been viewed as conflicting with time for home and the family³.

Aging can contribute to changes in the meal pattern and we can consider that the older elders might be less autonomous and more disabled than the younger ones. Obviously this is a questionable association since it depends on the individual physical and physiological impact of aging. In a study conducted among self-managing and disabled elderly women, researchers found that their meals were characterized by individuality and flexibility. They also found it was the definition of a meal event, rather than the time of consumption that dictated their nutritional content, especially in macronutrients⁴.

In terms of living circumstances, loneliness has been explored as it appears to influence the physiological signal and senses associated with eating, such as hunger and taste. Feeling dissatisfaction with food due to loneliness was implicated in conditions such as loss of appetite, loss of interest in cooking and eating as an obligation, among others⁵. Ambiance factors also affect food intake and food choices. Social facilitation and social modeling explain important features of eating behaviours⁶.

Still, even if eating is becoming more dependent of individual characteristics and conditions, the rituals and routines associated to meal continue to characterize consumption practices⁷. Customs and traditions, which influence the type of meals and what constitutes a proper meal (or does not), will then have a high impact on what is eaten and, as the end result, the nutritional value of our meals. Meal occasion and eating location are interconnected and determine food choices, as well as the meal construction and acceptability⁸. Though, a real or ideal meal could demand some specificities to be considered as so, namely a specific place, a specific time and a specific company.

But it is not only a cultural matter of customs and traditions, we still have to understand the older people's history to understand the way they feel and react in the present. The XXth century in Portugal was marked by

several relevant events: the fall of the Monarchy and the establishment of the Republic (5 October 1910), a military rebellion (1926) leading to a dictatorship (1926 to 1974), the reestablishment of parliamentary democracy following the 25th April 1974 revolution, the entry into the European Economic Community (1986) and joining the European common currency (1999) with the end of the national currency (“escudo”). Political instability that characterized Portugal in the first decades brought economic difficulties for the country. In a scenery of political, social and economic dissatisfaction, emigration was intensified, particularly in the 1960’s. It was considered that the hardest effect of war was felt during the First World War in which Portugal participated directly, since there was a contribution from the country with raw materials and fuels⁹. After this period the most marking features were the emigration and yet some instability until the entry in the new century. In this view, the older groups in Portugal tend to compare present conditions in reference to a past of deprivation.

A qualitative approach is used to describe food and meals using the perspective of older people during the life cycle (childhood, mid-life and older age), and also to identify the situations that affect food habits in older age. The definition of an “ideal” meal was also explored and several aspects were explored, namely the influence of disabilities and diseases, the crisis period, and economic changes/aspects. In this paper, the data from the Portuguese subjects in the Food in Later Life European project, is presented and discussed.

METHODOLOGY

The study included 80 Portuguese elderly people (aged between 65 and 91 years old at the time of data collection) living in their own home, belonging to the European project “Food in later life” . The sample was divided in eight groups presented in table 1, according to sex (male [*m*] or female [*ff*]), age group (65 to 74 years [*65-74*] or ≥ 75 years [*75+*]) and living circumstances (alone [*la*] or with others [*lo*]).

Table 1 — Participants (n) according to sex, age group and living circumstances

	MEN		WOMEN		TOTAL
	65 to 74 years	≥ 75 years	65 to 74 years	≥ 75 years	
Living alone	10	10	10	10	40
Living with others	10	10	10	10	40
Total	20	20	20	20	80

A semi structured interview was conducted for this purpose. The interview guide was created in English and then translated to Portuguese and back-translated to English. A pilot work developed previous to the main interviews was conducted for the Portuguese sample. The Swedish “Food in Later Life” team developed a code tree for the analysis of the interview transcripts and the MaxQDA software was used for qualitative analysis.

The data from this paper is part of the final reports developed for the Workpackage 6 “Meaning of the meals” in later life, which were presented in eight different reports according to the age groups, genders and living circumstances, for the theme “Transition in Life”, “Customs around the table” and “Concept of meal”. The subthemes included childhood, mid-life and older age, and several aspects were explored during these periods: disabilities and diseases, the crisis period, and economic changes/aspects, but also the concept of an ideal meal.

RESULTS

For a higher interrelation of the qualitative data, data is presented in two main themes: I) *A life course perspective of foods and meals*; and II) *Ideal meals, customs and special occasions*. For each theme and subthemes, some speech examples are presented.

I) *A life course perspective of foods and meals*

Childhood

Older men and women reported that childhood in those times was harsh. They remembered to have poor meals, although not all suffered from hunger. Those were times of very low food availability when compared to the present. The majority ate soup and bread, and not much more. Some men reported to work hard and to have just a soup to recover their energy. The economic status of their parents and having a good job or land were very important factors for the food availability at home. Those whose parents, mainly the head of the family (father), had a higher social position reported having always food to eat.

My meals... it was usually soup. [m, 65-74 la]

No. Hunger? I was never. [hungry] ... You know why? Because my father was a Republican Guard. On times when people had to cut the expenses, thanks God I had always food at home. We even gave food to the neighbours. [m, 75+, la]

My father was a police officer... he got us bread, sugar and olive oil... [f, 65-74, la]

I ate always very well. My mother was a dressmaker. [m, 75+, lo]

On **festivities** meals were better, with some meat and foods they were not used to eat every day. Sundays were the only day different from routine, but due to the difficulties, sometimes even that day was similar to the rest of the week.

My parents were poor. The only day we had a cake was on birthdays. [m, 65-74, la]

Every day we only had soup... Only on Sundays we ate different foods. [f, 65-74, la]

There were no special meals. It was the same on Sunday as during the week. [m, 65-74, lo]

Mid-life

In general, both men and women started to eat better in their adult age. Usually men started to work, left the parents' home and got married. Some men also mentioned they went to the **military service**. Women also reported they began to have more access to food, because they joined the work force and they started their own family after **marriage**.

It was just the three of us [own, son and husband]... We hadn't much but it was enough for us. [f, 75+, la]

When I joined the army... I remember eating other kind of foods. Lamb roast, curry rice... [m, 65-74, la]

Life got better [after marrying]. [m, 65-74, la]

Then I got married. And life started getting better, and then my wife always took really good care of me. [m, 65-74, la]

Some men mentioned they worked a lot, having no fixed schedule for meals. Those men talked about those times when they ate what they produced, from vegetables to meat. The women that **worked out of home** mentioned that they had less time to cook, so they had to prepare meals in advance.

I worked out of home and I had to prepare food before I left to work. [f, 75+, la]

If only a member of the couple was employed, the financial situation was poorer. In such cases, having a child would make life even more difficult and meant more constraints. For those situations, women referred that they **kept the best food for their children**. They did not eat in order to give the only foods available to their child, or they bought cheaper and less quality foods for themselves.

The steak... bananas... and the more expensive foods were for my child. [w, 75+, la]

But also some happy memories of **eating out** from the time of mid-life include having picnics or camping with their children.

We went out camping and we ate in the open air. It was nice! [f, 65-74, la]

In some instances, adult age was marked by the premature death of a partner. Some women referred to the early **death** of their husbands, for those who died very young still in middle-age. This meant a great change in their daily lives, as well as for special occasions.

When my husband was alive, all the birthdays were celebrated at my home. [w, la, 75+]

For some of the elders, the **health constraints** that affected food and meals started being reported at adult age and meant important changes they will maintain through all their lives.

You know [...] the doctor; three months after surgery [intervention] told me I could eat anything. [...] But during three months I had to eat from two to two hours. . . And then it was from three to three. . . and that is what I still do. [m, 75+, lo]

I had a surgery intervention to stomach and since then I can't eat foods made with milk. . . nor stews and fried foods. [m, 75+, lo]

Emigration was reported as a period of higher food availability but returning to Portugal, due to the colonial war, was referred as returning to poverty and having to start again without money. It meant financial difficulties and less money for food.

I had other kind of foods. We could eat more meat, more fruit. . . [f, 65-74, la]

When we returned. . . [...] we left all behind. I had bought a store; I left it there for them. [...] We didn't have any support when we returned. . . The salary was then little, but we lived [m, 75+, la]

Food and meals in older age

Older men and women reported that in older age they have well established routines. Women reported their meals to be more or less at the same time every day and that they prepare simple foods that don't demand too much time in the kitchen. They also mentioned to use strategies to cook less often. **Eating alone** was not frequent in the past, but it is now the most important condition in the meal situation mostly for women living alone. In the past, women usually stayed at home to take care of the children and do the domestic tasks. So usually men never needed to cook. As a result, in the present, men who live alone miss their spouses, who were in charge of everything related to the household tasks, including food. Usually they refer to prefer eating with someone. Older men reported they started **eating out** more frequently, in other people's home (family or friends), restaurant or day care centres. For women, the **death of their partner** is felt as having to prepare less food. One of the changes is not having a "real meal" for dinner, as they were used to do when their partner was alive. In the present, for dinner they only have a soup, bread with something and fruit.

I am starting to be a little bit lazy! [cooking] [f, 75+, lo]

Food now is not very different from the times my husband was alive. The only difference is that I don't cook dinner any longer. [f, 75+, la]

It's much different [since wife's death]. I had more varied menus. [...] only recovered appetite a little time ago. [m, 65-74, la]

I never had many chances to cook. [...] because I worked a lot. And when my wife got sick, we had to hire a housekeeper to help her. [m, 75+, la]

For women living with others, most referred to have their **meals** in the **company** of their husband's or other relatives with whom they live. Nevertheless, women living with their children reported to eat alone often if they don't spend much time at home. For men and women living with others who usually do not eat alone, they don't usually think about the possibility of eating alone. But women also mentioned they would not have the mood to cook only for themselves. Some of these women mentioned that when they are alone they eat too

little. Men who live with other people referred to eat mostly at home and that they only go to the café of social centres to socialise and eat snacks.

Well, usually I never eat alone... [m, 65-74, lo]

Oh! I am always with someone. [...] I think I would eat less. I think would not cook. [f, 65-75, lo]

Sometimes I go there [social centre]... just helps spending time. Playing domino... we order a glass of milk, a toast or something else. [m, 75+, lo]

Old age is related to more **constraints** and certainly **less satisfaction** with meals for women and men with health restrictions, or if their partners have those problems. The most common diseases that were associated with limited diet in older age were chronic illnesses or other conditions that affect the digestive tract, but the problems with mouth and teeth were also mentioned. Some elders view restrictions as being natural of the ageing process and that they feel they couldn't eat the same as when they were younger. Others referred that it is normal to have better appetite and that foods taste better in younger ages. Another interesting feature was that having some type of health constraints or being on a diet could have a strong influence in eating out. They don't enjoy having to order the diet menu or they feel uncomfortable eating some kinds of foods due to their illnesses.

I can't eat fried foods. Or else, I can eat them but I feel bad after eating. [m, 65-74, la]

After lunch I only take a coffee. I don't eat pudding or nothing else... I can't eat. My gallbladder... [m, 65-74, la]

Do you know what I like to eat? I like quince jam. But I can't eat. [...] I liked everything very sweet. [m, 65-74, la]

I eat fruit, but I can only eat bananas because I have no teeth. [m, 65-74, la]

But I didn't wanted it to be the same [foods]. I don't want to get fatter than I am already [m, 75, la]

In other times we could eat better because we had more appetite. [...] Also, I was younger and foods had better taste. [m, 75+, la]

Being a diabetic doesn't allow me to eat some kinds of foods. [m, 75+, lo]

I don't eat out, since I am in a diet. [m, 75+, lo]

I had to change my way of cooking and the kind of foods... it doesn't taste the same; it has no salt. [f, 65-74, lo]

Family can provide support, especially at weekends, when the daughter or son takes them to eat on Sundays, for example. For the women who live far from their family, the **neighbours or friends** can be an important support, and they eat together on weekends. Usually women don't invite people (family or friends) to eat in their homes any longer because they feel tired or they are no longer in the mood. Fewer reported still inviting their children and their families to eat with them every week. Men still living with their wives also avoid inviting people to eat at home because they don't want to overload them. **Divorce** although not common, was also associated to changes and the need to adapt to a new situation, associated with loneliness and sadness.

Since my husband died my son comes to pick me every Sunday. [f, 75+, la]

On Sundays I go eating at my daughter's. [f, 65-74, la]

Some older women still have their grandchildren to eat at their homes and have to prepare meals, and it is usually something they do with pleasure.

Sometimes I have my grandchildren for lunch, and I prepare something simple that they like. [f, 75+, la]

Economic considerations were also made by the participants, in two opposite situations: difficulties due to low income, or having more money to spend on food than they had before.

I can't buy many things that I would like to... [f, 65-74, la]

Since I am retired I eat what I want, I have enough money to eat what I like most. It's only for me. [f, 75+, la]

Many of the participants reported **not** being very **demanding** with foods in the present. Their lives regarding food and meals are highly marked by routine which is seen as a natural outcome of older age. Some even men-

tioned they couldn't eat better considering all the restrictions they have.

Now anything is good... When I was younger, the more I had (better)... Now, what would we choose? We eat something and it's alright. [m, 65-74, lo]

Sometimes sbe [wife] tells me: "I do not know what else I can cook for you ... Because I give you this and you're already tired of eating. I'll give you that, and you're also tired of eating." And also, I have to eat diet because I am diabetic. [m, 65-74, lo]

II) Ideal meals, customs and special occasions

For men and women, the **place** where they have their meals (kitchen, dining room) is one of the things that could be different when they have company and also the way they eat (at table or standing up). Still, some give high importance to eating at a nice table at the dining room, and say that they always eat there. Most of the older people referred to enjoy eating at home or in places where they are at ease. Being in a quiet place and being at ease is very important. TV was mentioned as a good company by some women living alone.

When I am alone sometimes I don't seat at the table for meals. [f, 75+, la]

For me alone... I eat at 6, 8 or 10 p.m. it doesn't matter... it's when I am hungry in front of my TV. The TV is my only company... [f, 75+, la]

The meals must be served at the table, in the dining room. I never eat in the kitchen, this happened only when I was little and we were too many brothers and sisters. There was no place for all of us at the table. [f, 75+, la]

A **nice table** is something most women enjoy. Some older men mentioned to like having a nicely laid table and that the table manners are important. Requirements for table are cloth and napkins and also that it should be clean.

I like to see a clean table cloth with napkins. For me it has to be napkins made of tissue because I don't like napkins made of paper. [m, 65-74, lo]

I like a nice table, with a lace tablecloth and something with fruit on the centre. [f, 75+, la]

Older people reported the differences in **behaviour** in the **meal situation** from the times when they were children to nowadays. Some elders don't like when their grandchildren don't behave at the table. They compare the children of present times to their own children and the education they gave them. For others, mainly women, children table manners don't matter and think it is funny when they get out and play around the table.

When it was time for the meal, as lunch and dinner, he [father] wanted us to be home to eat. He would not eat if they were not all at table [children]. [m, 65-74, lo]

I don't like that my grandchildren get up from the table. [f, 75+, la]

I think it's important [to behave at table] because my children were educated like that. Wherever we went they went with us and sit at table, each one ate with cutlery like us. [m, 65-74, lo]

Considering the **ideal meal** the elders believe it doesn't have to be special or elaborated, and that "everything" is good for them. But when we explored this concept, an "ideal meal" is usually associated with a better meal and to special occasions, like festivities and Sundays, for women. Men also reported an "ideal meal" could be a good meal such as the ones they have in special occasion or festivities and so it has to be more elaborated. Having roasted meats and traditional Portuguese foods were also considered as ideal meals for special occasions, usually including a drink and a sweet dessert.

On Sundays I eat at my sister's home, and it's usually a roasted meat and I have a sweet dessert. I also drink a glass of wine. [w, 75+, la]

It has to be stewed, more spicy... good looking and for that we have to add seasoning the day before, if we are cooking meat. If it's "Bacalhau à Brás" [traditional Portuguese dish made with cod-fish], or stuffed cod-fish in the oven... [more special foods need other kind of cooking] [f, 65-74, lo]

Alcoholic beverages, such as wine, were the most mentioned drinks by men as being an essential part of the

“ideal meal”. This is a cultural aspect, and we found these indications especially by participants from the rural areas, where wine production continues a very important activity. Some women also reported to have a glass of wine in special occasions or Sunday’s lunch.

Yes, it is important [drinking wine]. . . I don't fill it up but a small quantity tastes well. [m, 65-74, lo]

When I have company for meals I even drink a glass of wine. [f, 65-74, la]

The meal events from their childhood are still remembered and they miss the ones they had for Christmas, New Year and Easter, when the family was all together and they ate some foods which were not available throughout the year, like different meat and desserts, for example.

It was Christmas. . . we did a big party, were we had sweet desserts and many foods. And at Easter we did the Easter soup, a soup that I still make these days. [f, 75+, la]

Some women remembered some particular foods prepared by their mothers and grandmothers with much affection.

Before I got out of my home town I remember “arroz doce” [traditional sweet dessert made with rice] that my grandmother prepared in Easter. [f, 75+, la]

DISCUSSION

The present data identifies several cultural issues on the food and meals of the Portuguese elderly. Particular ways of living and coping with the new situations of the daily routine are the result of cultural issues, their past history and the marking events during the life course. Due to the nature of the sample it was not possible to analyze separately older people living with their partner and with other adults, such as their children. In some circumstances it was observed that the companionship is very important as it was developed during a life of share, and it could influence the perception and the need of being with the partner rather than the children and its family.

Past and present behaviors in food and eating management were linked to living circumstances in previous studies, namely the personal, social and environmental ones. The challenges due to the changing situations were also reported to result in changes in life, as due to financial constraints. The social relationships, including the ones with parents, children and colleagues, are considered mutable, and changes in these relationships can have a positive or negative impact in relation to food and eating and household responsibilities¹¹. The present study revealed that changes in the social and financial support resulted in changes with food related life. We found mostly changes due to economic circumstances and changes in the family structure, as for example getting married and having children, or taking care of grandchildren and being alone in older age. In summary: participants’ childhood was marked by economic constraints as we will discuss further; marriage and starting to work was usually determinant of better life conditions; having children was positive or negative depending on the income of the couple; emigration was usually associated with better foods and meals; being alone was related with less appetite and satisfaction with foods; family and other social support were relevant for having meals in older age.

Portuguese elderly suffered mostly by the economic constraints⁹ which were more or less generalized in the society when they were children, mainly for the ones that were born in the first decades of the twentieth century. The ones that were born from 1930 to 1940 could have better life conditions or still suffered the negative consequences of the previous decades. The following decades were characterized by less marking events and, in fact, most elders’ referred they lived their adult life with better conditions or that the general conditions in Portugal were better than during their childhood.

With the present research we find that the ideal meals continue to be associated with structured and social events for older people. The idea that family meals are disappearing has been proposed by several researchers in the last decades. Although the disappearance of the traditional meal was suggested for the European countries, conclusions from quantitative and qualitative studies have been divergent. A study developed in Flanders discussed that meals were still highly structured events in a temporal, social and spatial perspective. It considers

that meals were social events, usually with family as the regular meal partners, although there was an increase in the number of solitary eating events for breakfast. Another finding was that eating was still concentrated in specific moments of the day, mainly in the three meals, and home was still the most common place for having a meal, although other places have an increasing relevance for meals on weekends¹². Our elders also presented a defined routine with meals, usually at home during the week and more elaborated meals at the weekends, mainly family meals. Older women reported they maintained their routines with meals, but they had spent less time with meals in mid-life if they were working. It is considered that social habits, routines and conventions are resistant to fast changes in what concerns to food, although there is a decline in the time spent in food practices¹³. Our study is consistent with these findings enhancing the importance of the working activity in the time available for food preparation and cooking. The household responsibilities changed as result of changes in the family structure, more often for men that suffered the death of their partner. Pertaining to meals, the place where older people eat is surrounded by meaning, and eating or not at the table can denote a certain negligence or, in the contrary, a special care. It seems the meal will lose some of its meaning if the table is not nicely laid. We can also notice a difference between eating in the kitchen or at the dining room, as the second space is nobler than the first.

In reference to cultural issues, the most determinant factor related with meals in older age is probably gender. All the discourses of participants are marked by gender differences, with a high cultural connotation of what is supposed to be a woman or a man's task. Also, in what concerns being alone and responsible for its own meals, it is quite different being a man, usually not used to household tasks, or a woman who has been the main responsible for cooking at home. Focusing on the turning points that occur during life for European older people, women that live alone were usually unmotivated to cook¹⁴. A recent study explored this theme and concluded that cooking is considered more pleasurable if the purpose is sharing or to please others, especially family or friends. Cooking only for themselves is less satisfactory and has the only purpose of meeting nutritional requirements¹⁵. Having a meal is also an unpleasant task for the older women that live with the spouse or companion in their homes¹⁶. Many of the Portuguese older women said they didn't have the ability or the mood to cook for many people. It is interesting to discuss the gender shaping of the discourses of older people. Although it is not an immediate result from our study, we found differences in reports from the interviews of men vs women when we asked about food and meals across life cycle. Generally, men spoke freely about meals they liked, particularly some Portuguese dishes, eating out habits in adult or older age, eating with family or going to a day care center. Women also reported those features but unavoidably spoke about cooking and food preparation tasks over their life course, as also the limitations they might feel in older age.

Some older women still enjoy having people to eat at their homes. It has been suggested that receiving guests can be enjoyed by older women who appreciate being able to act as hostesses, in a free choice basis¹⁶. Also, when considering parenthood, we can find opposite situations depending on wellbeing. As some older women were found to enjoy it, mainly those who present resources, continued personal growth and positive functioning; others with low psychological well-being can experience high stress levels in their relationship with grandchildren¹⁷. The food related activities in daily living of older women can be regarded as enjoyable or unpleasant when they assume the role of parenthood. The impact of the social and cultural dimension of food has to be considered in order to avoid misunderstanding of some issues in present activities⁵, as for example if the simple preparation of meals will act as stressful or enjoyable for older women.

When comparing the two age groups we found no differences in the discourses of the elderly participants. We can consider that the social and cultural aspects are the ones who determine the relationship of older people with foods and meals, and not their biological age.

Concerning changes with food and meals related with health constraints and other situation, we found many reports of less satisfactory meals in older age. Growing old is not necessarily associated to a bad quality of life and general well-being does not decrease with age as a rule. In fact, the deficiencies induced by the aging process vary enormously and are not necessarily felt as impairments for daily lives of older people¹⁶. But many of the incapacities and problems in older age are associated with less satisfaction with food and meals, especially those related to chronic diseases in which dietetic treatment is relevant (e.g. Diabetes, heart disease, digestive pro-

blems, gout, and food intolerances). A poor health condition has been reported to result in dietary restrictions with a high impact in the food scheme of individuals and their households in adults¹¹. Our data is consistent with the previous findings in this area. Older people referred they started to eat more or less, or to diet in the presence of some health conditions and those situations could have started in the adult life or only at older age. Still thinking in satisfaction with food and meals, an interesting finding was that participants mentioned that for their age, eating anything is enough, perhaps because they were not used to have much food availability from the times when they were children. Also, in the present, they think that they can't ask for much more, due to illnesses, economic constraints or other life circumstances. This result reveals the importance of the past in the present relation with meals, but also a self-perception and reasoning for the relation between foods and satisfaction in their wellbeing.

Researchers have enhanced the value of an open qualitative approach for obtaining data about dietary intake, namely to question about the number and composition of eating events and their frequency per day or per week, considering the personal designation given by the elderly people to each event⁴. Qualitative research in elderly population can also be more comprehensive and bring to light numerous issues which could not be described by other type of research. Davidson et al. discussed the role of genders and social conditions of older people and presented some interesting findings. Most of the findings reinforced the previous studies about the changes in the life course and its implications for food and meals, the gendered roles in what refers to foods, the importance of discontinuity in relationships and roles, the presence of new challenges in domestic activities, among others. A new condition as re-partnering was found to influence new routines, requiring a re-evaluation and renegotiation in what refers to food and meals. The authors also concluded that gendered norms prevail in the shaping the new roles and relations, determining a continuity of transitions in later life¹⁸. A study developed with older people in the UK concluded that, in general, partnership dissolution did not show the expected detrimental relationship with later-life support since the increase of necessity with older age and health constraints was associated with an increase of formal and informal support, regardless of the family history¹⁹. Considering that Portugal is not yet adequately organized in formal and informal networks of support for older people, future elder groups with marriage dissolution will likely to withstand many difficulties in their daily routines. In the present data we identified gender issues and the changes in roles from the changes in the living circumstances. Nevertheless, we did not identify specifically differences in what concerns new relationships of older people that were first living alone. As this condition could become more prevalent due to changes in the society, it could be interesting to explore the role of new partnerships in further studies. In fact, the structural changes in family have already been focused by Fieldhouse, namely the beginning of the one-parent families and end of extended families. All over Europe, research has reported radical changes in society and new circumstances for old age with impact in life course perspectives²⁰. Considering that these changes occurred in the past decades, the future older generations will have new issues to be discussed, according to a new family and social structure. The changes that have taken place in the last decades altered many of the roles and the identity of older people in their food related life. This study developed in a Portuguese elderly population reinforces the need of addressing gender and social issues when discussing the older people views about food and meals.

CONCLUSIONS

For the Portuguese elderly, childhood was rough due to the economic crisis and war in Europe. They experienced a very difficult period which marked their lives. In their adult life, some had to migrate mostly to the African colonies and had to return a few years later. Entering the labour market influenced daily routines, including eating, for both men and women. In older age, being alone or isolated is also an important determinant for eating habits. Having support from family or a specialized institution is central, especially for the ones that live alone. Eating alone is the most common situation for the ones who live alone. Men particularly mentioned the changes they had to deal with after their spouses' death. Usually eating alone is less satisfactory, although women think at this situation as a natural and almost inevitable event. Regarding customs, from the descriptions of their childhood we understand that being at the table had a different meaning from today's children, currently

their grandchildren. The meal event was more solemn and meticulous, and everyone had to be at the table in order the meal to begin.

As some physiological and biologic changes in older age are individual factors that cannot be predicted or avoided, other circumstances can be modified. The promotion of quality of life can be achieved through positive strategies and habits, as well as being active, strong social and family relations and improvement of coping skills. The present paper used a qualitative approach of the Portuguese views of food and meals, providing a deeper knowledge about the routines in older age and contributing to the development of focused strategies for the older population.

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